



Current Trends in Substance Abuse Assessment and Treatment

Assessment & Outcomes

Motivation for Change

“Coaching” for Change

Jolee Darnell, MSW, LICSW, CDP

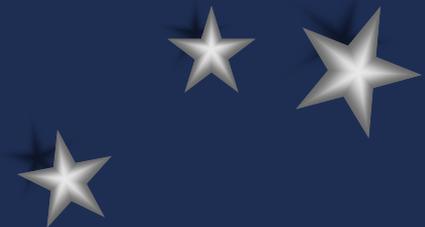


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Factors Impacting Substance Abuse Treatment Programs

- Diagnostic Criteria (DSM)
- HMO Health Care Management
- Cost Containment/“Cost Effective”
- Patient Placement Criteria
- “Dual Diagnosis”/ Co-morbidity
- Psychotropic Medications
- Assessment Tools
- Research - Outcome Studies, Biomarkers, Medical and Social Measurement Tools



“Traditional” Addiction Treatment



- Four to Six Week Inpatient
- “Break Down” and “Rebuild”
- 1-3 times per week outpatient
- AA 90 meetings in 90 days
- No medication
- Alcoholics with significant life losses



Diagnostic Criteria

(Diagnostic & Statistical Manual)

- **Assessing Patterns of Substance Use**
- **Assessing Impact of Substance Use on Financial, Legal, Emotional, Social, and Health**
- **Determining Abuse vs. Dependence - chronicity, tolerance, withdrawal, social & occupational impacts**



Inpatient Vs. Outpatient Treatment

- High Cost
 - Staffing Intensive
 - Little evidence of “positive return on investment”
 - Medical Detox
 - Social Detox
 - Residential Programs
- Low Cost
 - Counselors vs. Nurses/Doctors
 - Higher return on investment
 - Greater flexibility
 - “Least restrictive” environment



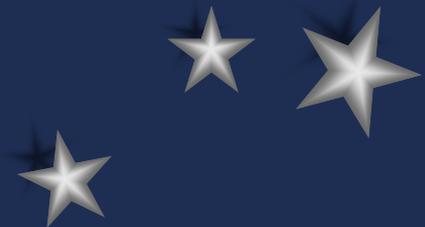
Outpatient Treatment Modalities

- **Weekly Group Therapy**
- **Individual Sessions as Needed**
- **Alcohol & Drug Information School (ADIS)**
- **Intensive Outpatient (Education & Therapy)**
- **Referral for Other Services**
 - Medical
 - Mental Health/Psychiatry
 - Social Work/Family Advocacy
 - Chaplain
 - ACS/Budget



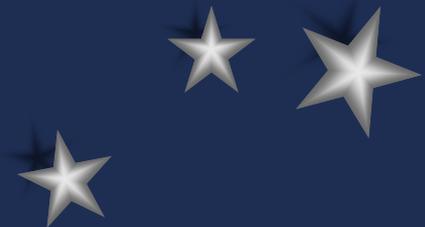
Intensive Outpatient Psycho-Educational Focus

- **Physical Effects of Substance Abuse**
- **Psychosocial Effects of Substance Abuse**
- **Life Skills - Relaxation, Financial Management, Communication, Nutrition, Time Management, Goal Setting**
- **Relapse Prevention**
- **RET, Choice Theory, Franklin Reality Model**
- **12 Step Philosophy and Use**



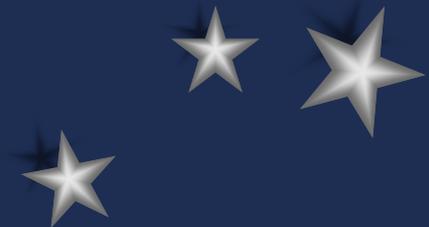
American Society Of Addiction Medicine (ASAM) Patient Placement Criteria

- **Dimension One - Intoxication/ Withdrawal Risk**
- **Dimension Two - Biomedical Conditions/Complications**
- **Dimension Three - Emotional/Behavioral Conditions/ Complications (Include Psychiatric Conditions)**
- **Dimension Four - Treatment Acceptance/Resistance**
- **Dimension Five- Relapse Potential**
- **Dimension Six - Recovery Environment**



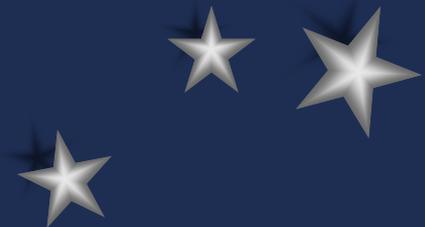
American Society Of Addiction Medicine (ASAM) Treatment Levels - Outpatient

- **Level 0.5 - Early Intervention**
- **Level I - Outpatient Services**
- **Level II.1 - Intensive Outpatient**
- **Level II.5 - Partial Hospitalization**



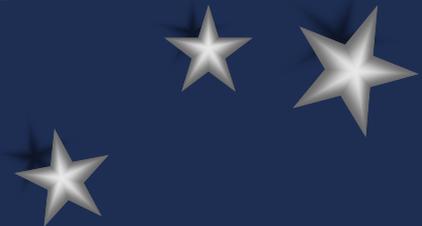
American Society Of Addiction Medicine (ASAM) Treatment Levels - Residential/Inpatient

- **Level III.1 - Clinically Managed Low Intensity Residential**
- **Level III.5 - Clinically Managed High Intensity Residential**
- **Level III.7 - Medically Monitored Inpatient**
- **Level IV - Medically Managed Inpatient**



Medical & Psychological Impacts

- **“Dual Diagnosis”/Co-Morbidity**
 - Need for greater understanding of mental health disorders related to substance use disorders
- **Psychotropic Medications**
 - Need for education and training in psychopharmacology
- **Understanding Medical/Physiological Conditions Impacted by Moderate to High Levels of Substance use/abuse**



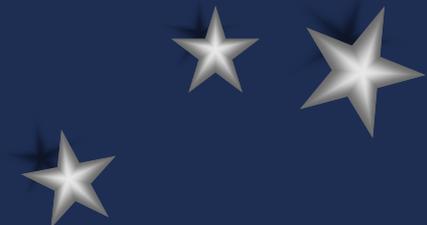
Strategies for Substance Abuse Screening

- **Self Report Measures**

- Non-Invasive
- Inexpensive
- High Validity
- Flexible window of assessment
- Immediate results

- **Biomarkers**

- Objective
- Results may be more compelling to patient
- May indicate organ damage
- Useful in tracking patient progress in treatment



Screening Strategy

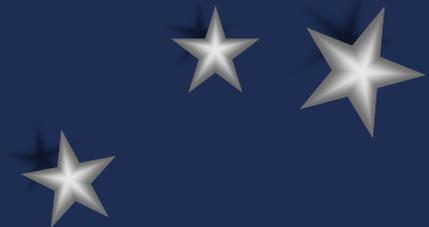
Disadvantages

- **Self Report Tests**

- False or minimized reporting
- Dependent on patient verbal, reading, writing skills
- Rarely employed in clinical practice

- **Biomarkers**

- Window of assessment is recent past
- Results may not be immediately available
- May be cost prohibitive
- Rarely employed in clinical practice



Types of Self-Report Tools

- **Screening/Assessment**
 - Used to for evaluation
 - Diagnostic
 - Determine initial level of education/ treatment
 - **Treatment Planning/Outcome Measure**
 - Help determine goals for treatment
 - Measure progress in motivation and goal accomplishment
 - Can be used for longitudinal follow-up after treatment completion
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Assessment Tools

- Substance Abuse Subtle Screening Inventory (SASSI)
- Michigan Alcohol Screening Test (MAST)
- CAGE (Cut Down, Annoyed, Guilty, Eye-Opener) Questions
- Alcohol Use Disorders Identification Test (AUDIT)
- Alcohol Use Inventory (AUI)
- Clinical Institute of Withdrawal Assessment (CIWA)
- Addiction Severity Index (ASI)
- Drinking Inventory of Consequences (DrInC)
- Negative Alcohol Expectancy Questionnaire
- Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES)
- Alcohol Abstinence Self Efficacy Scale (AASE)
- Biopsychosocial Interview



Treatment Planning/ Outcome Measurement

- **Outcome Questionnaire 45 (OQ-45)**
 - Social Scale
 - Motivation Scale
- **URICA (Motivation for Change)**
- **Maryland Addiction Questionnaire (MAQ)**
 - Motivation Sub-scale
 - Craving Sub-scale
- **SOCRATES**



Alcohol Biomarkers

- **Clinical Applications**
 - Screening for Alcohol Problems
 - Monitoring Alcohol Treatment Progress
 - Motivating Change in Patients
 - Evaluating Alcohol Interventions
 - State Biomarkers - Measure current heavy drinking



Advantages of State Biomarkers

- **More accurate than verbal reports of drinking behavior, which are often minimized**
- **Provide objective assessment of drinking behavior**
- **May be more credible to audiences questioning validity of self-reports**
- **May exert more influence on effecting change in drinking behavior than verbal indicators**



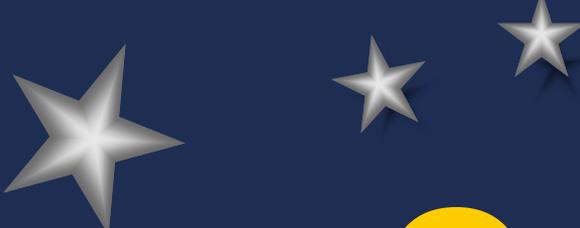
Screening Biomarkers

- **Gamma Glutamyl Transferase (GGT)**
 - General Measure of Liver Damage
- **Macrocytic Volume (MCV)**
 - Less sensitive than GGT
 - No apparent gender effect
- **Carbohydrate Deficient Transferrin (CDT)**
 - Approved by FDA
 - High in specificity
 - Helpful in monitoring relapse



Summary

- **Substance Abuse Treatment has become more sophisticated**
 - **Multiple factors impact screening & treatment**
 - Insurance
 - Placement Criteria
 - Diagnosis
 - **Use of measurement tools for screening, treatment planning, & outcome evaluation**
 - More objective in determining diagnosis & treatment needs
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Questions?

For information or referrals

MAMC/Ft. Lewis ASAP

(253) 967-2202/3456

Naval Hospital Oak Harbor Alcohol Treatment Program

(360) 257-9486

Naval Hospital Bremerton Alcohol Treatment Program

(360) 476-2594

McChord Air Force Base Life Skills Center

(253) 982-3684

