Separate approaches to the provision of emergency psychological, psychiatric and psychotherapeutic assistance in emergency situations

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Abstract
The paper considers individual approaches to the provision of emergency psychiatric care in emergency situations. The authors believe that emergency psychological, psychiatric and psychotherapeutic care is an important component of the healthcare system and plays an important role in providing timely assistance to people facing crisis situations, including mental disorders, suicidal thoughts, traumatic events and other problems.

The main task of emergency psychological, psychiatric and psychotherapeutic care is to provide quick and effective assistance in an emergency situation when every minute matters and can save a life. In addition, emergency psychological, psychiatric and psychotherapeutic care can also help prevent the development of mental health-related diseases and provide patients with access to the necessary resources and treatment.

It is important to note that urgent psychological, psychiatric and psychotherapeutic care should be available to everyone who needs it, regardless of age, gender, social status and other factors. At the same time, it is important to take into account the cultural and ethical characteristics of each patient and provide them with an individual approach and high-quality care.

Keywords
emergency psychological and psychiatric care, psychotherapeutic care, emergency situations

Introduction
Emergencies, such as accidents, catastrophes, terrorist attacks, earthquakes, fires and others, can have a significant impact on the psyche of people in such situations. The impact of emergency situations on the psyche of patients can manifest itself in various ways, depending on the type and severity of the situation, as well as on the individual characteristics of the patient. One of the most common psychological consequences of emergencies is the appearance of stress. People who have been in an accident, for example, may experience intense fear, anxiety, panic, helplessness and anxiety. This can lead to the development of various mental disorders, such as post-traumatic stress disorder (PTSD), depression, anxiety disorders and others.

In addition, emergencies can lead to a violation of the behavior and thinking of patients. They may have difficulty concentrating, making decisions, and navigating time and space. Also, emergencies can cause increased aggressiveness and irritability in patients[1].

In general, the impact of emergencies on the psyche of patients can be very serious and may require urgent psychiatric care. In such cases, it is important to carry out timely diagnosis and provide effective assistance to prevent the development of severe mental disorders and give patients the opportunity to recover after the incident.

The purpose of the work is to consider individual approaches to the provision of emergency psychiatric care in emergency situations.

Materials and methods
To write the study, various theoretical and practical approaches to the provision of emergency psychiatric care in emergency situations in Russian and foreign literature were considered, the data obtained were summarized by means of a comparative method, the analytical method and the induction method were also used in the work.

Results
Emergencies can cause different reactions in people depending on their individual characteristics, life...
experience, degree of involvement in events and other factors. Some of the possible responses to emergencies include:

- stress reactions that include increased arousal, anxiety, irritability, anxiety, panic, physiological reactions to stress (for example, palpitations, sweating, trembling);
- reactions to trauma, which includes denial, shock, disbelief, anger, depression, post-traumatic stress syndrome (PTSD);
- reactions to loss, which are grief, despair, apathy, depression, a sense of meaninglessness, suicidal thoughts and attempts;
- reactions to social changes, such as a sense of loss of control, uncertainty about the future, a sense of helplessness, loss of trust in others, social isolation [2].

The specifics of the impact of emergency situations on the psyche of patients may also depend on the characteristics of the situation itself, for example:

- the degree of threat. The higher the degree of threat to life and health, the more intense and long-term the reactions of patients can be;
- the degree of loss of control. If a person does not have the ability to control the situation, this can cause a stronger reaction to stress and increase the likelihood of developing PTSD;
- type of event. Different types of emergencies can cause different types of reactions in people (for example, accidents, terrorist attacks, natural disasters);
- the duration of a traumatic situation. If a person is in a situation for a long time, this can lead to chronic stress and an increased risk of developing mental problems [3].

Emergencies, such as plane crashes, earthquakes and terrorist attacks, can be very stressful for people at risk, as well as for those who deal with them (rescuers, medical personnel, etc.). Consider the characteristics of stress factors characteristic of these types of emergencies:

1. Surprise. Emergencies occur suddenly and unexpectedly, which can cause people to feel a sense of loss of control and helplessness.

2. Threat to life. People who are at risk often feel their lives are threatened, which can cause them to feel fear and anxiety.

3. Loss of loved ones. In the event of terrorist attacks or plane crashes, people can lose loved ones, which can cause them deep sadness and mourning.

4. Instability. Emergencies can lead to the destruction of infrastructure and disruption of the normal order of life, which can cause people to feel unstable and uncertain.

5. Emotional loss of control. People may experience an emotional loss of control, which can lead to pronounced emotional reactions, including behavioral disorders.

In general, stress factors characteristic of emergency situations can be very severe for people and require effective psychological support [4].

When providing psychological assistance to patients in an emergency situation, it is important to conduct a preliminary assessment of their mental state. This will allow you to determine the presence of psychological problems and choose the most effective methods of assistance.

The following are the main stages of the preliminary assessment of the mental state of patients in emergency situations:

1. Assessment of physical condition. Before conducting an assessment of the mental state, it is necessary to make sure that the patient is safe and his physical condition is satisfactory. This may include measuring pulse, blood pressure, respiratory rate, and body temperature.

2. Assessment of medical care needs: When providing emergency psychological and psychiatric care, it is also necessary to determine the patient's need for medical care. If the patient has physical injuries, he may need urgent medical examination and treatment. This may also include additional examinations such as X-rays or CT scans.

3. Assessment of symptoms of mental disorder. It is necessary to identify the presence of symptoms of mental disorders, such as anxiety, depression, insomnia, hallucinations, disorientation in time and space. This may include conducting an interview to find out what symptoms are present, how severe they are and how long they last. The assessment may also include an assessment of the presence of memory disorders, orientation, fear and other emotional states.

4. Stress level assessment: During the assessment, it is necessary to identify the level of stress caused by an emergency. Patients may experience symptoms of post-traumatic stress disorder (PTSD), such as repeated memories, recurring dreams or nightmares, as well as severe anxiety or irritability.

5. Assessment of individual characteristics: It is necessary to take into account the individual characteristics of the patient, such as age, the presence of
pre-existing mental disorders, the presence of social support and religious or cultural beliefs.

6. Assessment of psychological assistance needs: After conducting a preliminary assessment, it is necessary to determine the patient's needs for psychological assistance and select the most effective methods of assistance, such as psychotherapy or medication.

7. Self-harm risk assessment: When assessing the psychological state of the patient, it is also necessary to determine whether there is a risk of self-harm or violence towards others. This may include assessing the presence of suicidal thoughts, suicide attempts, the presence of aggressive behavior or threats towards others [5].

Conducting a preliminary assessment of the mental state of patients in an emergency situation is an important step to determine the necessary assistance and support in a difficult life situation [6].

Unlike emergency psychological care, emergency psychiatric care is a medical intervention that is carried out in order to prevent suicide, aggressive behavior and other dangerous manifestations of mental disorders. Usually this type of assistance is provided in emergency situations, for example, when a patient is in a state of crisis requiring urgent intervention.

Methods of emergency psychiatric care may include:

1. Assessment of the clinical picture and assessment of the risk level. This includes assessing whether the patient has symptoms of mental disorders, the level of threat to the patient and others, as well as other factors affecting the safety of the patient and others.

2. The use of medicines. Medications that are used in emergency psychiatric care may include sedation medications, antiepileptic medications, antipsychotic medications, and others.

3. Psychotherapeutic intervention. This may include short-term psychotherapy in emergency cases, for example, when it is necessary to manage strong emotions or when the patient is in a state of panic.

4. Hospitalization. If the patient is in a condition requiring more serious medical intervention, he may be offered hospitalization in a psychiatric clinic or hospital [7].

It is important to note that emergency psychiatric care should be provided only by experienced and qualified specialists in accordance with medical standards and regulations [8].

Methods and technologies for assessing the clinical picture and the level of risk in emergency psychiatric care may include the following:

– clinical examination: this is the primary method of assessing a patient in emergency psychiatric care. It includes the collection of anamnesis, physical and neurological examination, assessment of the psychomotor state, the presence of hallucinations and delusions, as well as the risk to yourself and others;

– mini-mental testing: This is a test that is used to evaluate cognitive functions such as memory, attention, orientation in space and time. It can help determine the presence of mental disorders;

– application of the depression assessment scale: it is a tool for assessing the presence of symptoms of depression. It can help to identify the severity of the depressive state and choose the most effective method of treatment;

– application of the suicide risk assessment scale: It is a tool for assessing a patient's suicide risk level. It can help the doctor to make a decision about strengthening measures to prevent suicide;

– application of the aggressive behavior assessment scale: this is a tool for assessing the risk level of aggressive behavior in a patient. It can help the doctor to decide on strengthening measures to prevent violence;

– application of the anxiety level assessment scale: this is a tool for assessing the level of anxiety in a patient. It can help determine the need for the use of anxiolytic drugs and other treatment methods;

– use of neuropsychological testing tools: This is a test that is used to evaluate cognitive and psychomotor functions. It can help to identify the presence of mental disorders, such as schizophrenia, bipolar disorder and depression [9].

Assessment of the clinical picture and the level of risk in emergency psychiatric care is a very important part of the treatment process, since it allows you to quickly determine the most effective actions of a doctor to provide specialized care to a patient [10].

Drug therapy in emergency psychiatric care has its own peculiarities due to the need for rapid and effective elimination of symptoms of mental disorders. The basic principles of drug therapy in emergency psychiatry are:

– rapid onset of drug action. In acute mental disorder, rapid reduction of symptoms is required to prevent dangerous consequences, such as suicide or violence. Therefore, it is important to choose a medicine that begins to act quickly;

– injectable form of drugs. The injectable form of drugs provides a faster and more reliable effect on the
body, since the drug bypasses the gastrointestinal tract and enters the blood immediately;

– the choice of a drug that corresponds to the clinical picture and the level of risk of the patient. It is necessary to take into account the characteristics of a mental disorder, the presence of concomitant diseases and the individual characteristics of the patient;

– the short duration of the course of treatment. In emergency psychiatry, treatment is carried out for a short time, usually for several days, to prevent possible side effects of medications;

– observation of the patient during treatment. It is important to regularly assess the patient's condition and adjust treatment in accordance with changes in the clinical picture;

– compliance with the rules for the use of medicines. It is important to follow the instructions for the use of medications and do not exceed the dosage to avoid possible side effects;

– individual approach to each patient. It is important to take into account the individual characteristics of the patient, such as age, gender, physical and mental condition, the presence of concomitant diseases, allergic reactions, etc. [11].

Short-term psychotherapy (STP) can be an effective method in emergency psychiatry for rapid improvement of the patient's condition. STP can be used to improve symptoms and help the patient make a quick decision in a crisis situation.

KVP is usually carried out over several sessions and may include techniques of cognitive behavioral therapy, interpersonal therapy or dialectical behavioral therapy [12].

The main goals of STP in emergency psychiatry may include:

– reduction of anxiety and depression;

– improving the patient's ability to solve problems and make decisions;

– reduction of suicidal and auto-aggressive behavior;

– improving the patient's ability to communicate and interact with the outside world;

– helping the patient to realize their resources and capabilities.

STP can be performed individually or in a group form, depending on the needs of the patient and the availability of resources. In addition, STP can be used in combination with other treatment methods, such as pharmacotherapy and maintenance therapy.

Emergency psychotherapy in emergency situations is a specialized method of psychological and psychiatric care aimed at providing quick and effective assistance to patients who find themselves in a crisis situation. Most often, the method of emotionally-oriented therapy (EOT) is used, which is aimed at working with the emotional experiences of the patient. Within the framework of EOT, patients study their emotions, identify their sources and learn to regulate them. This technology can be especially useful for those who are faced with the loss of a loved one or other serious shocks [13].

For some patients, psychodynamic therapy may be effective, which helps patients to realize and understand the deeper causes of their emotional reactions and behavior. As part of psychodynamic therapy, patients discuss their internal conflicts related to loss, trauma and other events that may be related to emergencies. However, it is important to remember that the choice of therapeutic technology depends on the individual needs of each patient, as well as on his physical and psychological condition.

Discussion

When providing emergency psychological and psychiatric care, it is necessary to provide support and first aid. This may include providing a place to rest, drinking water, medications, and other activities that will help the patient cope with an emergency.

After an initial assessment of the patient's condition, it is necessary to determine the needs for additional assistance. This may include recommendations on the next steps of treatment, consultations with a psychologist or psychiatrist, hospitalization in a hospital or transfer of the patient to other specialists [14].

In general, the methods of priority assessment of the condition of patients who find themselves in an emergency situation should be fast, but thorough, in order to determine the presence of physical injuries and mental disorders, as well as the risks of self-harm or violence towards others. This will allow doctors to provide the most effective care to patients in the shortest possible time.

When providing emergency psychological and psychiatric care to patients in an emergency situation, supportive therapy methods can be useful to help patients cope with stress and trauma [15]. Some of these methods may include:

1. Supportive conversations. Conversations with patients can help them express their feelings and emo-
tions, as well as get information and support from a doctor. The doctor can help the patient express their feelings, talk about what they have been through and what they feel. It may also be useful to discuss with them an action plan and ways to cope with stress.

2. Relaxation techniques. Relaxation techniques can help patients reduce stress and anxiety levels, such as breathing exercises, meditation, yoga, progressive muscle relaxation and other techniques.

3. Informing about resources. It may be useful for patients to know about the resources that are available to them for additional support and treatment, for example, organizations providing psychological assistance, support groups, as well as medications that can help in coping with stress and anxiety.

4. Development of stress management skills. A doctor can help patients develop stress management skills, such as setting priorities, planning actions, avoiding negative thoughts, exercise, and others.

5. Social support. Social support can play an important role in overcoming stress. A doctor can help patients find support in their loved ones, friends, or other people who can help them cope with an emergency.

6. Psychotherapy. Psychotherapy can be an effective method of treating patients who find themselves in an emergency situation. The doctor can use various methods of psychotherapy, such as cognitive behavioral therapy, interpersonal therapy, psychodynamic therapy and others, to help patients cope with stress, anxiety or other emotional problems.

7. Group therapy. Group therapy can be useful for patients who find themselves in an emergency situation, as they can get support from other people who are going through similar problems. Group therapy can help patients improve their social support, develop stress management skills and learn to better understand their emotions and feelings [16].

In general, supportive therapy methods can be very useful for providing emergency psychological and psychiatric care to patients in an emergency situation. It is important to remember that each patient is unique and may require an individual approach in providing care.

It is also necessary to take into account the fact that the provision of emergency care must necessarily be supplemented by the prolongation of specialized measures designed to stabilize the mental state of patients in an emergency situation, since short-term care for such patients is not enough [17]. In this regard, the use of individual psychotherapeutic technologies in the course format is recommended. Let's look at them in more detail.

1. Cognitive behavioral therapy (CBT) is one of the most common and effective therapeutic technologies for the treatment of a wide range of psychological disorders, including anxiety and depressive disorders, phobias, post-traumatic stress syndrome, eating disorders, drug addiction and others.

The basic principle of CBT is that thoughts, emotions and behavior interact with each other, and a change in one element can lead to a change in others. CBT helps patients to change negative thoughts and behaviors that can lead to depression, anxiety and other disorders [18].

Some methods and technologies of CBT include:

- training in relaxation skills. This may include methods of breathing exercises, progressive muscle relaxation and other techniques that help patients reduce anxiety and tension;
- training in the technique of cognitive restructuring. This technique helps patients rethink their negative thoughts and beliefs that can lead to depression, anxiety and other disorders. Patients learn to recognize their negative thoughts and replace them with more realistic and positive ones;
- building a hierarchy of fears. For those who suffer from phobias or other anxiety disorders, a therapist can help make a list of situations or objects that cause fear, and build a hierarchy from the smallest to the biggest fears. Patients can gradually and systematically study these situations, starting with the youngest, and gradually overcome their fear;
- behavioral experiments. They include practical tasks that help patients to check their negative thoughts and beliefs in real situations;
- change of cognitive distortions. This exercise is focused on changing negative thoughts and beliefs that can support problematic behavior or emotional state. This approach involves the use of methods of reassessment and restructuring of thinking, which allow the patient to rethink his thoughts and rebuild his attitude to the problem;
- training in self-control and relaxation skills. This approach is aimed at helping the patient to manage their emotions and behavior in situations that can cause stress. It includes methods of deep muscle relaxation, breathing exercises, meditation and other techniques that can reduce the level of anxiety and tension;
– social skills training. The purpose of this approach is to help the patient improve his communication skills and behavior in society. It includes such methods as training in social skills, training in conflict management, training in empathy skills and others [19].

Metacognitive regulation therapy is a new approach in cognitive behavioral therapy that aims to help patients manage their thoughts and feelings. It is based on the idea that not just the thoughts and feelings themselves, but the patient's ability to manage them and switch between them, is the key to a healthy mental state. Metacognitive regulation therapy includes methods aimed at teaching the patient to manage his thoughts and feelings, as well as developing the ability to self-control.

Dialectical behavioral therapy (DBT) is a form of psychotherapy that is based on cognitive behavioral approaches and is used to treat various mental disorders, including the fight against addiction, personality disorders, anxiety and depressive disorders. The main idea of DBT is that patients can learn to regulate their emotions and behavior by taking responsibility for their lives [20]. Various methods and technologies are used for this, including:

– ability to manage emotions. Patients learn to recognize their emotions and then use emotion management techniques such as breathing exercises, meditation and relaxation to cope with them.;
– working with thoughts. Patients learn to recognize and correct negative thoughts that can enhance their emotions and behavior. They can also use cognitive adjustment techniques to replace negative thoughts with more positive ones.;
– ability to set goals. Patients learn to set realistic goals for themselves and create plans to achieve them. This can help them feel more confident and in control of their lives.;
– working with relationships. Patients learn to establish and maintain healthy relationships by participating in social skills trainings and applying effective communication skills.;
– training in problem solving techniques. Patients learn to identify problems and develop strategies to solve them. This can help them feel more self-confidence and determination;
– work with a therapist. The therapist plays an important role in helping patients achieve their goals. He can provide support, help develop skills and interact with patients to improve their understanding of reality perception and awareness of themselves in the world.

Next, let's look at some of the methods and technologies used in DBT:

– Mindfulness (mindfulness) is a method that helps people focus on the current moment and feelings, and not on the past or the future. In DBT, this method is used to develop patients’ ability to manage their emotions, to be aware of their needs and feelings, as well as to improve interpersonal relationships;
– emotion regulation is a technology that helps patients learn how to manage their emotions and respond to stressful situations more adaptively. Various methods are used in DBT, such as working with negative emotions, breathing exercises, meditation and other techniques;
– working with interpersonal relationships is a technology that helps patients learn how to establish healthy boundaries in relationships with other people, improve communication and resolve conflicts. DBT uses methods such as social skills training, working with interpersonal addiction problems, and others;
– working with catastrophic thinking is a technology that helps patients learn to distinguish reality from their experiences and negative thoughts. DBT uses methods such as cognitive restructuring, working with established beliefs, and others;
– learning the technique of intelligent acceptance is a technology that helps patients learn to accept situations as they are, rather than resist them. DBT uses methods such as working with unproductive thoughts and beliefs, teaching patients to find alternative solutions, and others;
– behavior regulation training is a technology that helps patients learn how to make decisions and manage their behavior in accordance with their goals and needs [21].

DBT also uses meditation and mindfulness techniques to help patients develop skills in managing their emotions and thoughts. These methods help patients to be aware of their thoughts and emotions, not to get attached to them and not to let them control their behavior.

Another important component of DBT is working with modes (modes) – specific states of mind that a patient may have in response to certain situations. Regimes can be destructive, for example, when a patient experiences severe anxiety or anger, and can lead to unproductive behavior. DBT helps patients develop
strategies to manage these regimens and transform them into healthier and more productive states.

In general, DBT provides patients with the tools they need to manage their thoughts and emotions more effectively, which can be especially useful in emergency situations when stress and emotional tension can be very high.

Interpersonal therapy (IPT) is a short-term, problem-solving-focused form of psychotherapy. The main goal of IPT is to improve the quality of the patient’s relationships with other people.

IPT methods and technologies include:
- evaluation of relationships. IPT begins with the patient’s assessment of his relationships with other people, as well as with the study of how these relationships affect his emotional state;
- identification of problem areas. In IPT, patients learn to identify specific problems in their relationships and understand how they can affect their emotional state;
- development of strategies for improving relationships. After identifying problem areas, patients learn to develop strategies to improve their relationships. These strategies may include communication skills, improving mutual understanding, and establishing healthy boundaries;
- training in conflict resolution. IPT also includes teaching patients to resolve conflicts that may arise in their relationships with other people. Patients learn to identify the causes of conflict and develop strategies to solve it;
- definition of psychological problems. IPT also helps patients identify which psychological problems may arise as a result of problems in their relationships, such as depression or anxiety, and develop strategies to address them;
- individual support. IPT also includes patient support, especially in cases where they feel isolated or incomprehensible to other people. Support can include emotional support, communication tips, and setting healthy boundaries.

Conclusions

Emergency psychological, psychiatric and psychotherapeutic assistance in emergency situations may include many measures, depending on the nature and severity of the situation.

One of the main priorities is to ensure the safety of all those in the crisis zone. First of all, it is necessary to make sure that there is no threat to the life and health of people at risk.

If people with mental disorders are present in an emergency situation, special support and treatment measures may be required. For example, medications may be prescribed to relieve anxiety or anxiety, and a psychiatrist and a psychologist may also be consulted.

In the case of mass trauma, such as a terrorist attack or a natural catastrophic event, psychiatric care may include group counseling and therapeutic sessions to help survivors cope with psychological stress and trauma.

It is also important to take measures to prevent and prevent the occurrence of mental disorders in the future. This may include information campaigns, mental health education, stress management trainings, etc.

In general, emergency psychiatric care in emergency situations should be comprehensive and aimed at supporting the mental health of people in difficult conditions.

References

8. Katz CL, Pellegrino L, Pandya A, Ng A, Delisi LE. Research on psychiatric outcomes and interventions


