

Assessment of Substance Use Disorders

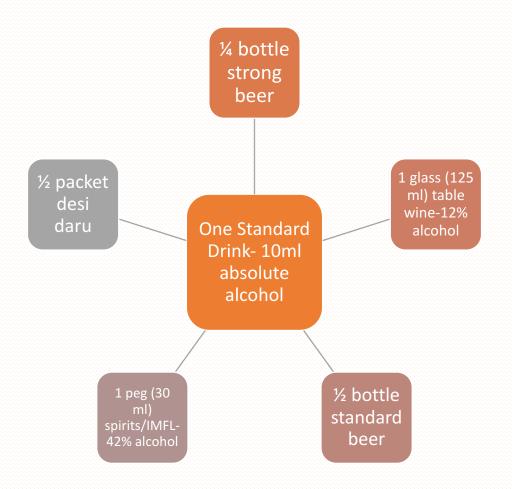
This material is meant for teaching the Diploma in Community Mental Health Course for Psychologists under NIMHANS Digital Academy only

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Food for thought

- Types of substance/s; impact on behaviour
- Varying methods of psychosocial conceptualization
- Several assessment tools serving differing purposes
- Co-morbid conditions
- Life cycle stage
- Two diagnostic systems

ALCOHOL- types/units/standard drink



Substances

| Substance | Derived from | Method of use | Common forms/synthetics | | |
|--------------------|-----------------|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Opium | Poppy plant | Smoked, chased, injected | Smack, brown sugar, codeine, cough syrup, morphine, heroin, oxycodone, pentazocine injections, dextropropoxyphene capsules & buprenorphine tablets | | |
| Cocaine | соса | snorted | Crack, cocaine | | |
| cannabis | Cannabis sativa | Smoked, hookah, clay pipes | Bhang, ganga, charas, hash, | | |
| tobacco | - | Smoke, chew, gum, paste, suck, gargle | Beedi, cigarette, gutka, hookah, khaini, zarda | | |
| Hallucinogens | | | PCP, LSD, mescaline | | |
| stimulants | | | Methamphetamine, (crystals, ice), ecstasy, ice, MDMA | | |
| Inhalants/solvents | | | Petrol, glue, paints, correction fluid | | |

Diagnosis

- ICD 10, WHO, Categorical
- DSM 5, APA, Dimensional (May, 2013)
- -Change in Disorder Terminology
- -Abuse & Dependence to AUD (Mild, Mod, Severe)
- -Diagnostic thresholds changed
- -Removed criterion-legal
- -Added criterion- craving (ICD-10)
- Concordance between both systems for severe dependence
- What about Mild/moderate diagnosis in DSM 5?

| Criteria | Score |
|---------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| Alcohol is taken in larger amounts or over a longer period than was intended. | AUD: 2 or more symptoms |
| There is a persistent desire unsuccessful efforts to cut down alcohol use | Mild: 2-3 symptoms |
| A great deal of time is spent in activities necessary to obtain alcohol, use alcohol, or recover from its effects. | Mod: 4-5 symptoms |
| Craving, or a strong desire or urge to use alcohol | Severe: 6 or more symptoms |
| Recurrent alcohol use resulting in a failure to fulfil major role obligations in work, school or home. | |
| Continued alcohol use despite having persistent or recurrent interpersonal or social problems caused or exacerbated by alcohol. | |
| Important social, occupational or recreational activities are given up due to alcohol use. | |
| Recurrent alcohol use in situations in which it is physically hazardous | |

| Criteria | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Alcohol use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by alcohol. | |
| Tolerance as defined by either of the following: a) A need for markedly increased amounts of alcohol to achieve intoxication or desired effects b) A markedly diminished effect with continued use of the same amount of alcohol | |
| Withdrawal, as manifested by either of the following: a) The characteristic withdrawal syndrome for alcohol b) Alcohol is taken to avoid or relive withdrawal symptoms | |

Psychosocial Formulations

The 4 Ps...always helpful!

- -Predisposing factors: why me?
- -Precipitating factors: why now?
- -Perpetuating factors: why does it continue?
- -Protective factors: what/who can I rely on?

| | Biological | Psychological | Social |
|---------------|--------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------|
| Predisposing | Genetic loading | Poor defense mechanisms, maladaptive personality traits, insecure attachment | Poverty, neighbourhood problems |
| Precipitating | latrogenic reaction | Recent loss | Work stresses, marital conflict |
| Perpetuating | Poor response to medication | No support at work | Unable to attend therapy session due to family tensions |
| Protective | Family history of treatment response | insightful | Community and faith as sources of support |

What type of formulation framework? Cognitive? Dialectic-Behavioural, Attachment, Psychodynamic, Humanistic, Motivation to Change, Expectancy, Integrated?

Tools





From the initial contact to the other side of the coin

- Screening
- Diagnosis
- Relapse
- Special Populations









AUDIT (Alcohol Use Disorder Identification Test)

- WHO (Barbor TF, De la Fuente JR, Saunders J, Grant M, 1989; Indian adaption Silva et. Al., 2003; Pal et. Al. 2005)
- 3 domains: hazardous use, harmful use, dependence
- 10 items
- 5 point likert rating
- Scores: ≥8 harmful drinking; ≥20 dependent drinking

CAGE

- 4 items; Ewing JA, John, A, 1984
- More useful for clinical practice
- Women? Binge drinkers?
- Have you ever felt you should Cut down your drinking? Y N
- Have people Annoyed you by criticizing your drinking? Y N
- Have you felt Guilty about your drinking? Y N
- Have you had an Eye opener first thing in the morning to steady nerves or to get rid of a hangover? Y N

ASSIST (Alcohol, Smoking and Substance Involvement Screening Test)

- Henry-Edwards Sue, Humeniek R et. al. (2000), WHO
- 10 items
- Life time & past 3 months subs use; problems related to the same; risks; level of dependence
- Especially for high risk users
- Administered & scored by trained practitioners

DAST (Drug Abuse Screen Test)

- *Skinner, HA*, 1982
- 20 & 10 items, does not include alcohol
- yes/no self report

items

In the past 12 m, have you abused prescription drugs

Can you get through the week without using drugs

Does your spouse (or parents) ever complain of your involvement with drugs?

MAST (Michigan Alcoholism Screening Test)

- Selzer, 1982
- 25 items, 10, 13, 9 item versions across different populations
- Life-time alcohol related problems, consequences, severity

| item | Yes/no |
|--------------------------------------------------------------------------------------|--------|
| Can you stop a drink without a struggle after one or two drinks | |
| Have you ever attended AA | |
| Have you ever gotten into physical fights after a drink | |
| Have you ever had DTs, or severe shaking or heard voices that were not really there. | |
| Have you ever been in a hospital because of drinking | |

OCDS (Obsessive Compulsive Drinking Scale)

- Anton RF, Moak DH, Latham P, 1995
- 14 items. self administered
- Cognitive aspects of craving, heavy drinking, urges, drinking related thoughts, ability to resist the thoughts
- Monitoring of people in treatment and prediction of relapse

Items

How much of your time when you're not drinking is occupied by ideas, thoughts, impulses or images related to drinking? (0)None

(1)Less than 1 hour a day

(2) 1-3 hours a day

(3) 4-8 hours a day

(4) Greater than 8 hours a day

How successful are you in stopping or diverting these thoughts when you're not drinking?

(0)I am completely successful in stopping or diverting such thoughts.

(1) I am usually able to stop or divert such thoughts with some effort and concentration.

- (2)I am sometimes able to stop or divert such thoughts.
- (3)I am rarely successful in stopping such thoughts and can only divertsuch thoughts with difficulty.

(4)I am rarely able to divert such thoughts even momentarily.

Others

- PESQ (Personal Experience Screening Inventory, Winters, KC, 1991)
- 40 yes-no & multiple-choice Likert items,
- 3 subscales (Problem Severity, Psychosocial Items, and Drug Use History),
- -12-18 yr olds
- especially useful in schools, juvenile detention facilities, medical clinics
- POSIT (Problem Oriented Screening Instrument for Teenagers)
 -Rahdert, EH, 1991; National Institute on Drug Abuse (NIDA)
 -yes/no,
- -10 functional areas, including substance use/abuse, mental and physical health, family and peer relations, vocation, and special education
- self-administered, 139-item

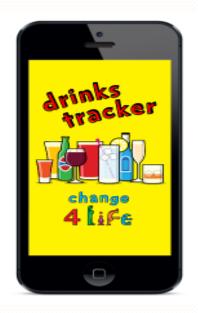
ASI (Addiction Severity Index)

- McLellan, A. Thomas; Luborsky, L; O'Brien, CP.; Woody, GE 1980
- The ASI is probably the most widely used standardised instrument in the field.
- a) to assess problem severity, and b) monitor and quantify change in problems commonly associated with substance abuse.
- Semi-structured interview
- 7 potential problem areas: medical status, employment and support, drug use, alcohol use, legal status, family/social status, and psychiatric status. In one hour, a skilled interviewer can gather information on recent (past 30 days) and lifetime problems in all of the problem areas.
- 200 items

AOM (Alcohol Outcomes Module)

- Smith, G. Richard Jr., Babor, TF., et al., 1994
 Used primarily to assess the process of care, patient characteristics, and outcomes of care for patients with AUD in IP and OP treatment programs.
- The four components of the AOM (with completion time) are: Patient Baseline Assessment (20 min.); Clinician Baseline Assessment (5 min.); Patient Follow-Up Assessment (14 min.); Medical Record Review Form (25 min.).

Drinks tracker for iPhone and Android If you have an Android phone, iPhone or iPod touch you can download the free Change4Life Drinks Tracker from the app store straight to your phone. It allows you to keep a drink diary and get feedback on your drinking.



•Track your drinking over weeks and months

- •Calculate the units in your drinks
- •Get daily tips and feedback
- •Share with friends via Facebook or Twitter

AASE (Alcohol Abstinence Self-Efficacy Scale)

- DiClemente, C C.; Carbonari, J P.; Montgomery, R P.G.; Hughes, S O, 1994
- Assesses Bandura's construct of self-efficacy and evaluates an individual's confidence to abstain from drinking in 20 situations that represent typical drinking cues.
- 40 items; temptation & efficacy- four subscales, comprising five items each, examining cues related to negative affect, social/ positive, physical and other concerns, withdrawal and urges.
- These scales can be used to evaluate individuals entering treatment, progress during treatment, relapse potential, and post-treatment functioning.

Listed below are a number of situations that lead some people to drink. We would like to know how CONFIDENT are you that you WOULD NOT drink in each situation. Check the answer that best describes the feelings of confidence in each situation at the present time.

| When I am on vacation and want to relax | Not at all | Not very | moderately | very | extremely |
|----------------------------------------------------------------|------------|----------|------------|------|-----------|
| When I am worried | | | | | |
| When I am concerned about someone | | | | | |
| When I am being offered a drink in a social situation | | | | | |

MINI (Mini International Neuropsychiatric Interview)

- Sheenen, DV.; Lecrubier, Y, 1990
- Structured, diagnostic interview, developed jointly by psychiatrists and clinicians in the United States and Europe, for DSM-IV and ICD-10 psychiatric disorders.
- 15 minutes, 16 modules, each with about 8-10 questions, which assess the symptoms for a variety of disorders including major depressive episode, dysthymia, suicidality, manic episode, panic disorder, agoraphobia, social phobia, obsessive-compulsive disorder, PTSD, alcohol dependence or abuse, substance dependence or abuse, psychotic disorders, anorexia nervosa, bulimia nervoa, generalized anxiety disorder, and antisocial personality disorder.

GAIN SS (Global Appraisal of Individual Needs-Short Screener)

- Dennis ML, 1999
- 23 items, 4 categories- internalizing disorders, externalizing disorders, substance disorders, crime/violence.
- Used for adolescents and adults from a variety of populations in various levels of care, including outpatient, intensive outpatient, short- or long-term residential, justice programs, school-based programs
- Others:
- GAIN 1 Full/lite, Core, M90: elaborate

GAIN-LITE

| Items | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------|---------------------|--------------------|--------------------|----------------------------|
| When was the last time, if ever, you had any problems paying attention, controlling your behavior, or broke rules you were supposed to follow? | Within the past two days | 3-7 days ago | 1 to 4 weeks ago | 1- 3 months ago | 4-12 months ago | More than 12 months ago |

In the past 12 months.....

- Made mistakes because you were not paying attention
- Had a hard time listening to instructions at school, work or home
- Not followed instructions or not finished your assignments
- Had a hard time staying organized or getting everything done
- Lost things that you needed for school, work or home
- Been forgetful or absentminded
- Fidgeted or had a hard time keeping your hands or feet still when you were supposed to
- Gave answers before the other person finished asking the question
- Had a hard time waiting for your turn
- Interrupted or butted into other people's conversations or games



| When was the last time that you | Past month | 2-3 months ago | 4-12 months ago | 1+ years ago | never |
|------------------------------------------------------------------------|------------|-------------------|--------------------|-----------------|-------|
| Had a disagreement in which you pushed, grabbed or shoved someone? | | | | | |
| Took something from a store without paying for it | | | | | |
| Sold, distributed, or helped to make illegal drugs? | | | | | |
| Drove a vehicle while under the influence of alcohol or illegal drugs? | | | | | |
| Purposefully damaged or destroyed property that did not belong to you? | | | | | |

Integration

- In the clinic/ research
- Psychosocial formulation
- Screening tool
- Diagnostic tool, clarification, therapeutic tool
- Utility with a specific age group/ population/ co-morbid condition