

## **Dual Diagnosis in Substance Misuse**

### **What is dual diagnosis**

The term 'dual diagnosis' or 'dual disorders' has in recent years come to be used in the alcohol, drug and mental health fields to describe a particular group of people who have both a diagnosed mental health problem together with problems of alcohol and/or drug use. Usually this focus has more often referred to a diagnosis of severe mental illness, for example psychotic disorders such as schizophrenia rather than mood disorders such as anxiety and depression, and the combination of alcohol or drug problems.

There is however a wide range of mental health problems, including mood disorders, which in combination with alcohol and drug use can result in many varied problems, which now more commonly is referred to by the name "co-morbidity" (the presentation of two or more problems at the same time in the same person). This more accurately reflects the tremendous variety of problems people can experience, which in addition to medical problems can also include a wide variety of social and on occasions, legal problems. .

### **Mental illness with developing substance misuse**

People mainly present with a mental illness, but because of the symptoms of the illness or their attempts to cope with the effects of medication this can lead to the use of substances. This self-medication theory has been very popular in explaining the increase use of substances in the mentally ill. However, rather than use specific substances for the relief of particular symptoms, it is considered that people will use any substance for general relief of distress. The substances used by the mentally ill for the relief of tension would thus be determined more by availability and culture. Indeed some studies suggest that people with severe mental illness are attracted to the use of substances because of social and environmental factors, for example social acceptance. People with mental health problems such as anxiety and depression are more likely to be influenced to use substances for the relief of symptoms.

### **Substance use with developing mental illness**

This suggests mental illness can be a consequence of people's alcohol/drug use. This would include transient mental illness due to either intoxication or withdrawal from substances. Alcohol withdrawal can display hallucinations, paranoia, anxiety, depression and delirium. Heroin withdrawal can often result in depression, apathy and irritability. Withdrawal from stimulants can cause depression and suicidal intentions.

There are some studies that suggest that intoxication or short-term use of alcohol or drugs can cause lasting and enduring mental illness in some people vulnerable to mental illness. A first presentation of mental illness can follow the use of a variety of substances. It is known that amphetamines and cocaine can cause psychotic symptoms like paranoia, if a large dose of the drug is taken on a single occasion. Cannabis, LSD and ecstasy are thought to precipitate mental illness in some vulnerable people and can also greatly increase the symptoms of an existent mental health problem.

It is also relevant to note that long-term permanent mental illness such as Korsakoff's syndrome (dementia type syndrome linked to heavy drinking and low levels of thiamine B) and alcoholic dementia are both due to chronic alcohol use. The long-term use of other substances can also result in enduring mental illness such as depression and anxiety.

### **Problems caused**

There is a complex interaction between both problem areas where deteriorating mental illness can increase substance abuse and continued substance misuse can exacerbate mental illness. If alcohol or drugs are taken in combination with prescribed medication for the treatment of mental health problems, this can result in the prescribed medication being ineffective or having an increased impotency.

Substance abuse in people with severe mental illness is associated with a number of severe problems, such as:

- Increased crimes of violence, with a recent report indicating that substance abuse by the mentally ill was a major factor in a number of homicides.
- Increased rates of attempted suicide, especially with people having alcohol problems and depression.
- Poor medication compliance, which results in a worsening of mental illness.
- Poor response to substance misuse treatment.
- Homelessness and having problems such as neighbour disputes.
- High relapse rate in both conditions, resulting in longer periods of hospitalisation.

There are a number of indicators which are particularly pertinent to the person with co-morbidity:

- History of violence
- History of attempted suicide
- High contact with criminal justice system
- High relapse rate from psychiatric and substance abuse treatment
- Poor response to substance abuse treatment

- High rate of homelessness

**Helpful contact numbers and websites relating to this issue:**

- [www.drugscope.org.uk](http://www.drugscope.org.uk)
- [www.thesite.org](http://www.thesite.org)
- [www.thesite.org/drinkanddrugs/drugsafety/drugsandyourbody/cannabisandmentalhealth](http://www.thesite.org/drinkanddrugs/drugsafety/drugsandyourbody/cannabisandmentalhealth)
- [www.mind.org.uk](http://www.mind.org.uk)

**Talk to Frank**

Talk to Frank provides free confidential info and advice to anyone with questions or concerns about drugs. **Tel:** 0800 77 66 00

**Release**

Release has a national 24-hour helpline offering advice and info on drug-related problems. **Tel:** 0207 729 9904

**Turning Point**

Turning Point offers rehabilitation, counselling and info for people with drug, alcohol and mental health problems. **Tel:** 0207 702 2300