

What is dual diagnosis?

A dual diagnosis occurs when an individual is affected by both chemical dependency and psychiatric/emotional illness. Both illnesses may affect a person physically, socially, psychologically, and spiritually. Each illness has symptoms that interfere with a person's ability to function effectively. The illnesses may affect each other, and each disorder predisposes to relapse in the other disease. At times the symptoms can overlap and even mask as each other, making treatment and diagnosis difficult. To fully recover, a person needs to treat/address both disorders.

Other names for this illness are:

- co-morbid disorders
- co-occurring disorders
- concurrent disorders
- co-morbidity
- dual disorders.

What is the relationship between mental illness and substance abuse?

Alcohol and drug abuse have many negative connotations in our society. For many, drug abuse is perceived to result from lack of willpower, laziness, or selfishness. Sadly, these erroneous perceptions also extend to a group extremely vulnerable to drug abuse – people with mental disorders.

- Those with a mental disorder can be very sensitive to the effects of drug abuse; not only can it be easier to abuse drugs, it can also be harder to quit.
- Like the rest of the population, a person with a mental disorder is more likely to abuse drugs if there is a family history of alcohol and drug abuse.
- Environmental factors such as peer pressure, location, and the availability of the drug also contribute to a pattern of drug abuse in the mentally ill.
- Drug use can interfere with prescribed medication, increase symptoms of a mental condition, and increase relapse risk.
- Having difficulty developing social relationships, some people find themselves more easily accepted by groups whose social activity is based on drug use.

- Some believe that an identity based on drug addiction/alcoholism is more acceptable than one based on mental illness.

A person with a dual diagnosis may sincerely try to recover from one illness and not acknowledge the other. As a person neglects the mental illness, that illness may resurface. This recurrence may in turn lead a person to feel the need to “self medicate” through drug/alcohol use to combat symptoms of the mental illness or side effects of medications. This relief or change is temporary at best and usually leads to hospitalization.

Over time, the lack of progress towards recovery on both fronts may:

- trigger feelings of failure and alienation
- lead to trouble finding housing, because of difficulty living at home and non-tolerance in the rehabilitation or care facilities
- lead to loss of support systems
- result in frequent relapses and hospital stays.

How common is dual diagnosis?

It is challenging to determine conclusively how many people have a dual diagnosis because existing studies examine different populations and utilize different screening tools. Further, people with dual disorders are frequently misidentified, as diagnosis can be more difficult because one disorder can mimic another. Varying sources of information have found that:

- 37% of alcohol abusers and 53% of drug users also have at least one serious mental illness
- of all people diagnosed as mentally ill, 29% abuse either alcohol or drugs.
- in 1993, as many as 50% of the mentally ill population were reported to have a substantial abuse problem.
- in 2002, depending on the setting, prevalence rates for the co-occurring disorders (dual diagnosis) ranged from 20 to 80%.

Relapse rates for substance use are higher for people with a concurrent mental disorder, as are the chances that symptoms of mental illness will return for those with a concurrent substance use problem.

How is a dual diagnosis determined?

Dual diagnosis can be difficult to identify. Many of the symptoms of drug abuse (such as extreme anxiety, depression, paranoia, delusions and hallucinations) are similar to those of mental illness. Many of the effects on one's life (severe decline in self-care and functioning) may also be similar. Often, one problem is blamed on the other.

Substance abuse complicates almost every aspect of care for a person with a mental illness. Mental health professionals and families of mentally ill may underestimate the amount of drugs and/or alcohol dependency among people in their care. There may be several reasons for this:

- People with a mental illness may abuse drugs or alcohol covertly without their families knowing it.
- It may be difficult to separate the behaviors due to mental illness from those due to chemical dependency.
- It takes time to unravel the interacting effects of substance abuse and mental illness.

How is a dual diagnosis treated?

Support for those dually diagnosed has traditionally been scattered. Programs historically have not addressed the unique problems of those struggling with both disorders, instead treating the mental illness and drug abuse as separate problems. This has not proved to be an effective approach and more programs now are being developed to treat both disorders together.

- Ideally, both problems should be treated simultaneously.
- The first step in treatment for any substance abuse must be detoxification – a period of time during which the body is allowed to cleanse itself of alcohol and/or drugs.
- For safety, detoxification should take place under medical supervision. It can take a few days to a week or more depending on what substances the person abused and for how long.
- Treatment programs for this population should take a gradual approach. Those with dual diagnosis have to proceed at their own pace in the treatment process.

- Abstinence may be a goal of the program but should not be a pre-condition to enter treatment.
- A person with dual diagnosis may or may not fit into traditional 12-Step groups.

Attention should be given to survival networks that can serve as important reinforcers. Some important aspects of developing this kind of support system include:

- opportunities to socialize and access to recreational activities to develop peer relationships
- attendance in groups that deal with education and awareness of dual diagnosis issues, medication support and management, life skills, and wellness
- family support and education

Denial is an inherent part of the problem in a dual diagnosis – the involved individuals often do not have insight as to the seriousness and the scope of the problem. They need understanding of how hard it is to end an addiction problem and need to receive credit for accomplishments.

There are several different levels of care, including full hospitalizations, partial hospitalizations, and out patient treatment. The need for hospitalization depends on the nature and severity of illness, the associated risk or complication, and personal treatment history. Because both illnesses are treated at the same time, a person needs to be able to take psychiatric medications while undergoing detoxification.