## Screen for Mood Disorders In Patients With Addictions

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Contributing Writer

WASHINGTON — People who abuse substances are more likely to develop a mood disorder than are those who do not, Dr. Kathleen T. Brady said during the annual conference of the Association for Medical Education and Research in Substance Abuse.

Dr. Brady, professor of psychiatry at the Medical University of South Carolina, Charleston, said the comorbidity of substance abuse and mood disorders is an increasingly serious concern in the psychiatric community.

Depression is the most common comorbidity, but bipolar disorder strikes a



Those diagnosed with alcohol dependency are 5.1 times more likely to have bipolar disorder.

DR. BRADY

higher percentage of those who abuse substances—whether they be alcohol, cigarettes, or narcotics, Dr. Brady said at the meeting, which was sponsored by Brown Medical School.

Those diagnosed with an alcohol dependency, for example, are 1.3 times more likely to suffer from depression and 5.1 times more likely to have bipolar disorder, reported Dr. Brady, whose numbers were based on findings in the National Comorbidity Study. The impact of substance abuse on a bipolar disorder patient can be significant, as it has been shown to increase suicide rates, emergency department visits, and hospitalizations, as well as lead to poor treatment compliance.

Cigarette smoking and nicotine addiction also have a strong relationship with depression. Dr. Brady said 30%-60% of smokers have episodes of depression, while nicotine withdrawal can precipitate depression as well. Research has found early substance abuse in adolescent years increases the likelihood of developing psychiatric disorders when a person reaches his or her late 20s.

Dr. Brady said researchers have pinpointed one of the chief causes of most substance abuse and mood disorders. "Stress is the biggest environmental factor," she said. "We know that stress, such as in early childhood, can influence the development of substance abuse and mood disorder."

Childhood sexual abuse was characterized as a key trigger for depression and substance abuse disorder in adulthood. The more severe the childhood sexual abuse, the greater the risk of later mood disorders.

With regard to treating the dual disorders, Dr. Brady said debate is ongoing within the community on whether there is any advantage to adopting a combined therapy regimen. "To address the question

of 'should you add medications to curb alcohol dependency to your bipolar medications or antidepressants?' the answer is yes," she said.

Dr. Brady said the two general principles of treating comorbidity should be screening for both disorders carefully and managing both problems simultaneously with medication. "Most doctors are not doing enough to treat substance use disorder with pharmacologics," she said.

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Having a smoking-related illness
Having better rapport with doctor
Feeling that doctor really cares
Feeling that doctor is knowledgeable
Knowing someone who's quit
Seeing signs and pamphlets in the office
Having family member with

smoking-related medical event

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36%
34%
33%
26%
24%

Note: Based on 503 smokers' and 501 physicians' responses to a written questionnaire. Source: Pfizer Inc.



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