

North Carolina State Opiate Conference

Deni Carise

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The Future of our Field,
Treatment Effectiveness,
New Fun Stuff
and my Best Guess...

Who are you?



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CRC Lines of Business - Quick Facts

Adult Recovery

46 programs
>2,000 beds

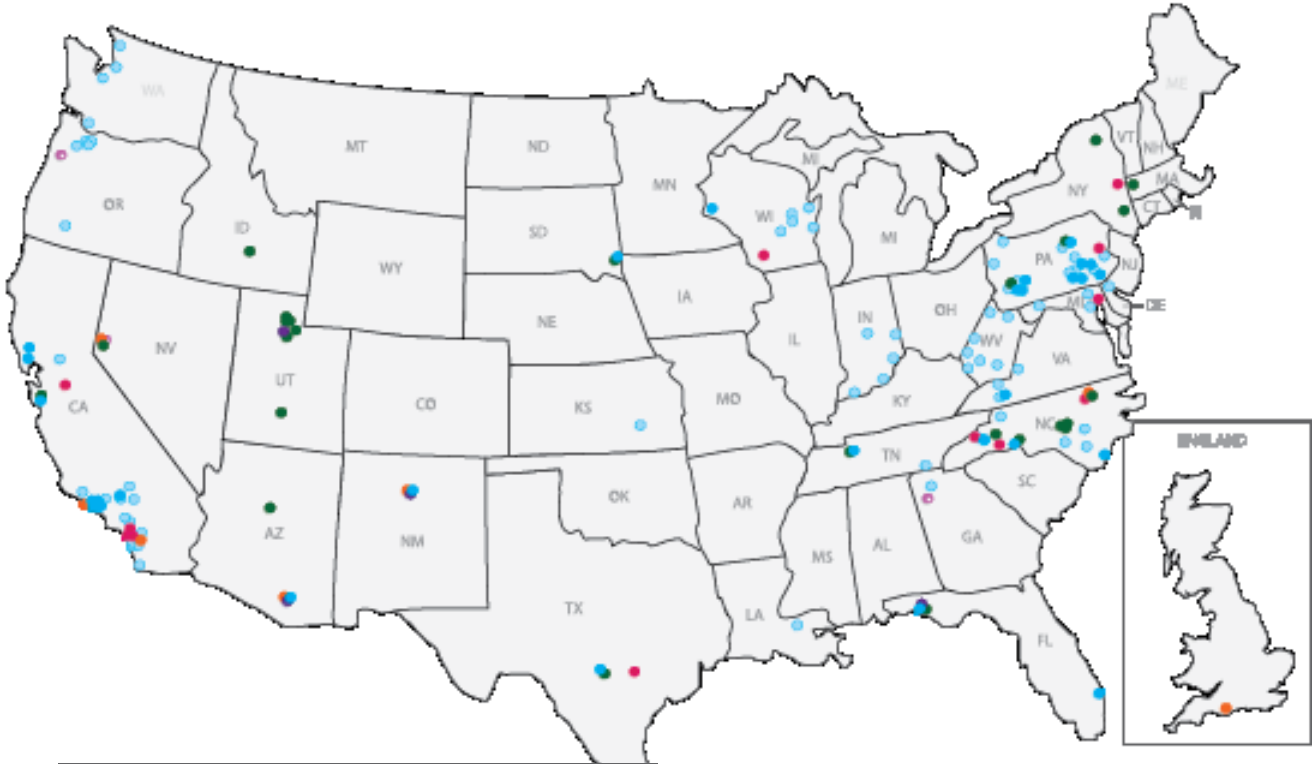
Comprehensive Treatment Centers

80 Clinics
>41,000
average
daily census

Eating Disorders

4 programs
50 beds

CRC Today : Over 140 facilities in 33 states



- Adult Recovery Programs
- Mental Health Treatment Programs
- Comprehensive Outpatient Treatment Centers
- Troubled Youth Programs
- Eating Disorders Treatment
- Weight Management



Disclaimer

A National Perspective
with National Data

The Future of our Field?

Lets start with the
current state of the field.

Addiction Specialty Care

11,398 specialty programs in US per NSSATS

31% treat less than 200 patients per year

60% private, not for profit

The government funds 77% of treatment costs

Private Sector (insurance) provides <12%

Similar to other medical disorders?

Sources – NSSATS, 2007

Program Ownership

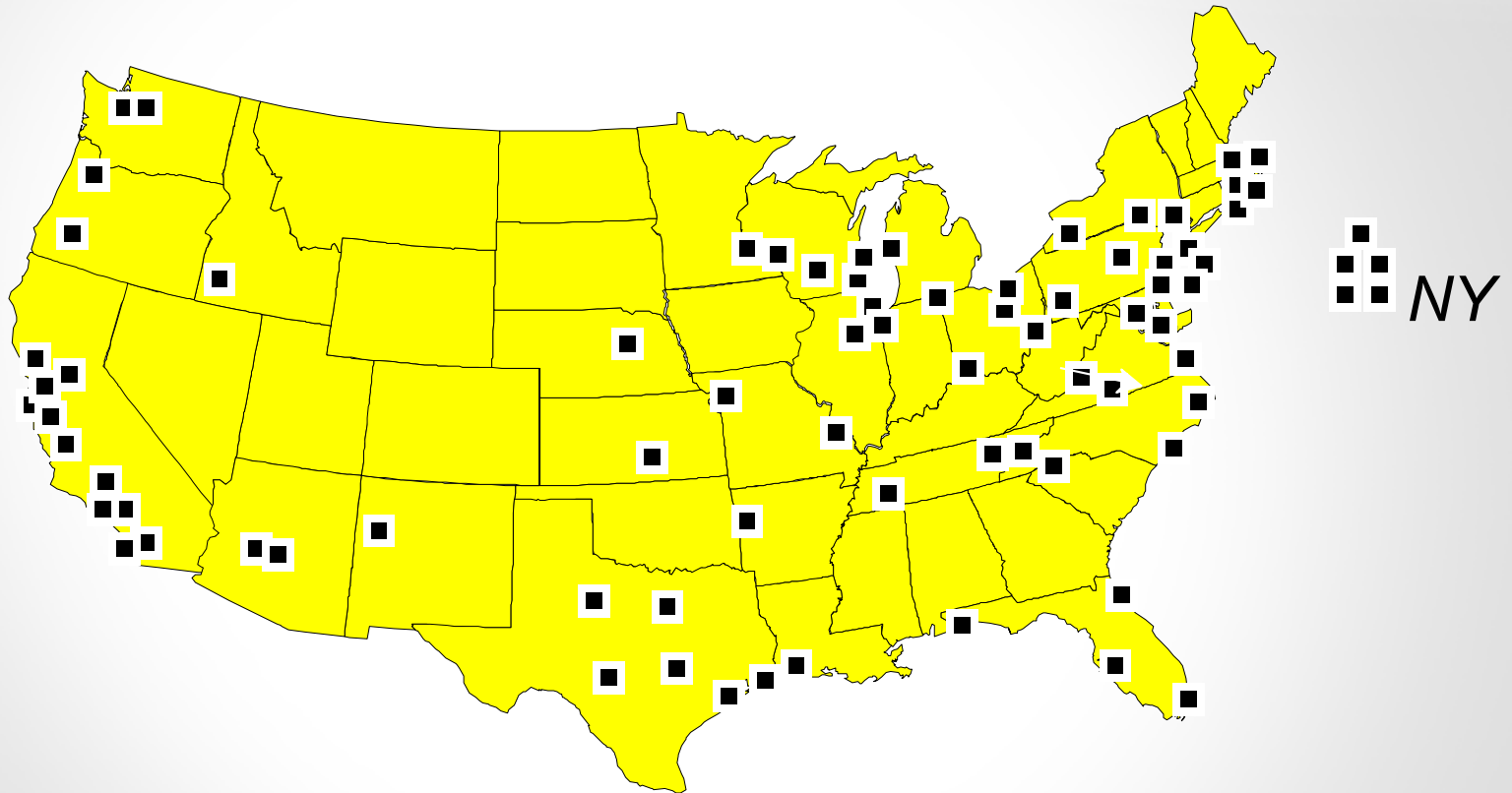
Ownership	1990	2000	2008	2012
Private Non-Profit	64%	59%	59%	56%
Private For-Profit	17%	26%	27%	32%
State/Local Gov't*	15%	11%	10%	9%

The Treatment System

Modality	1975	1990	2006
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<i>Residential</i>	<i>64%</i>	<i>39%</i>	<i>8%</i>
<i>Outpatient</i>	<i>27%</i>	<i>59%</i>	<i>81%</i>
<i>Methadone</i>	<i>9%</i>	<i>10%</i>	<i>11%</i>

State of the Programs/Staff



Brief Findings from DENS National Sample
175 Sites

Program “Turnover” over 16 mos

8% of programs had closed

7% of programs had stopped SA TX

SO - 15% no longer providing SA Treatment

BUT WAIT – THERE’S MORE...

**29% of the rest had been taken over, usually
by MH agencies**

Wow - 44% of all providers had closed, been
taken over, or stopped the service.

McLellan, Carise & Kleber. (2003). Can the national addiction treatment infrastructure support the public’s demand for quality care? Journal of Substance Abuse Treatment, 25 (117-121)

Staff Turnover – 1 Year



54% of directors
have been there
less than 1 year

Counselor turnover
50% per year

McLellan, Carise & Kleber. (2003). Can the national addiction treatment infrastructure support the public's demand for quality care? *J. Substance Abuse Treatment*, 25 (117-121)

Want Add, circa 1995 Philadelphia Inquirer

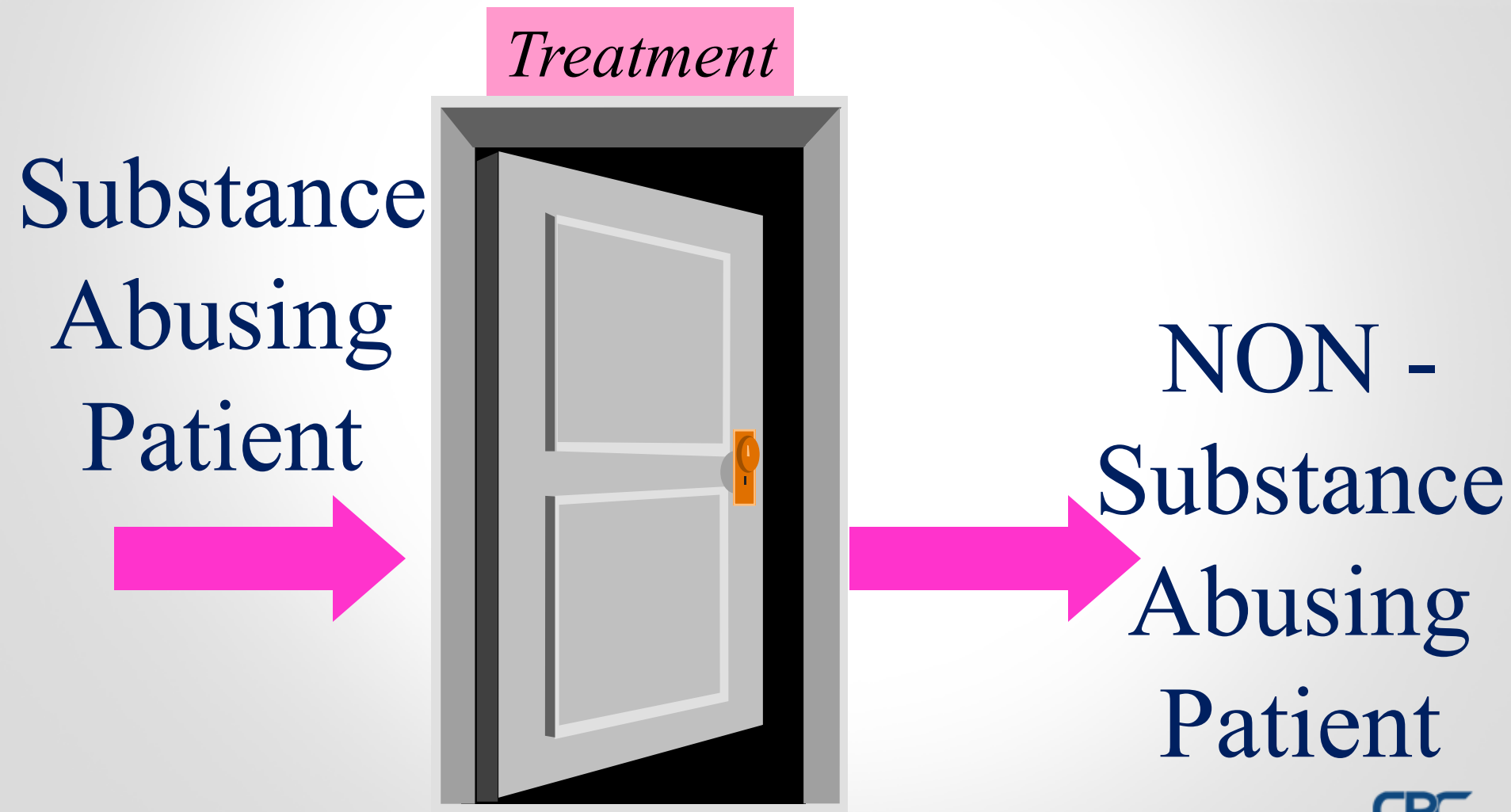
Drug Counselor – For outpatient treatment program. No experience necessary, will train on site. Call.....

Dry Cleaning Technician – Center city laundry. Must be experienced. Call.....

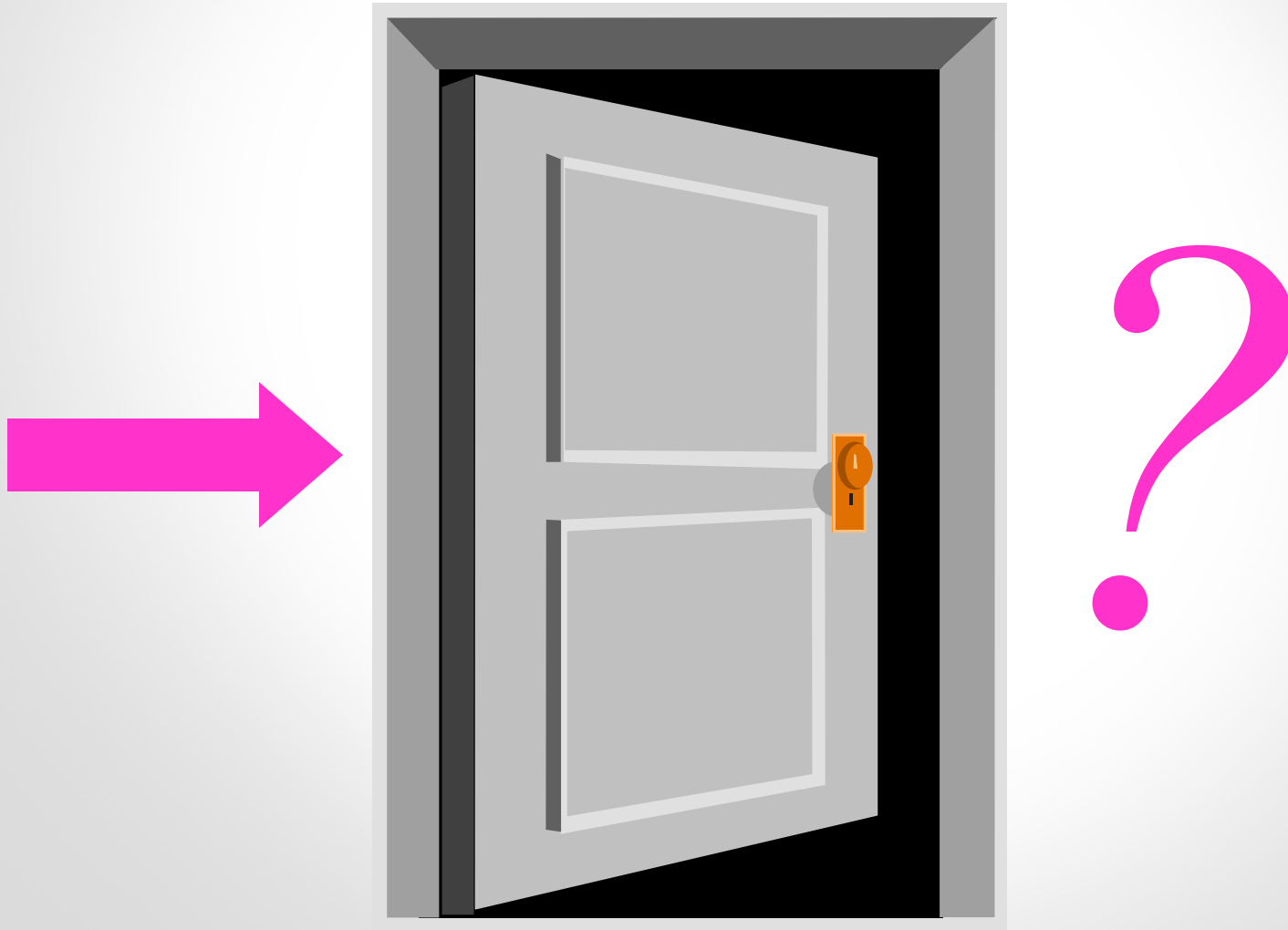
Treatment Today

The Current Treatment Model

A Nice Simple Treatment Model



What Really Goes on in Treatment?



How's that working for us?

You know...

The First Appointment

About 50% of people
who schedule an
appointment
do not show up for their
1st session.

How Long Do They Stay?

Up to 50% of
outpatients drop out
within one month.

Do They Stay Sober?

About 60% relapse
within 6 months after treatment

About 76% relapse
in the year after treatment

Wilbourne & Miller. (2003). Treatment of alcoholism: Older and wiser? In McGovern & White (eds.), *Alcohol Problems in the United States: Twenty Years of Treatment Perspective*. New York: Haworth Press, pp. 41-59.

Do They Return to Tx?

About 45% apply for re-treatment within 12 months

Intake/Admission Process:

No Standard Intake /Assessment Procedures

15 – 20% Don't Do Assessment

Staff time for intake = 2-4 hours

30% of programs collected only information required by regulating agencies.

No Perceived Value for Assessment

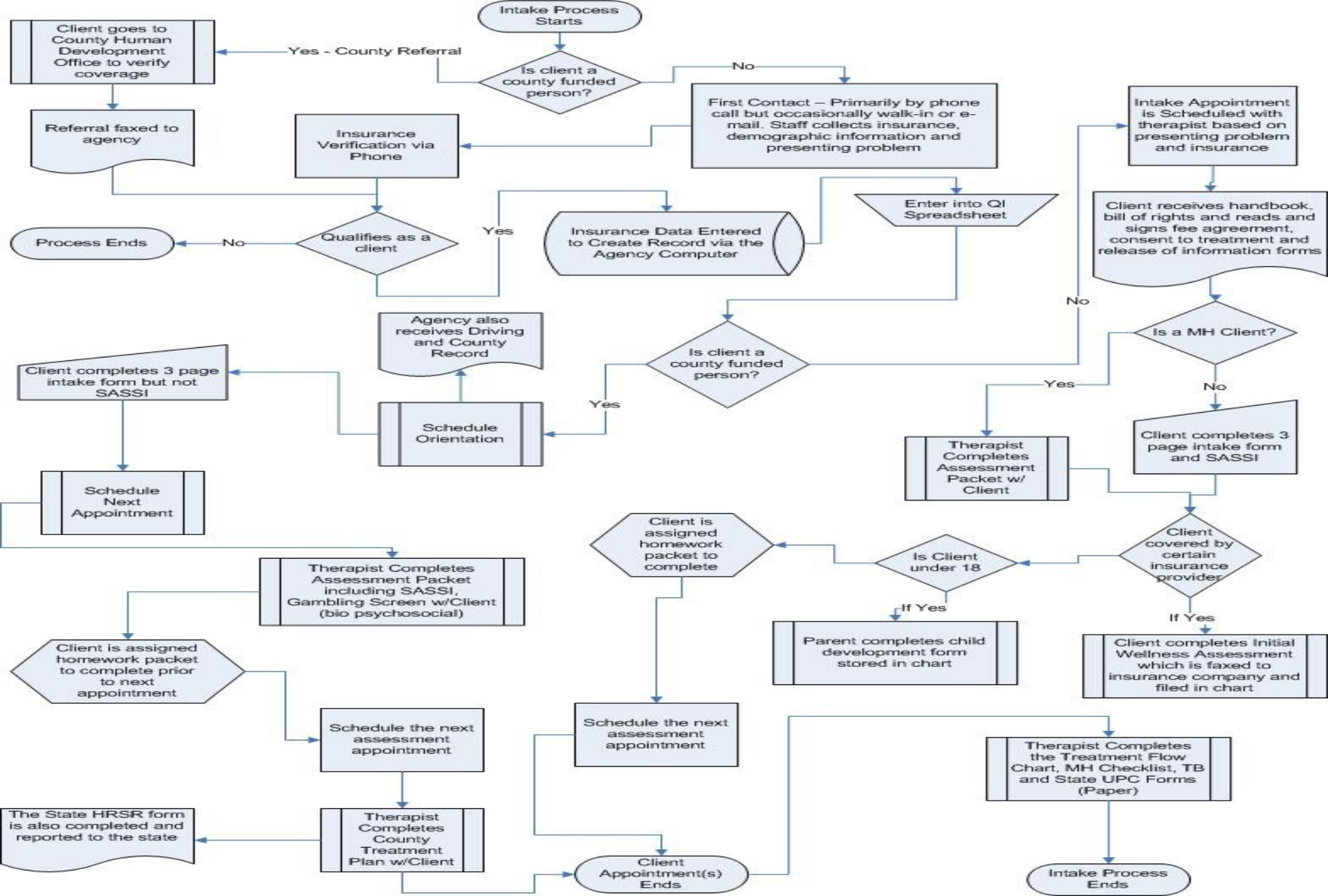
“Simply Paperwork” - Not Related to Treatment Plan or Services Delivered

A Typical Intake/Assessment?

That's way too long...

You have to add these questions...

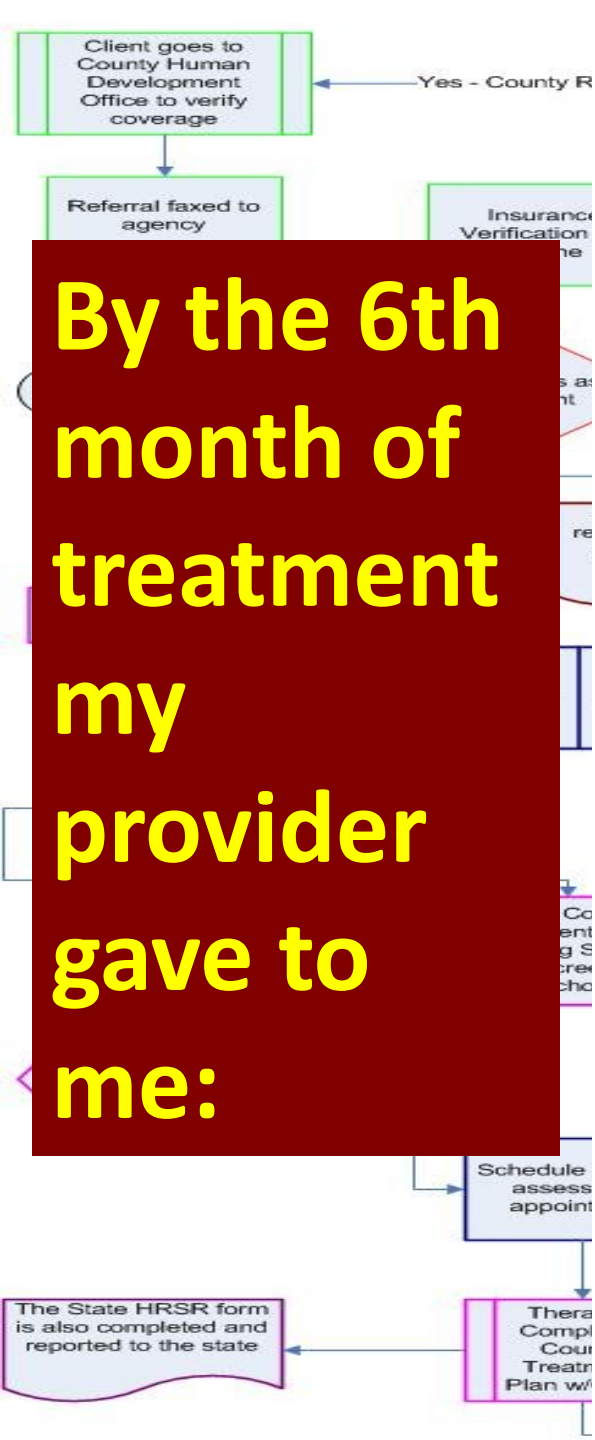
Then there's a few other steps....



Ford J, Wisdom JP & Wise M. Peek Inside the Box: How Information Flows through Drug Treatment Agencies. AHSR, Boston, MA October 20-22, 2008.

By the 6th month of treatment my provider gave to me:

- 12 *Long Consent Forms*
- 11 *12-Step Meetings*
- 10 *Big Group Sessions*
- 9 *Urine Drug Screens*
- 8 *No-Show Phone Calls*
- 7 *Chalk Talk Watchings*
- 6 *Probation Contacts*
- 5 *Insurance questions*
- 4 *Intake Sessions*
- 3 *Counselor Changes*
- 2 *New Directors,*
And a Treat-ment Care Plan Thing



*We owe it to ourselves, our
clients and the field to do
better*

Gee – Thanks Deni,

Any good news?

Does Addiction Treatment Work?

Compared to What?

1. Public Expectations?
2. No Treatment?
3. Role of Motivation
4. Compared to other Chronic Diseases?

Does Treatment *Work*...

Compared to Public Expectations?

Public Expectations of Substance Abuse Treatment

Recovery / Completely Abstinent

- Reduced use of medical services
- Eliminate crime
- Return to employment/self support
- Eliminate Family Disruption

Public Expectations of Substance Abuse Treatment

What do most of these expectations:
stop using so many medical/ER
services, no crime, get a job
have in common?

COSTS TO SOCIETY

Does the Public believe..

addiction is an illness?

Why don't people believe addiction is an "Illness"?

- Addiction is self-induced
- Don't believe there is a genetic component

Identifying Addiction as a Chronic Medical Illness

≠

Lack of
Responsibility

AA Literature: As Bills Sees It

1960, p. 32

Some strongly object to AA's position that alcoholism is an illness [thinking] this ...removes ... responsibility from alcoholics...This is far from true. We do not use the concept of sickness to absolve members from responsibility...we use it as an obligation...to get well.

Does Treatment Work

Compared to
No Treatment?

Treatment vs. No Tx

Philadelphia VAMC

Methadone Clinic

Metzger, McLellan, Woody,

O'Brien

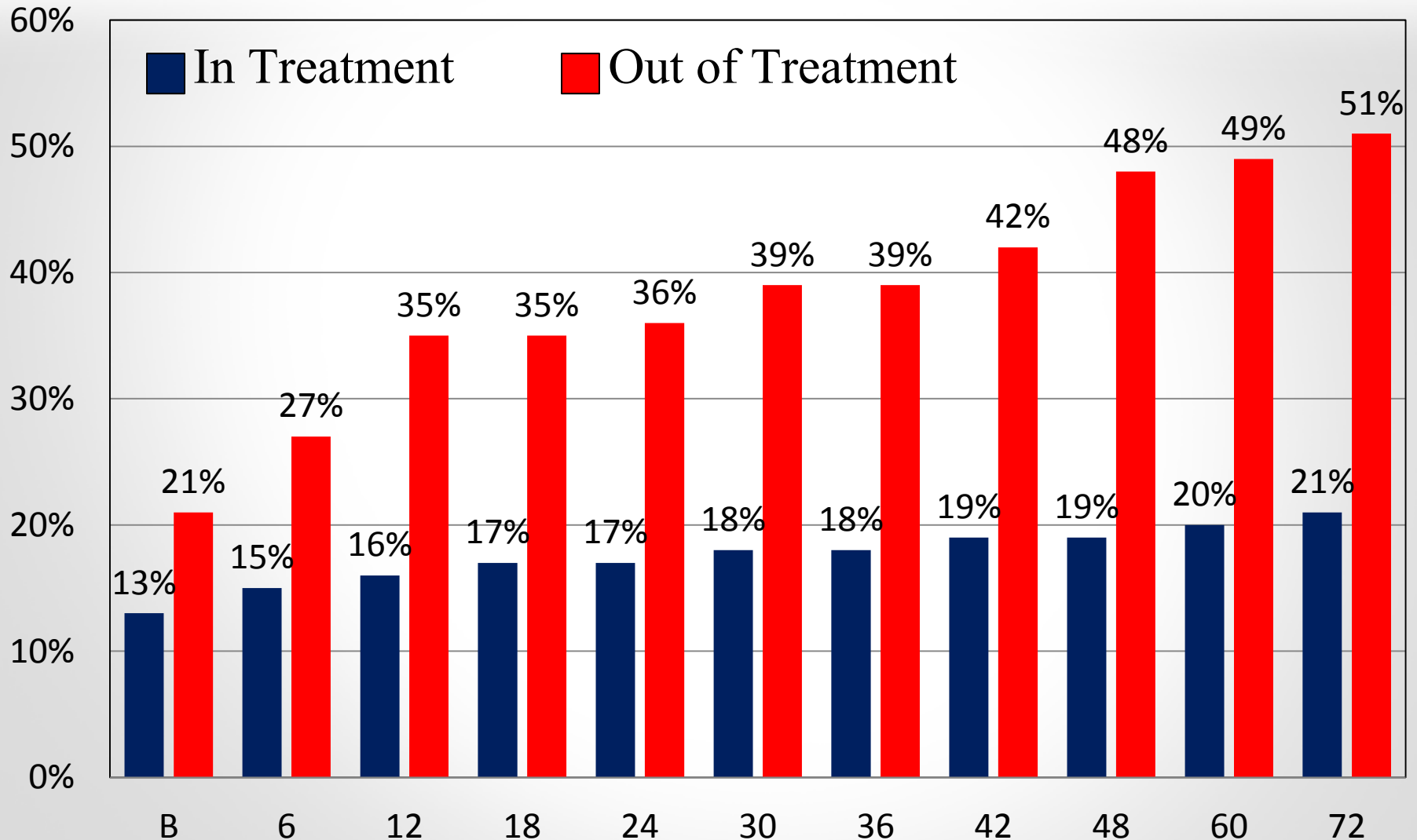
The UPENN Group ☺

Treatment vs. No Tx

Goal:

Decrease HIV
seroconversion rates
among heroin users.

HIV Conversion Rates over 72 Months



But Wait (you say...)

The group that got worse
wasn't motivated –
It would be completely
different if they were
motivated....

Role of Motivation?

Dace Svikis et al.

The Hopkins Group

Role of Motivation?

146 Cocaine Abusing, Pregnant Women
Seeking Pre-Natal Care - Not Treatment

- 46 Received - Standard Pre-Natal Care
- 100 Received - 1-Week Residential Tx.
Instill Abstinence Orientation

Svikis et al. Johns Hopkins

Cocaine + Urine at Delivery

100 Treated
Women

37%

46 Control
Women

63%

NICU Stay and Costs

100 Treated
Women

*7 days

*\$14,500

46 Control
Women

39 days

\$46,700

Morale of the Story:

Get them in,
Develop Motivation!
That's our job!

How does this compare with Treatment for “Real” Illnesses...

You know, like
Hypertension,
Diabetes,
Asthma

Why These?

No Doubt They Are Illnesses
All Chronic Conditions
Influenced by Genetic and
Behavioral Factors
No Cures - But Effective
Treatments Are Available

RELAPSE

Diabetes: 30 - 50%

Hypertension: 50 - 60%

Asthma: 60 - 80%

Addiction 50 - 60%

Lessons Learned from Chronic Medical Illnesses

**Most Patients Do
NOT Respond to
Their First
Treatment/Medication**

Lessons Learned from Chronic Medical Illnesses

Treatment effects
typically don't last
very long after
treatment stops

Lessons Learned from Chronic Medical Illnesses

***MOST Patients DO
NOT Adhere to
Medications or
Behavior Change***

Lessons Learned from Chronic Medical Illnesses

Repeating Acute Care
Episodes
IS NOT
a Continuing Care
Strategy

*Lessons Learned
from Addiction Treatment*

**Symptom
Improvement
Does Not Continue
Without Behavioral
Change!**

Predictors of Relapse

*Predictive factors:
Different for
different illnesses?*

Predictors of Relapse

Top 4 Predictors of Relapse

1. Lack of Adherence to Treatment

2. Psychiatric Co-Morbidity

3. Poverty

4. Low Family Supports

Which Illnesses?

Sources: Natl Ctr Health Stats; Harrison, 13th Ed.; 30+ studies

Research on Heritability

Do genetics play a role in
alcoholism and drug
addiction?

Heritability Estimates; Twin Studies

If genetics plays an important role, then:
Identical twins will be more likely to have
Problem X, Trait Y,
matching white
peter-pan collars...
than fraternal twins



Heritability Estimates

Twin Studies

Eye Color 1.00

ASTHMA (adult only) .35 - .70

DIABETES (insulin dep) .70 - .95 (males)

HYPERTENSION .25 - .50 (males)

ALCOHOL (dependence) .55 - .65 (males)

OPIATE (dependence) .35 - .50 (males)

Heritability Estimates: Adoption Studies

If genetics plays an important role, then: Genetically related individuals raised in different environments will show similarities in drug use behaviors



©1972 The Estate of Diane Arbus

Role of Inheritance

Adoption studies show Children of alcoholic parents are likely to become alcoholic even when raised by non-alcoholics.

Nature vs. Nurture



Addiction as a Chronic Medical Illness?

Implications for Treatment

Re-Considering Addiction Treatment

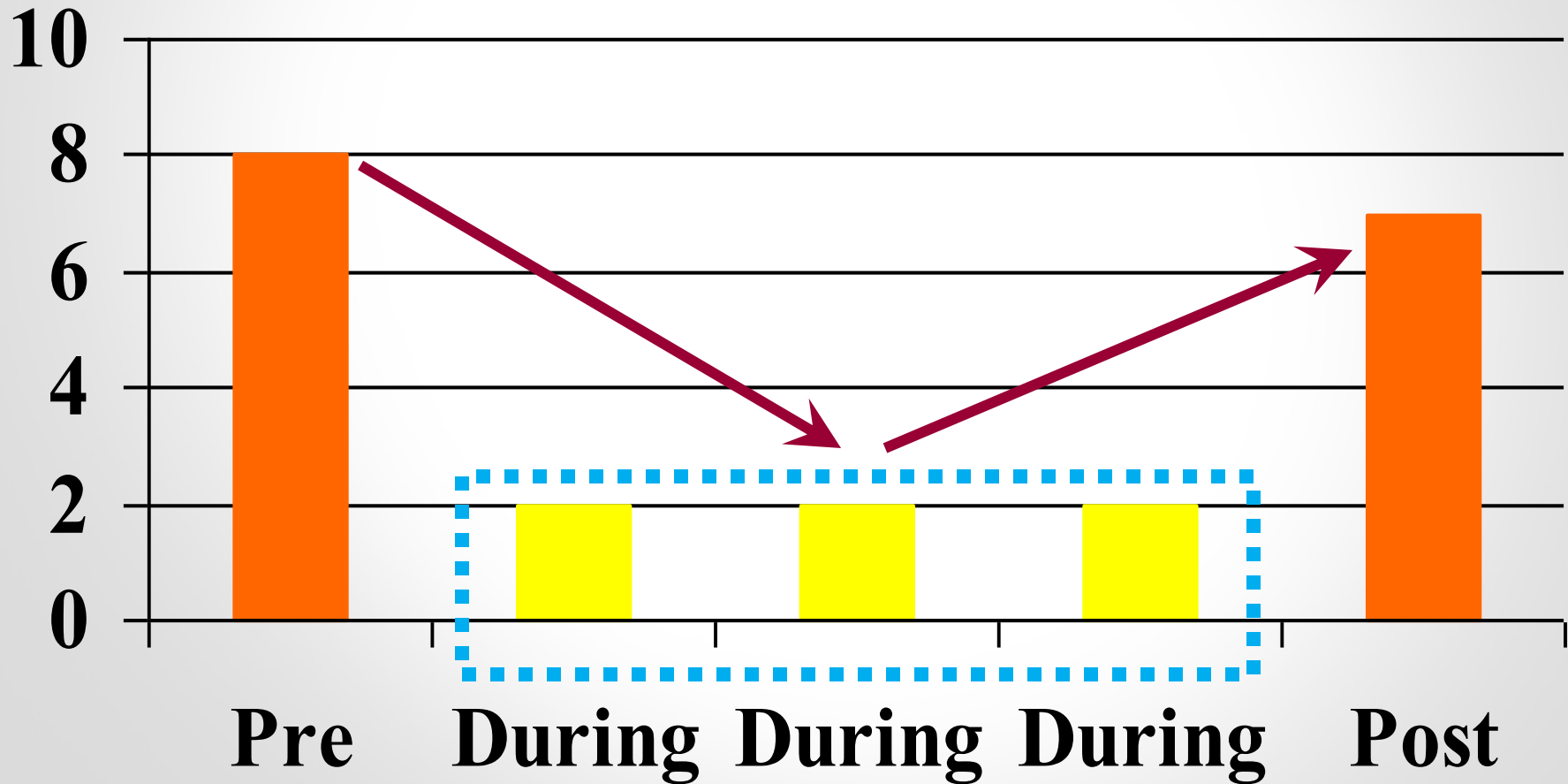
Have We Been
Thinking Correctly?

Measuring Effectiveness of Treatment in Chronic Illness

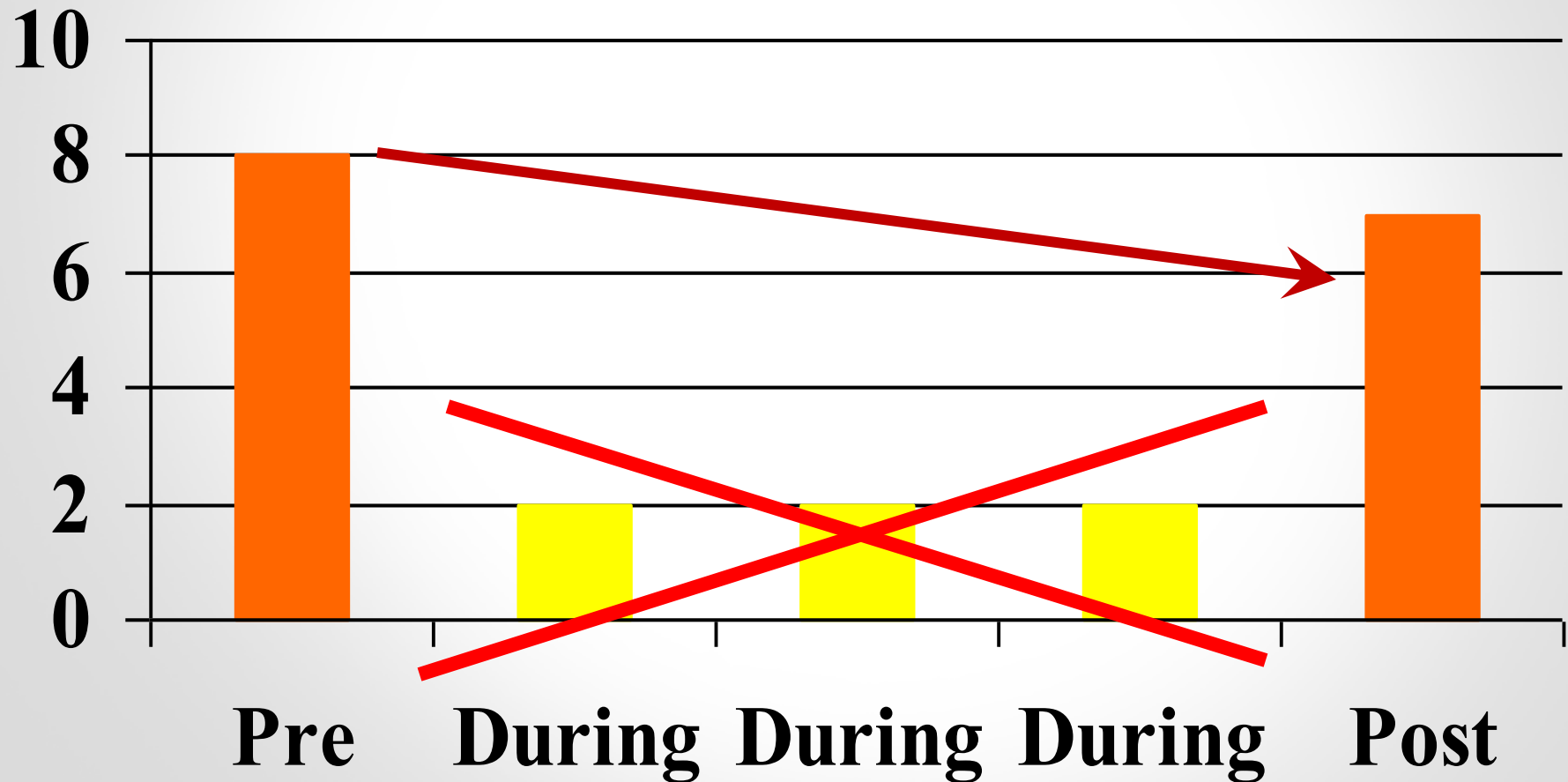
Evidence of Success

Retention in treatment
Reductions in symptoms DURING
treatment
Move to lower intensity treatment
Improved functional status

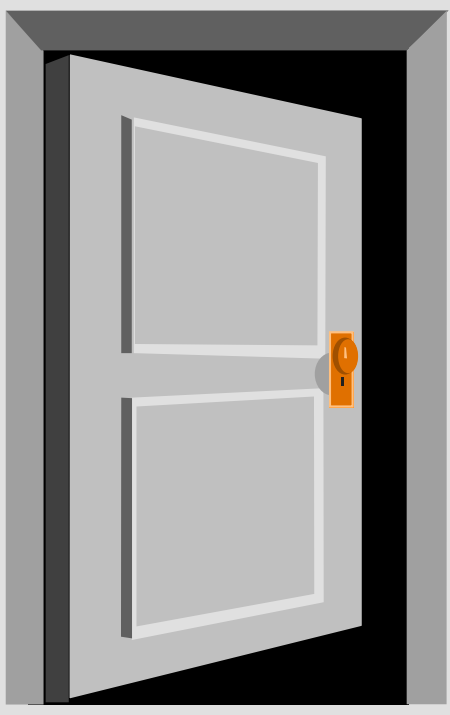
Outcome In Hypertension



Outcome In Addiction



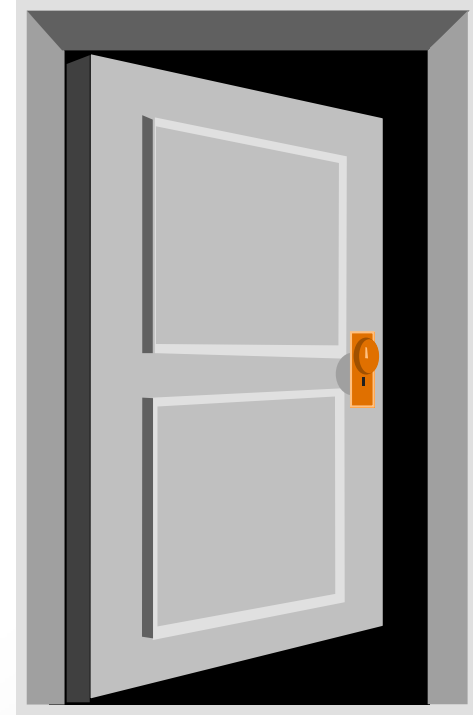
A New Treatment Model



Detox



Rehab



Continuing Care

A Comprehensive Care Model

Detox
If Needed

```
graph TD; A[Detox If Needed] --> B[Treatment - IP/Residential If Needed]; B --> C[Treatment: PHP/IOP/Outpatient]; C --> D[Continuing Care Recovery Management];
```

Treatment - IP/Residential
If Needed

Treatment: PHP/IOP/Outpatient

Continuing Care
Recovery Management

The Staged Model of Care

- Different Goals for each stage
- Different Components or Services in each stage
- Move to next stage (or back) depends on the success in the prior stage

Inside the Detox box:

Detox



Duration
Determined by
Performance
Criteria

Detox: Goals

Safe Detox

Physical/Emotional Stabilization

Promote Recognition of Problem

Engage In Next

Level of Care

A Note on Detoxification Alone

The effectiveness of
detox alone is best
measured... *in hours*

Detoxification

Alone

Detox Alone.....

It may not be
effective...

*...but at least
it's expensive.*

Continuing Care / Recovery Management

Goals:

Monitor & Support Abstinence

Intervene Prior to Relapse

Encourage Self-Monitoring

Continuing Care Recovery Management

Individuals
maintaining sobriety
between months 1 – 3

Are 395% more likely
to be sober at 12
months



Best Predictor of

Getting Sober

TREATMENT

Best Predictor of

Maintaining Sobriety

PARTICIPATION IN
SUPPORT GROUPS

*The Most
Important
Points -*

*This disease
kills people.*

*That you are
here...*

*That you are
committed to
this field...*

*Is Incredibly
Important*

*There are people
out there*

*who will never get
sober*

*without people like
you.*

So —

Don't Give Up-

They Need You

We Need You

Thank You!

Questions?