

**Abstract submission form for the 17th EASAR conference
15th -17th May 2014 in Lüneburg, Germany**

Title: Outcome in Addiction Care: The relation between psychiatric symptoms and substance use

Authors: Spits, ME MSc; Oudejans, SCC PhD

Affiliations: AMC-AIAR / Mark Bench

Presenter: Masha Spits

Abstract

(max. 200 words; if possible provide abstract text in structured form using subject headings, i.e. *Objectives, Methods, Results, Discussion, Conclusion*)

Measuring outcomes is a hot topic in mental health care and substance abuse treatment in the Netherlands. The nationwide Benchmark system in The Netherlands distinguishes multiple outcome domains: Psychiatric Symptoms, Functioning, Quality of Life, Client satisfaction and specific domains, like substance use for addiction.

It is believed that assessing those multiple domains ensures a multidimensional picture of success. This belief derives from the fact that psychiatric symptoms, problems with functioning and substance abuse often co-occur (Kerkmeier & Hendriks, 2003): the prevalence of psychiatric disorders among people in substance abuse treatment can be around 50% (Watkins et al., 2004). Guidelines recommend to focus primarily on the substance abuse disorder, before assessing whether the psychiatric symptoms can be diagnosed as an independent disorder (Landelijke stuurgroep Multidisciplinaire richtlijnontwikkeling in de GGZ, 2009; Posthuma, Vos, & Kerkmeier, 2003). The above suggests a positive relation between treatment success on substance use on the one hand and on improvement of psychiatric symptoms on the other.

Although many studies confirm that psychiatric symptoms decrease on average (group level) after substance abuse treatment (Charney, Palacios-Boix, Negrete, Dobkin, & Gill, 2005; Bowen, D'Arcy, Keegan, & Senthilselvan, 2000), little is known about the level of psychiatric symptoms given a certain level of substance (ab)use within patients. Furthermore most outcome research is focused on patients in substance abuse treatment with a comorbid psychiatric disorder, and not on patients with -moderate to severe- psychiatric symptoms but without a diagnosis (Cridland, Deane, Hsu, & Kelly, 2012). These patients are -also due to the absence of co-morbidity- often referred to lower treatment intensities, but do experience psychiatric complaints and therefore impairment. The question is whether those complaints and impairments decrease when levels of substance (ab)use decrease or when they become abstinent during and after treatment.

The present study assesses outcomes of substance abuse treatment on both the domains of substance (ab)use and psychiatric symptoms, with the focus on the relation between both domains within patients. Therefore we will use outcome-data from an outpatient substance abuse treatment facility in Amsterdam. Follow-up data of patients referred to low-level treatment intensities are collected by a callcenter, 9 months after the start of treatment. We will discuss the first, preliminary results and implications for further analysis.

Presentation type:

Review/Discussion Finished study Preliminary Results Idea/study protocol other: