



A 53-year-old woman is brought to the ED by EMS after being found down on 32nd Street. In the ED she is initially intoxicated and ataxic. By 4 hours later she is noted to be tremulous, tachy, and diaphoretic.

A 29-year-old man presents to primary care office with chief complaint of "I want to get on suboxone." He admits to daily use of percocet, up to 200mg daily, for the last 3 years.

A 36-year-old man comes to the ED after using a great deal of cocaine intermittently over the last 6 months and would like help with not using it.

A 42-year-old woman comes to the ED after binge drinking heavily over the last 6 months. She has no symptoms of withdrawal, never has had any symptoms of withdrawal. She would like help or a referral to help her stop drinking alcohol.

## TREATMENT OF DIFFERENT STAGES

Treatment of withdrawal

Treatment of the addiction itself

Detox v Rehab

• What is the "mainstay" of treatment?

What is the role of pharmacologic treatments?

 Are pharmacologic treatments a comprehensive treatment plan?

What role does the patient play in all this?

- What does recovery look like for a given patient?
  - Abstinence from all substances
  - Abstinence from a given substance
  - Reduction in use of all or a given substance
  - Something else

- What might the process of recovery be like?
  - Classical: Detox -> Rehab -> Halfway House -> Ongoing recovery treatment
  - Outpatient Based: Outpatient Rehab -> Reduced Outpatient Rehab services -> Ongoing recovery treatment
  - Above +/- Pharmacologic Based: Initiation of Pharmacotherapy -> Maintenance -> (Maybe) taper off

- Is "making the person stop" "the main thing"?
- Is recovery really "over" after "stopping" or something?
- What other issues arise in later stages of recovery, beyond the initial stage?

#### PITFALLS

- "I'll stop, IF YOU can FIX \_\_\_\_"
- Decades of substance use and significant co-morbidities, but in favor of an overly simplified treatment plan
- Pressure from others supersedes the patient's own motivation or desire
- Not taking the patient's sources of motivation as primary
- Incorrectly identifying the patient's stage of change statements the patient makes vs behaviors

## TIPS AND SUGGESTIONS

- Try to be as clear as possible about what the patient is in favor of
- Do anything (if possible, see below) you can in order to let the
  patient know you are on 'their side' in the sense that you want to
  help them with what they are looking for help with
- Or, if you cannot help them with what they are looking for help with ("I'm just here for 10mg Xanax") be clear and neutral about it
- For patients in the pre-contemplative stage, aggressively offering treatment might not be the best approach

## 12-STEP MEETINGS

- Goal and Purpose
- "Alcoholic"
- "Desire to stop drinking"
- "Can't control our drinking"
- What is Step 1?
- What are the pros?
- What are the cons?
- Data shows step work directly correlated to recovery

#### 12-STEP MEETINGS

Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from <u>alcoholism</u>. The only requirement for membership is a <u>desire to stop drinking</u>. <u>There are no dues or fees</u> for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our <u>primary purpose is to stay sober and help other alcoholics</u> to achieve sobriety.

#### **SUMMARY**

- Treatment of withdrawal is different from treatment of the addiction itself
- Treatment is not only "making the person stop" and this in and of itself is a misunderstanding
- Treatment can comprise completely different aspects and different goals depending on the patient
- For some patients, pharmacologic tx alone is sufficient, although very few of these treatments were developed as stand-alone treatments
- For most patients we see in an acute care setting, pharmacologic tx is an excellent treatment, but not a sufficiently comprehensive one to be used alone
- Treatment isn't 'over' after the patient achieves their first goal which may be to cease or reduce their use of substances
- For patients in the pre-contemplative stage, aggressively offering tx might not be the best approach
- Make sure you ask as many questions as possible to understand the patient's goals clearly
- 12-Step Programs provide a highly beneficial resource for those for whom it is appropriate, but it is clearly not for everyone who uses substances

## QUESTIONS & CONTACT INFORMATION

**Questions or Consultations for Trainees** 

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