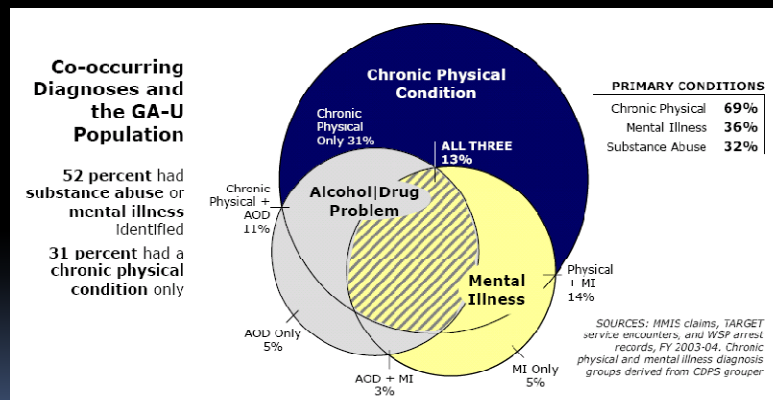




Assessing and Managing Substance Use Disorders in Primary Care

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Mental health of safety net populations



DSHS | GA-U Clients: Challenges and Opportunities August 2006

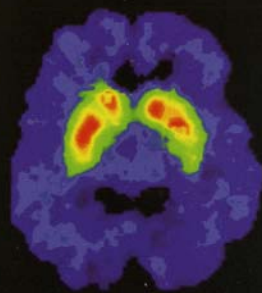
Client Challenges

Client

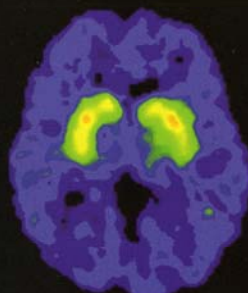
- Fear, Guilt and Shame
- Past negative experience
- Brain changed by use

Brain Changed by Meth

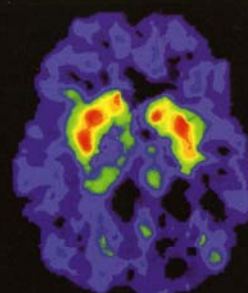
RECOVERY OF BRAIN FUNCTION WITH PROLONGED ABSTINENCE



Healthy Person



METH Abuser
1 month abstinence



METH Abuser
14 months abstinence

Source: "Drugs, Brains, and Behavior—The Science of Addiction." National Institutes of Health. April 2007

Provider Challenges

Provider

- Biases
- Time constraints
- Lack of skills

How do we move forward?

Client

- Fear, Guilt and Shame
- Negative experience
- Brain changed by use

Provider

- Lack of skills
- Time constraints
- Biases and judgments

Tools!

- Brief Intervention: Assessment
- Brief Intervention: Motivational Interviewing
- Brief Intervention: Relapse prevention
- Medications
- Referrals and Resources

Initial Screening

Verbally vs paper

- What works in your clinic?
- Which might provide more information?
- Language, culture, literacy

Approach

- Non-judgmental/Non-threatening
- Context of presenting symptoms and in relation to health status
- Information is confidential within the limits of this program

Adequate time to discuss results

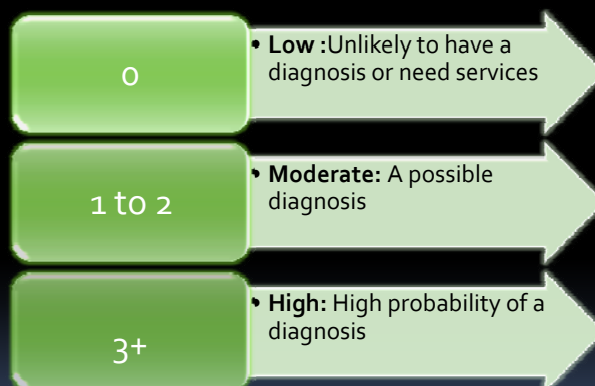
- Ideally same session

GAIN-SS:

Substance Abuse Scale (GAIN-SS SDS Score :) hide

DURING THE PAST 12 MONTHS, DID ...	Yes	No
a. you used alcohol or drugs weekly?	<input type="radio"/> 1	<input type="radio"/> 0
b. you spent a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs (high, sick)?	<input type="radio"/> 1	<input type="radio"/> 0
c. you kept using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	<input type="radio"/> 1	<input type="radio"/> 0
d. your use of alcohol or drugs caused you to give up, reduce or have problems at important activities at work, school, home or social events?	<input type="radio"/> 1	<input type="radio"/> 0
e. you had withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or use any alcohol or drugs to stop being sick or avoid withdrawal problems?	<input type="radio"/> 1	<input type="radio"/> 0

Scoring the GAIN-SS



Brief Intervention: Assessment



Gail is a 35yo female who presented with complaints of anxiety and depression. She has chronic pain and is taking vicodin. Her GAIN-SS score was 4 and upon further assessment she admitted to weekly cocaine use.

Brief Intervention: Screening Result Review


Why share them?

- Provide feedback
- Simulate concern

Tips

- Prompt
- Focus on client concerns
- Ask permission

Client: Screen Results Review



Prompt	Focus on client concerns	Ask permission
"Thank you for sharing this information with me today"	"Some people who use cocaine also notice that they a depressed mood, and I think that could be one the things you are struggling with"	" I would like to share some resources to help you with staying sober. Are you interested in hearing about them?"


Clinical Pearls: Assessment & Results Review

Assessment can be used to:

- Engage clients
- Exchange information
- Stimulate concern

Tips!

- Prompt results
- Focus on client concerns
- Ask permission



Enhancing motivation for change

Challenges

- "I've failed too many times before"
- "Will you still help me with my mood?"
- Guilt and shame

Tools

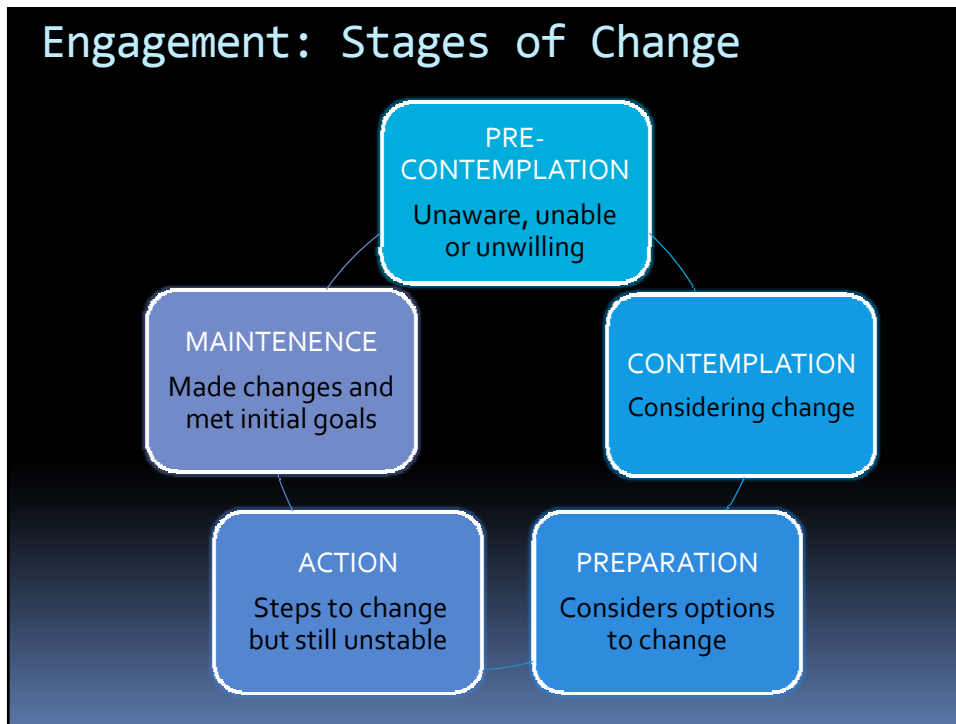
- Meet the patient where they are (stages of change)
- Use motivational interviewing strategies

Brief Interventions: Motivational Interviewing



Tony is a 28yo male with history of history of bipolar disorder.

He reports that he has been drinking heavily and is trying to quit.

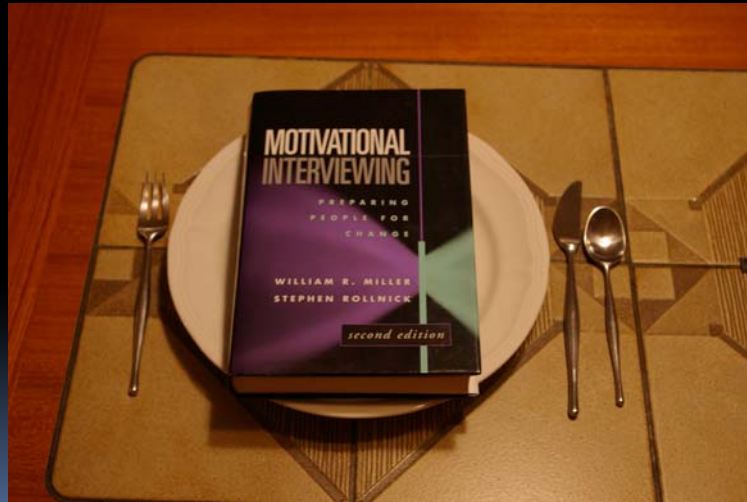


Contemplation → Preparation?



Tony is a 28yo male with history of history of bipolar disorder. He reports that he has been drinking heavily and is trying to quit.

Motivationalinterview.org



Spirit of Motivational Interviewing

Do

Allow the freedom not to change

"How ready are you to change?"

Draw out

"What would you would like to change?"

Collaborate

"What do you think you'll do?"

Avoid

Implant the right ideas

"You really need to stop drinking."

Push for commitment

"If you delay, you could die."

Dictate

"I would urge you to quit drinking."

Eliciting Change Talk: Pros/Cons

MI Spirit

What do you like about ____?

What Else?

What do you see as the downside of ____?


What Else?

Summarize both pros and cons

"On the one hand you said..., on the other hand you said..."

Eliciting Change Talk: Pros/Cons

MI Spirit



What do you like about drinking alcohol?	What else?	What don't you like about drinking alcohol?	What else?
"The buzz!"	"Fall asleep better"	"The hangover!"	"Wondering what I said"
"Feeling like the life of the party!"	"More confident"	"Late for work"	"Spending all my money"

Menu of Options: Drinking Example

MI Spirit



- Make no change whatsoever
- Cut down
- Don't cut down but never drink during the week
- Quit entirely
- See a counselor
- (Others that the client thinks of?)

Closing on good terms → Moving toward preparation



Summarize	Encouraging Words	Review Plan
You have shared a lot of information about both the things you like and don't like about drinking.	You sound like you are thinking about making a change.	You plan to journal about your alcohol use and bring me this information for our next session.

Clinical Pearls: Motivational Interviewing

Motivational interviewing is:

- An engagement strategy
- A way to enhance motivation

Tips!

- Cultivate the MI spirit
- Pros and Cons
- Explore options
- Summarize



Questions about assessment or
motivational interviewing?

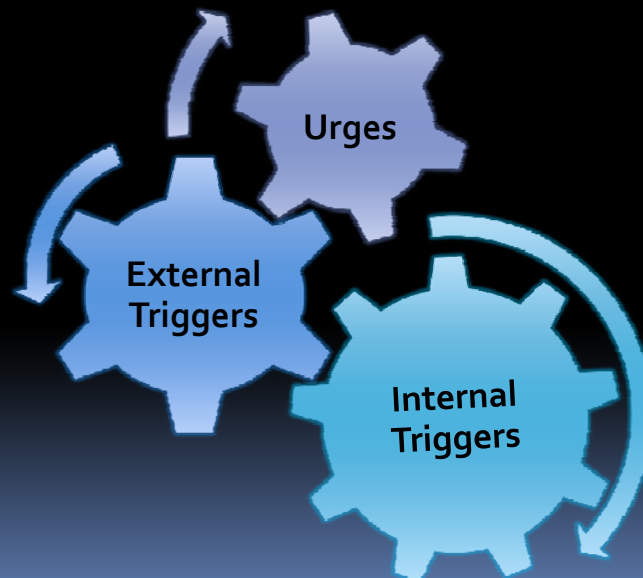


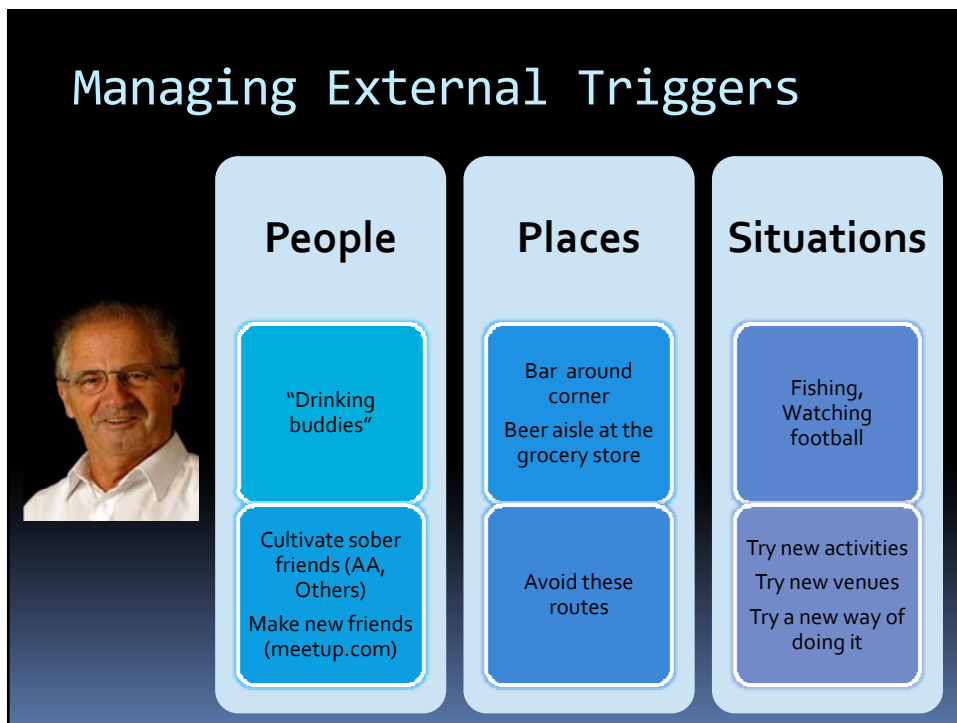
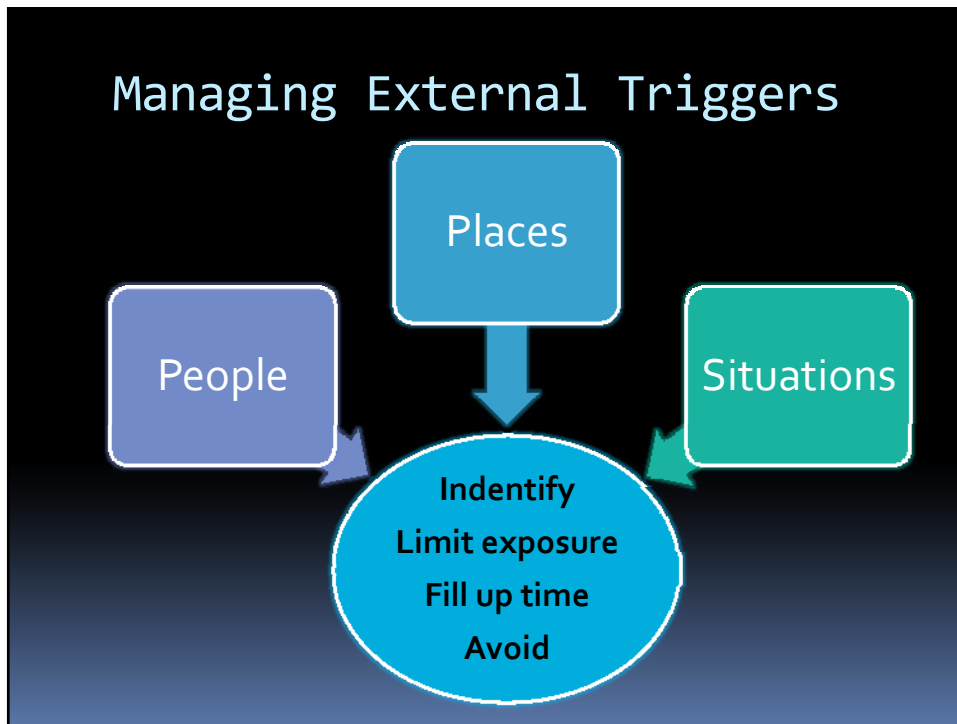
Brief Intervention: Relapse prevention

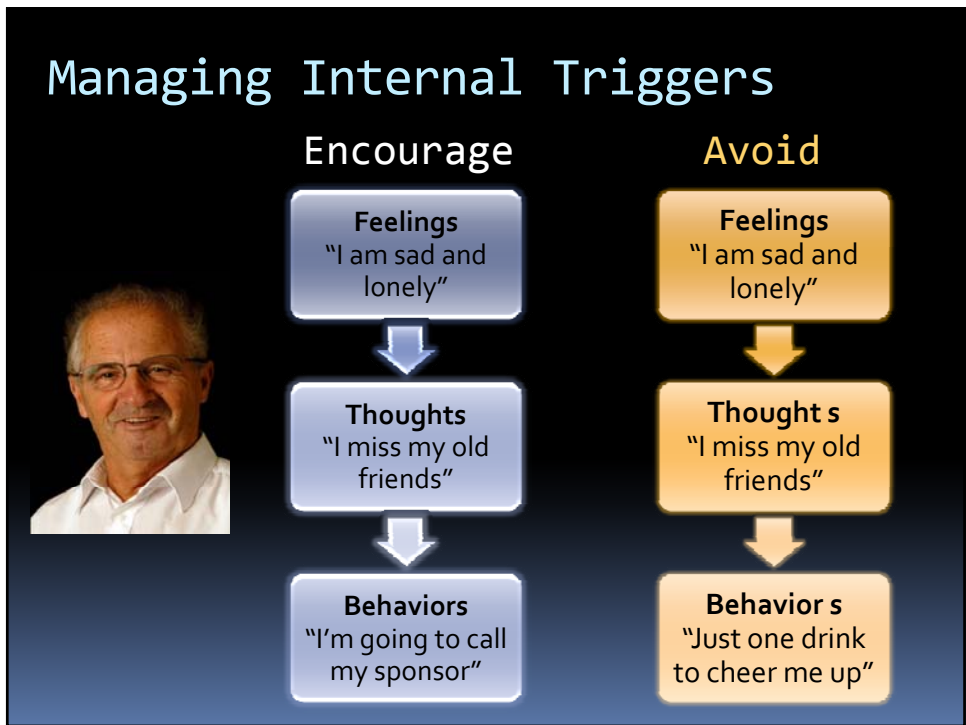
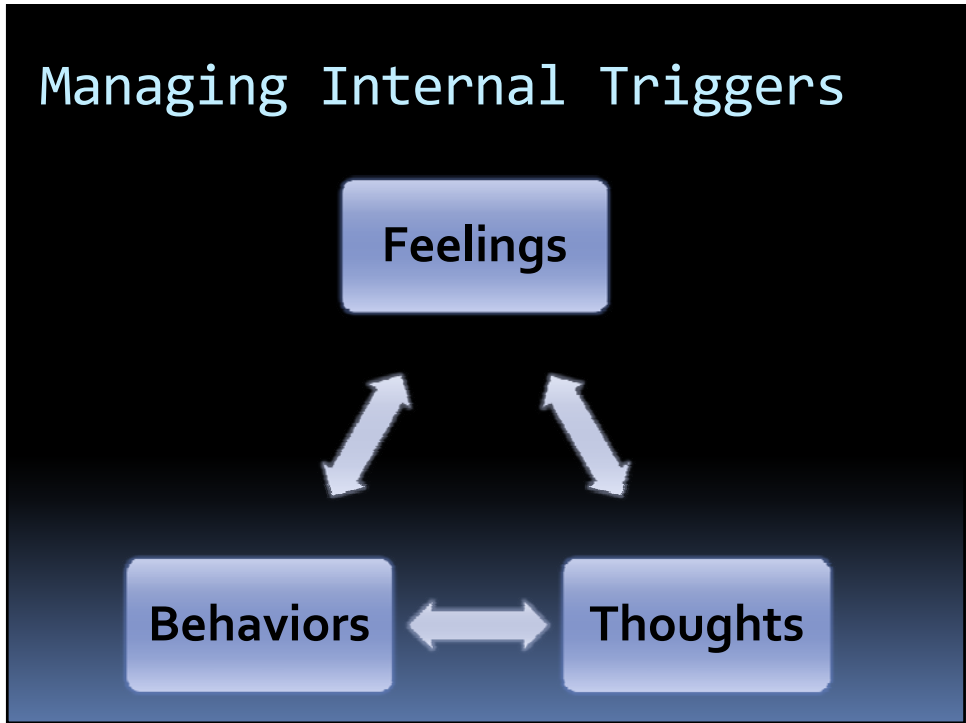


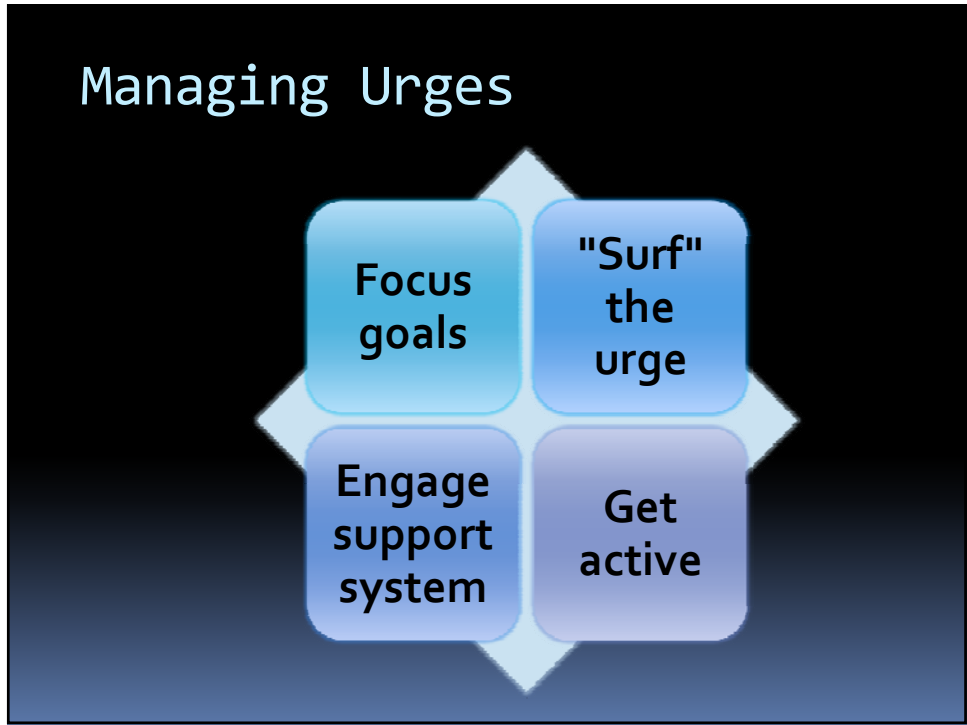
Victor is a 55yo male with h/o of alcohol dependence and depression. He is currently engaged in chemical dependency treatment with nine months sobriety.

Relapse Prevention Targets









Managing Urges

The slide features a portrait of a man with glasses and a white shirt on the left. To the right are four vertical columns, each with a title and a list of strategies:

- Focus goals**
I want to be sober so I can have a better relationship with my family.
- "Surf" the urge**
"I feel like having a drink but this will pass like a wave underneath an boat"
- Engage support system**
Sober friends, Supportive family, AA meetings
- Get active**
Volunteer, Engage in DVR Go to AA, Exercise, Hobbies

Clinical Pearls: Relapse Prevention

Relapse prevention is:

- An engagement strategy
- Managing external triggers
- Managing internal triggers
- Managing urges

Tips!

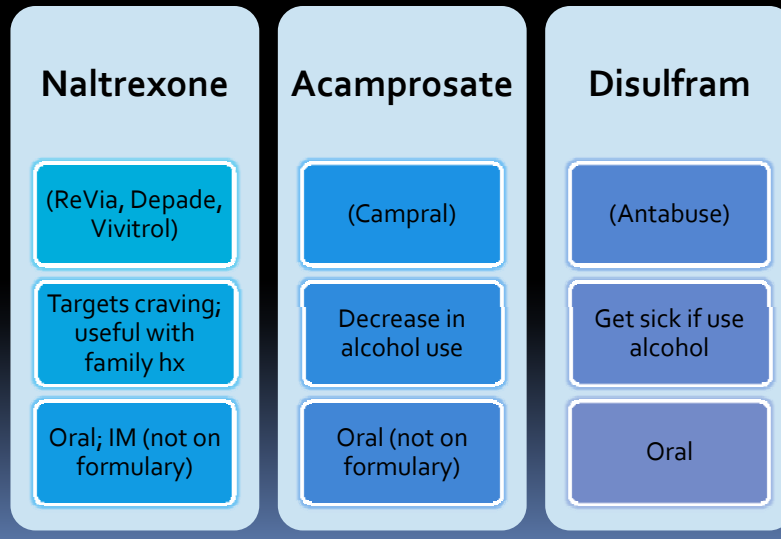
- Identify triggers and urges
- Make a plan → Get specific!
- Follow up and re-evaluate plan



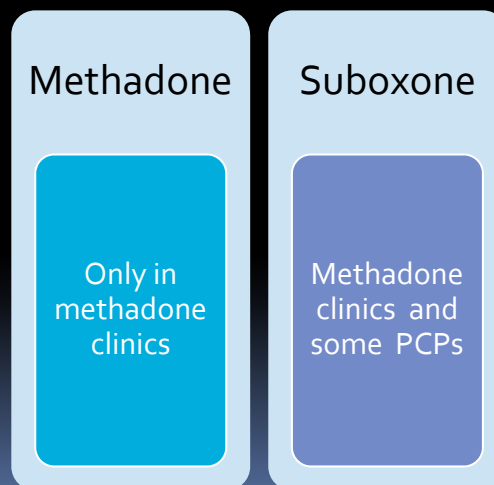
Questions about relapse prevention?



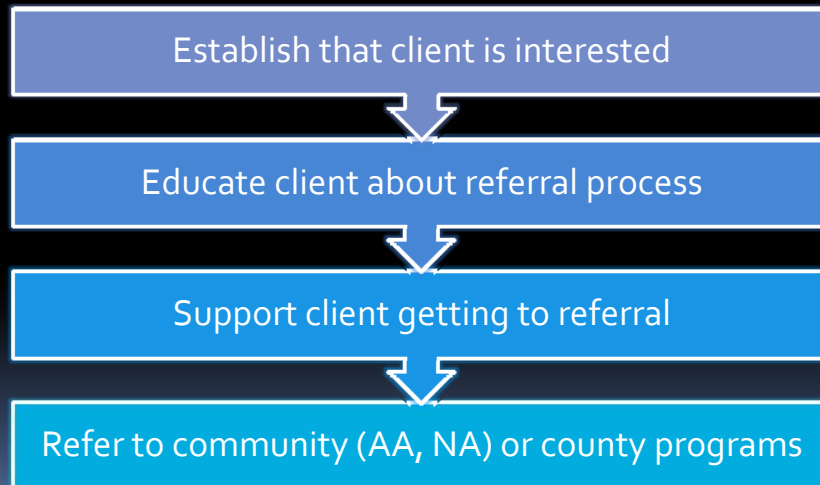
Pharmacological Interventions: Alcohol



Pharmacological Interventions: Opioids



Referrals



Free Books!

SAMHSA (Substance Abuse and Mental Health Services Administration) → <http://www.samhsa.gov/shin/>

- TIP 42: Substance Abuse Treatment for Persons with Co-Occurring Disorders
- TIP 34: Brief Interventions and Brief Therapies for Substance Abuse
- TIP 35: Enhancing Motivation for Change in Substance Abuse Treatment

Resources

- SAMHSA (Substance Abuse and Mental Health Services Administration) → Free books!
 - <http://www.samhsa.gov/shin/>
- NIDA (National Institute of Drug Abuse) → Free books!
 - <http://www.nida.nih.gov/pubcat/>
- NIAAA (National Institute of Alcohol Abuse and Alcoholism)
 - <http://www.niaaa.nih.gov/>
- Alcohol/Drug 24-Hour Help Line (King County)
 - 1-800-562-1240
 - <http://www.adhl.org>
- Trails to Treatment (King County)
 - <http://www.kingcounty.gov/healthservices/SubstanceAbuse/LinksResources/TrailsToTreatment.aspx>

Questions? Comments? Feedback?

