The Treatment of Substance Use Disorders and Behavioral Addictions within the VA: Current Approaches and Future Directions

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OBJECTIVES

1. List assessment and diagnostic considerations for substance use disorder (SUD) and co-occurring mental health disorders
2. Summarize current trends of SUD within the veteran population
3. Describe levels of care within the VA for SUD and co-occurring mental health disorders
4. Identify available treatments for SUD and future directions

ASSESSMENT AND CONSIDERATIONS

Components of assessment:

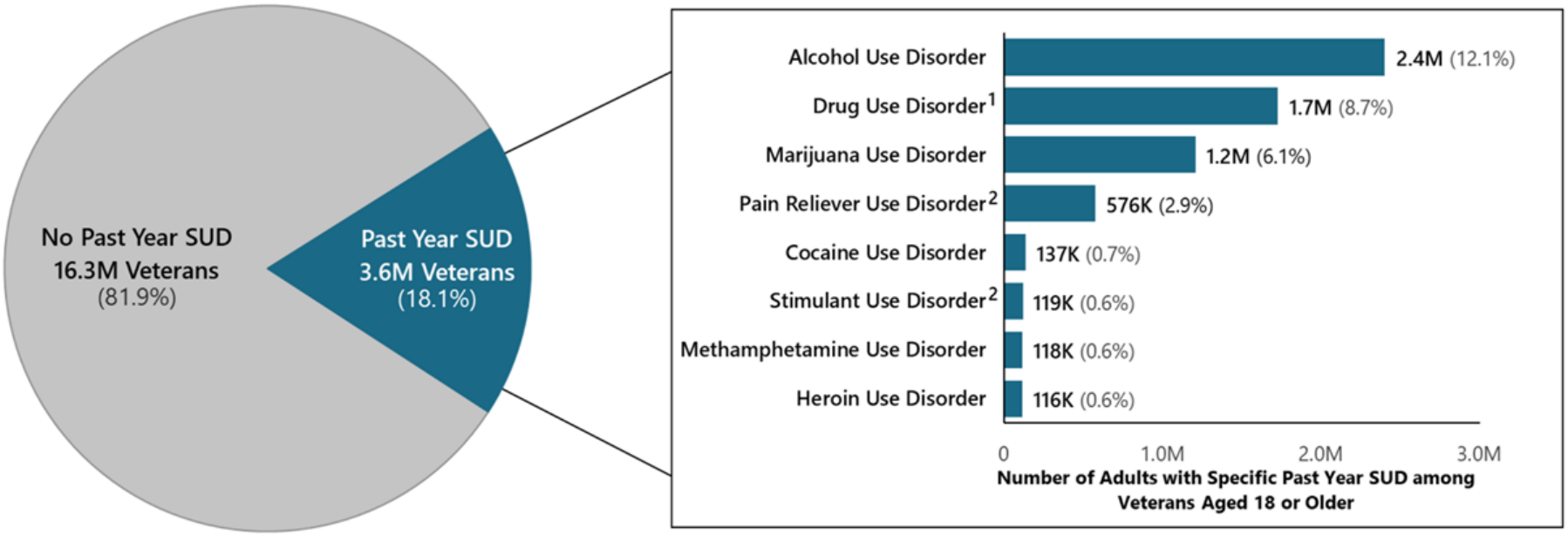
- Case review
  - Substance use history
  - Review of co-occurring symptoms and conditions
    - Psychosis
    - Mania
    - Depression
    - Anxiety
    - Trauma-related
    - Personality
- Assessment measures
  - AUDIT/AUDIT-C
  - BAM-R

Diagnostic Considerations:

- Abuse vs Dependence
- Specifiers
  - Mild (2-3), Moderate (4-5), Severe (6+)
  - Early remission (3 months) vs sustained remission (12 months)

CURRENT TRENDS AND DIRECTIONS

Past Year Substance Use Disorder (SUD): Among Veterans Aged 18 or Older



Note: The estimated numbers of people with substance use disorders are not mutually exclusive because people could have use disorders for more than one substance.

[1] Includes data from all past year users of marijuana, cocaine, heroin, hallucinogens, inhalants, methamphetamine, and prescription psychotherapeutic drugs (i.e., pain relievers, tranquilizers, stimulants, or sedatives).

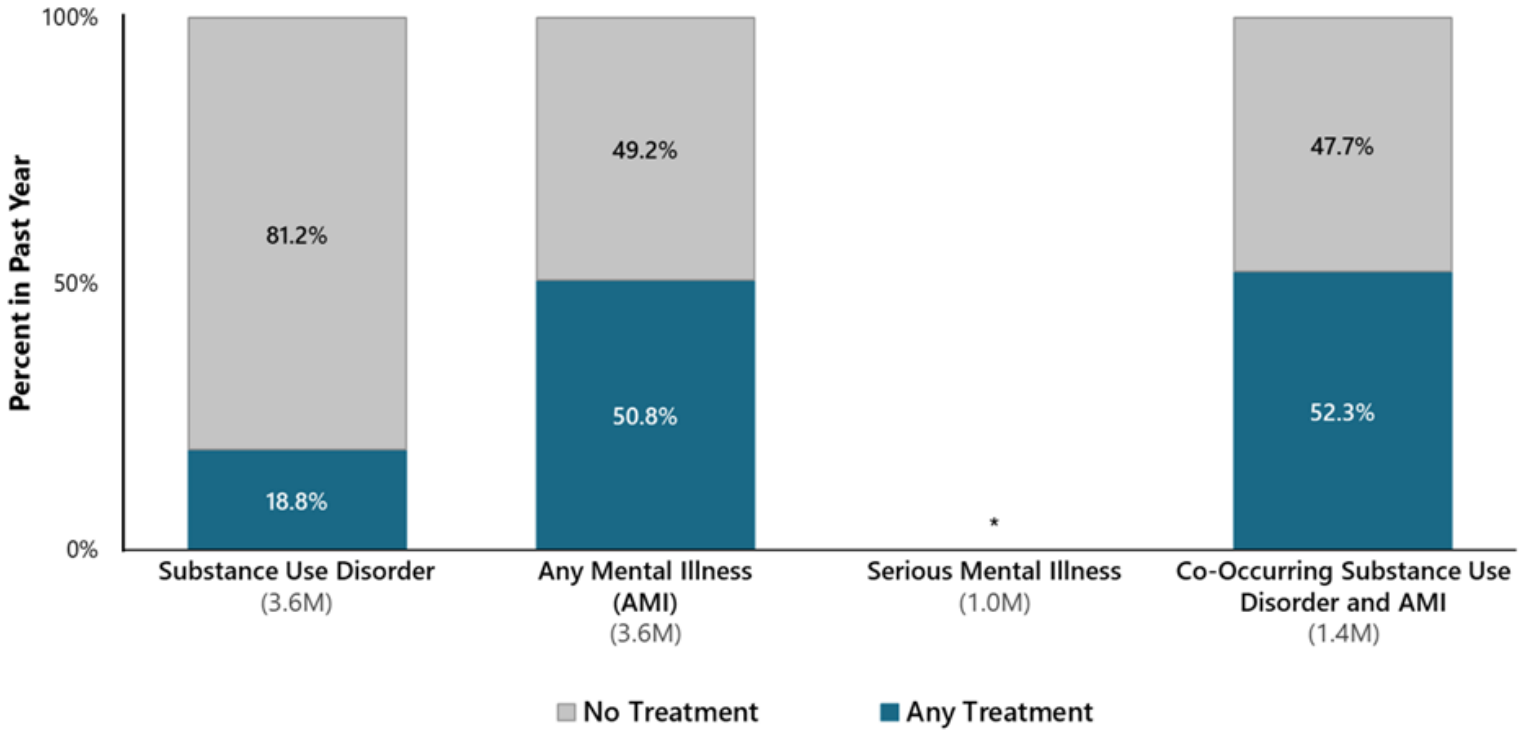
[2] Includes data from all past year users of the specific prescription drug.

SAMHSA
Substance Abuse and Mental Health Services Administration

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2023). National Survey on Drug Use and Health 2022 Retrieved from https://www.samhsa.gov/data/

RATES OF TREATMENT

Did Not Receive Substance Use Treatment or Mental Health Treatment in the Past Year: Among Veterans Aged 18 or Older



* Low precision; no estimate reported.

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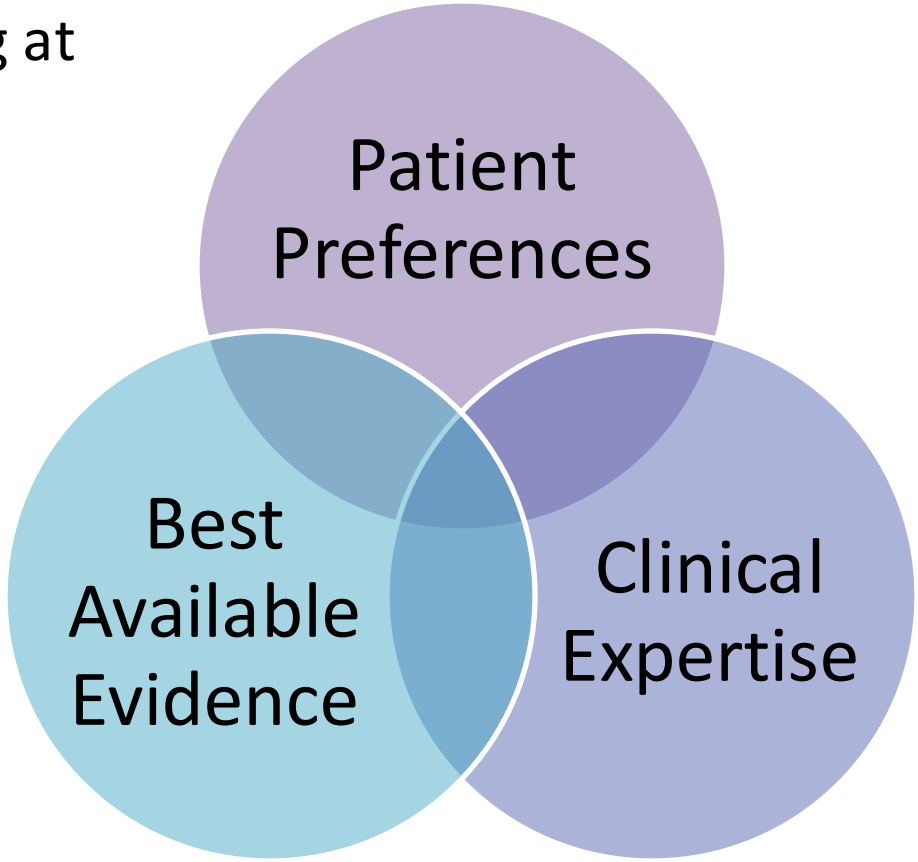
INFORMED CARE

Provide education on the following at a level the patient can understand:

- Diagnoses
- Treatment purpose
- Treatment protocol
- Timeframe
- Risks and Benefits
- Costs
- Alternatives
- Treatment Refusal
- Program/facility policies and procedures



TREATMENT FACTORS

Veteran's goals to treatment

- Reduction
- Abstinence
- Maintenance

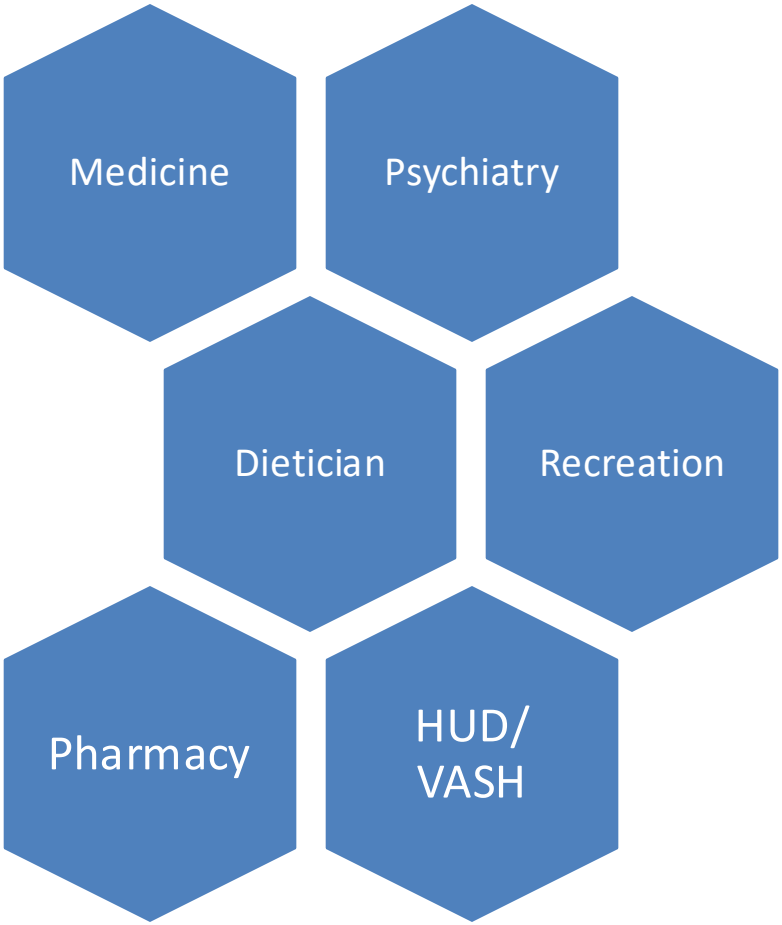
Safety and feasibility

Family and community resources

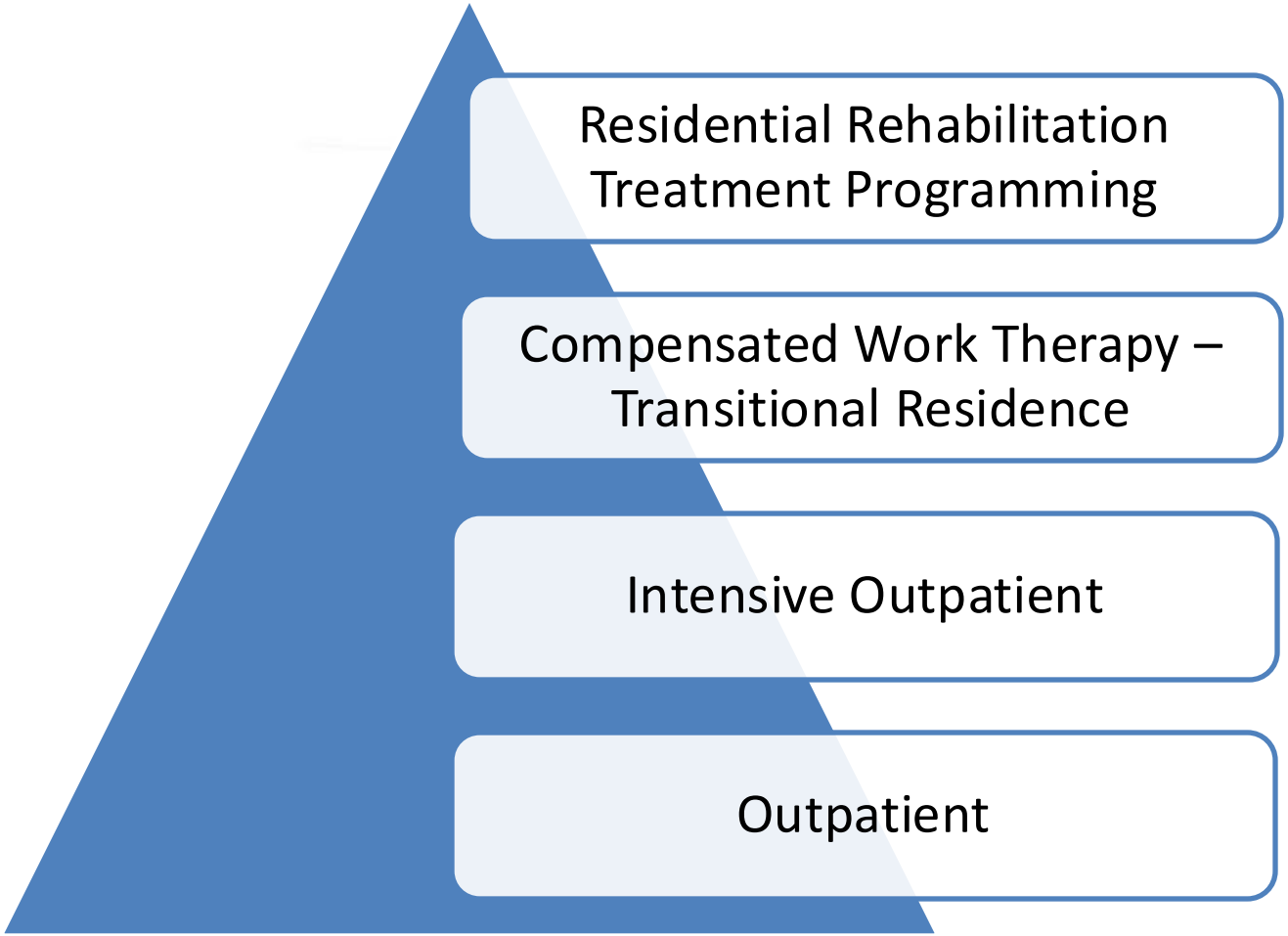
Evidence-Based protocols and interventions

Co-occurring mental health

Integrated Care



LEVELS OF CARE WITHIN THE VA



AVAILABLE TREATMENTS

Cognitive Behavior Therapy (CBT)

- Cognitive Behavior Therapy – Substance Use Disorder (CBT-SUD)
- Coping Skills Groups – Substance use Disorders (CSG-SUD)
- Mindfulness-Based Cognitive Behavioral Therapy
- Acceptance and Commitment Therapy

Motivational Approaches

- Motivational Enhancement Therapy (MET)
- Motivational Interviewing (MI)

Contingency Management

- Function-based rewards

MEDICATIONS FOR SUD

Alcohol

- Naltrexone
- Acamprosate
- Disulfiram
- Topiramate
- Gabapentin

Opioids

- Buprenorphine
- Methadone
- Naltrexone

Opioid Overdose Reversal

- Naloxone

Perry, C., Liberto, J., Milliken, C., Burden, J., Hagedorn, H., Atkinson, T., ... & VA/DoD Guideline Development Group. (2022). The management of substance use disorders: synopsis of the 2021 US Department of Veterans Affairs and US Department of Defense clinical practice guideline. Annals of Internal Medicine, 175(5), 720-731.

FUTURE DIRECTIONS

Pharmacotherapy

- Further research in the support of ketamine therapy paired with psychotherapy

Virtual Reality

- Assist in inhibitory learning through exposure

Continued Community Approaches/Accessibility

- Relapse Prevention and Relapse Safety

Advocacy and Addressing the Stigma

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