



ECHO Idaho: Behavioral Health in Primary Care

Treatment of Co-occurring Disorders

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The speaker has no significant financial conflicts of interest to disclose.

Learning Objectives

- Define Co-occurring disorders
- Co-occurrence of Mood Disorders and Substance Use Disorders (SUD)
- Diagnostic considerations for co-occurring mood disorders and SUD
- Treatment Considerations

Definitions

- The coexistence of both a mental health and a substance use disorder is referred to as co-occurring disorders.

Prevalence

- According to SAMHSA's [2014 National Survey on Drug Use and Health \(NSDUH\) \(PDF | 3.4 MB\)](#) an estimated 43.6 million (18.1%) Americans ages 18 and up experienced some form of mental illness.
 - In the past year, 20.2 million adults (8.4%) had a substance use disorder. Of these, 7.9 million people had both a mental disorder and substance use disorder, also known as [co-occurring mental and substance use disorders](#).
 - During the past year, for those adults surveyed who experienced substance use disorders and any mental illness, rates were highest among adults ages 26 to 49 (42.7%).
 - For adults with past-year serious mental illness and co-occurring substance use disorders, rates were highest among those ages 18 to 25 (35.3%) in 2014.

Anxiety Disorders and SUD

- Substance use, physiologic dependence, and withdrawal can mimic or exacerbate symptoms of anxiety.
 - Stimulants
 - can cause heart palpitations, trembling or shaking, sweating, dizziness or feeling faint, depersonalization, paresthesias, nausea, and hot flushes.
 - Withdrawal from abused substances, including opioids, alcohol, and benzodiazepines, can generate anxiety symptoms.
 - Opiate withdrawal
 - insomnia, nausea, and diarrhea
 - may be distinguished from independent anxiety by the often severe muscle aches, vomiting and fever.
 - Alcohol and benzodiazepine withdrawal
 - may generate anxiety symptoms
 - insomnia, psychomotor agitation, tachycardia, perspiration, nausea, and tremor.

Anxiety Disorders and SUD

- Substance use disorder (SUD) commonly co-occurs in anxiety-related disorders (in DSM-5 these include the anxiety disorders, trauma and stressor-related disorders, and obsessive-compulsive and related disorders)
- Need for period of abstinence to accurately diagnose
- Treatment

Depression and SUD

- Depressive syndromes may be caused by intoxication or withdrawal from a wide range of substances and medications including:
 - alcohol
 - amphetamines
 - cocaine
 - opiates
 - sedative-hypnotics
 - stimulants
- Treatment

Bipolar and SUD

- Studies of bipolar patients in clinical settings indicate that comorbid alcohol and drug use disorders are associated with a worse course of illness
 - More mood symptoms
 - More hospitalizations
 - Decreased likelihood of recovery from mood episodes
 - More recurrent mood episodes
 - Poorer psychosocial functioning and quality of life
 - Higher levels of aggressiveness and more arrests
 - More suicide attempts

Methamphetamine

- Treatment
- Diagnosis

Treatment Considerations

- Risk of Suicide
- Benzodiazepines not “first-line” with SUD
- SSRIs
- Gabapentin
- Medications to help reduce cravings
 - Naltrexone (Vivitrol)
 - Antabuse
- Nonpharmacologic Interventions
 - Cognitive Behavioral Therapy (CBT)
 - 12 Step Model (AA or NA)

Key Points

- **Treat the patient in front of you**
- Consider
 - Timelines
 - Collateral
 - Prior treatment
- Pharmacologic treatment and nonpharmacologic treatment

Additional Resources

- <https://www.integration.samhsa.gov/clinical-practice/screening-tools>

References

- Back, S.E. (2017) Co-occurring substance use disorder and anxiety-related disorders in adults: Epidemiology, pathogenesis, clinical manifestations, course, assessment, and diagnosis. In R. Hermann (Ed)., *UpToDate*. Retrieved October 16, 2018, from <https://www.uptodate.com/contents/co-occurring-substance-use-disorder-and-anxiety-related-disorders-in-adults-epidemiology-pathogenesis-clinical-manifestations-course-assessment-and-diagnosis>
- Suppes, T. (2018) Bipolar disorder in adults: Clinical features. In D. Solomon (Ed)., *UpToDate*. Retrieved October 16, 2018, from <https://www.uptodate.com/contents/bipolar-disorder-in-adults-clinical-features>