

## Co-Occurring Disorders and Treatment

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### Editorial

The diagnosis of people who have mental health disorders as well as substance use disorders is called co-occurring disorder. Earlier it was perceived that treatment for substance abuse disorder (drug/alcohol) was considered to be separate from treatment for mental illness (depression, anxiety and Obsessive Compulsive Disorder etc.) and was treated at different facilities using various therapeutic approaches. As a consequence, people suffered from several psychiatric disorders such as schizophrenia, bipolar disorders and depression never received treatment their substance abuse disorder. Now, we know that the co-occurring disorders impact one another and must be treated together. Integrated treatment in which both disorders must be treated at the same time; same place is a more effective approach. Diagnosis of co-occurring disorders is sometimes difficult due the fact that symptoms of mental illness can mask the symptoms of substance abuse or addiction and vice versa.

According to the U.S. department of Health and Human Services one in five Americans struggle with mental illness and five percent of Americans affected by severe psychiatric disorders such as bipolar disorders, schizophrenia etc. and approximately 7.9 million adults in the USA had co-occurring disorders in 2014 [1]. An individual having the co-occurring disorders and leading a life with poor lifestyle choices without a proper treatment may often translate to early or sudden death. Few common mental disorders found in people are:-

- Anxiety related disorders (Obsessive compulsive disorder, post-traumatic stress disorder, panic disorder and social anxiety etc.)
- Mental illness (Schizophrenia and schizoaffective disorder)
- Mood related disorders (Bipolar disorder, Dysthymia and major depression etc.). Substance use disorders include alcohol or drug abuse and alcohol and drug dependence.

### Treatments

Integrated treatment of co-occurring disorders is very important as this approach reduce the number of suicide attempts, lower the relapse rates among rehab graduates and foster long-term abstinence. Integrated treatment helps gain knowledge, develop hope and skills to manage their problems and pursue meaningful life goals. Some of the key strategies implicated in the integrated treatment of patients with Co-Occurring Disorders (COD) along with medication include the following:

1. Explain the patients about the role of alcohol and drugs play in their life and offer them a chance to learn more about alcohol and drugs.

2. Help patients to engage and involve with supportive employment and other activities that may help the recovery process.
3. Help patients to identify the recovery goals and provide counselling specifically designed for people with COD.

There is no single program and intervention for people with COD as the appropriate treatment interventions and plans are quite complex depending on what might be observed in each case. The best approach is to provide diagnosis, medication and psychiatric counselling directly at the same location where the COD patients are based. This is an effective strategy to over-come the barriers such as distance and time limitations, cost, difficulty of becoming comfortable with different staff etc.

### Medication

COD patients require medication to control their psychiatric symptoms. The advances of the pharmaceutical industry over the last decade have produced many antidepressants, anticonvulsants, antipsychotic medications with greater effectiveness and few side effects.

### Psychoeducational classes

Psychoeducational classes are the important elements in the COD integrated treatment plan. Psychoeducational classes are the kind of classes that increase client awareness of their specific problems and these classes typically focus on medication, signs and symptoms of mental disorders and the effects of mental disorders on the substrate abuse program.

### Onsite double trouble groups

These onsite groups such as double trouble offer an open forum for the discussion of the interrelated problems of substance abuse and mental disorders helping inmate COD patients to identify triggers for relapse. Double trouble groups can also be used to monitor psychiatric symptoms, substance abuse, medication adherence and adherence to schedule activities. These groups provide a constant framework for analysis, assessment and planning.

Early diagnosis and treatment can alleviate patient discomfort, reduce the misdiagnosis cost and the risk associated with suicide and morbidity.

### References

1. Sarra LH, Joel Kennet (2014) Behavioral health trends in the United States: Results from the 2014 National survey on drug use and health (SAMHSA).