

Drug-Addicted Patients With Mental Illness Respond to Behavioral Intervention

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By Martha Kerr

NEW YORK (Reuters Health) Apr 10 - Patients with the dual diagnosis of severe, persistent mental illness and substance abuse respond well to a new behavioral approach that involves social skills training and motivational interviewing, as well as mandatory urine checks. The strategy is described in the April Archives of General Psychiatry.

The intervention is called Behavioral Treatment for Substance Abuse in Severe and Persistent Mental Illness (BTSAS). In a randomized, controlled trial Dr. Alan S. Bellack of the Veteran Affairs Maryland Health Care System in Baltimore compared this approach with Supportive Treatment for Addiction Recovery (STAR), the usual care approach involving talk and support used at the mental health center of the University of Maryland in Baltimore.

The study involved 129 stabilized outpatients with drug dependence per DSM criteria. Of these, 39.5% met the DSM-IV definition of schizophrenia, 55.8% had major affective disorders and the remainder had other severe and persistent mental illnesses. The study period was 6 months.

Patients met in small groups twice a week. The primary outcome was clean urine specimens at treatment sessions.

Dr. Bellack's team reports that "BTSAS was significantly more effective than STAR" in the primary outcome. BTSAS was also associated with better attendance at meetings and better long-term adherence to the program than STAR. Quality of life and financial status was better and the need for hospitalization decreased with the new treatment approach.

"Ours is the first multifaceted behavioral treatment for persons with dual disorders: drug dependence and serious mental illness. Other behavioral treatments focus primarily on less impaired persons and those without dual disorders," Dr. Bellack told Reuters Health.

"Our treatment is primarily suitable for people with current or recent drug dependence and serious mental illness, including schizophrenia, bipolar disorder, and persistent, debilitating depression or anxiety disorders. We are currently developing a parallel intervention for people with serious mental illness and alcohol abuse/dependence," Dr. Bellack commented.

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