

Addressing the Age-Specific Needs of the Elder with Substance Use Disorder

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Objectives

- Identify trends in substance use disorder and medication misuse among the elderly
- Identify key developmental considerations
- Identify unique social and biological factors related to substance use disorder among the elderly
- Identify specific treatment considerations in working with the elderly

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Part I

Substance Misuse and Abuse among our Mature Members

A Growing Concern?

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Changing Demographics

- Number of Americans 65 years + is projected to double to over 98 million by 2060. The group's share of the population will rise to nearly 24% from 15%.

Mather, Jacobsen & Pollard (2015)

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Cohort Effects

- Birth cohorts that had higher rates of illicit drug use in youth or younger adulthood experience higher rates of use as they age than other groups.
- More disposable income and a “quick fix” society.
- Easier access to prescription drugs, advertising have decreased stigma.

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Prescription, OTC, Illicit Drug and Alcohol Concerns

- Prescription Medications
- Over-the Counter Medications
 - Adherence, over and under use, interactions
- Alcohol
- Illicit drugs

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Prescription Medications

- Estimated that the number of mature adults abusing prescription medications will increase from 1.2% in 2001 to 2.4% by 2020.
- Number of mature adults using psychoactive medications w/o prescription is projected to increase by 190%, from 911,000 in 1999 to 2.7 million in 2020

Kalapatapu & Sullivan (2010)

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Prescription Medication Misuse

- 82% of adults over 65 years take at least 1 prescription drug.
- 30% of adults over 65 take 8 or more prescription drugs a day.
- Benzodiazepines and opiate analgesics are among the most misused.

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Medication Adherence

Percentage of patients taking a course of action once a prescription is written

- 12% don't fill their prescription at all.
- 12% don't take medication at all after they fill the prescription.
- 29% stop taking their medication before it runs out.
- 22% take less of the medication than is prescribed on the label.
- 75% Total non-adherence!

(American Heart Association)

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Women & Prescription Medication

An estimated 11% of women over 58 years are addicted to prescription medicine.

About 1% of this receive treatment.

Koenig, T.L. & Crisp, C. (2008)

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Benzodiazepines

- Mature individuals are 2-3 times more likely than younger individuals to be prescribed psychoactive drugs- most notably benzodiazepines.
- Benzodiazepines and opiates are prescription drugs most likely to be abused by mature adults.

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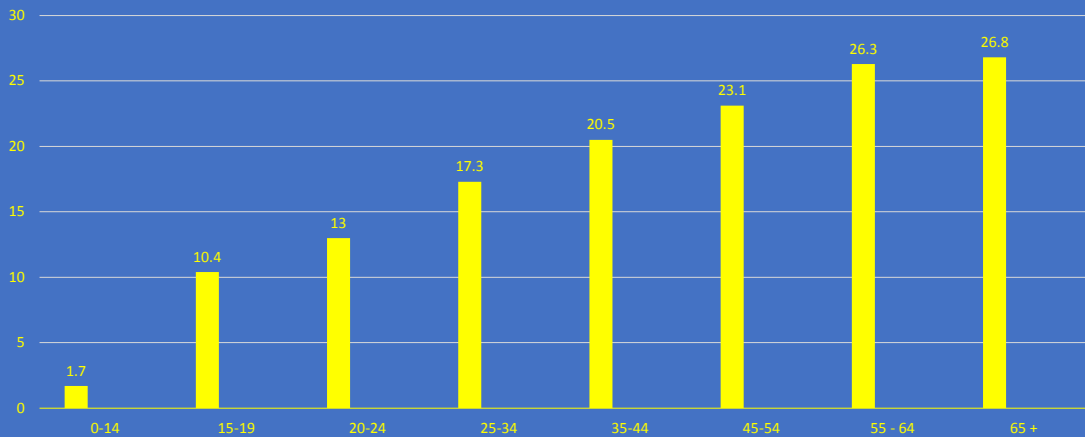
Benzodiazepines

- Make up 17 – 23% of drugs for mature adults.
 - 95% for insomnia and anxiety
 - 5% for general anesthesia, muscle relaxants, or anti-convulsants

Assem-Hilger, Weissgram, Kirchmeyer, Fischer, & Barnas (2009)

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Percentage of persons who had at least one prescription filled for an opioid by age group- United States, 2017



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Opioids- Consequences

- According to 2005 National Survey on Drug Use and Health Report, opioids account for the majority of prescription drug related emergency department visits for persons 55 years and older.
- This number is projected to double.

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Over-the-Counter Medications

- Mature adults utilize more OTC drugs than any other age groups.
- Approximately 25% of older adults on a combination of 10 more OTC and prescription medications.
- Combination of alcohol and OTC medication is most common source of adverse drug reactions in the elderly.

Stone et al (2017)

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The Big Four

- Ibuprofen, Aspirin, Acetaminophen & Diphenhydramine
- 45% of acetaminophen and 26% of aspirin are in multiple-ingredient preparations.
- Acetaminophen unintentional overdose results in 14,000 emergency room visits/year
 - 50% of all acute liver failures per year
- Chui et al (2017)

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Alcohol Use Disorder Epidemiology

- Estimated that 15% of non-institutionalized mature adults are at risk for alcoholism
- Up to 50% of mature adults residing in nursing & continuing care retirement communities drink at least moderately or have problems related to alcohol abuse.
- Briggs et al (2011)

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Prevalence of AUD

- Problem drinking: 1 – 15%
- Etoh Dependence: 1.6% - 4% up to 17%
- Approximately 11 – 20% of acute care hospital admission among the elderly are alcoholism related.
 - 21% of hospitalized adults over 40 have diagnosis of alcoholism

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Alcohol Use Disorders

- Early Onset:
 - Began before 65 and continues to consume.
 - Represents approximately 2/3 of abusers.
- Late Onset:
 - Onset 65 or after, usually in response to negative life situation.
 - Tend to have fewer physical and mental health issues.

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Early Onset AUD

- Long standing alcohol problems with onset before 40.
- Majority of mature adults receiving SUD tx.
- Higher psychiatric comorbidity

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Data from Epidemiological Catchment Area Studies (ECA)

- 3% male alcoholics between 50 and 59 years reported 1st sx. after 49.
 - 15% between 60 and 69 years.
 - 14% between 70 and 79 years.
- 16% female alcoholics between 50 and 59 years reported 1st sx. after 49.
 - 24% between 60 and 69 years.
 - 28% between 70 and 79 years.

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Late Onset AUD

- More likely to begin drinking or increase drinking in response to loss, retirement, or change in health status.
- More likely to characterize themselves as lonely and report less life satisfaction.
- Increased amount of free time and lessening of role responsibilities may serve as etiological factors.

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Late Onset AUD (Cont.)

- Mild abuse and more successfully treated
- Tend to have better prognosis for recovery.
- Most under-recognized population
- Menninger (2002); Benshoff , Harrawood, & Koch (2003)

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Illicit Drug Use

- Illicit drug use by adults, 55 to 59 years, increased from 1.9% in 2002 to 5.0% in 2008.
- Among older adults in SUD tx. there has been a steep reduction in % reporting alcohol as primary drug from 84.2% to 57.2%
 - Heroin and cocaine more frequently reported.
- Tends to be younger drug users who have survived.

Shah & Fountain (2008)

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