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Webinar

Working collaboratively to manage comorbid mental health and methamphetamine use

Thursday, 4th August 2016

“Working together. Working better.”

Supported by The Royal Australian College of General Practitioners, the Australian Psychological Society,
the Australian College of Mental Health Nurses and The Royal Australian and New Zealand College of Psychiatrists

NSW Ministry of Health



This webinar has been made possible through funding provided by
NSW Ministry of Health.

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<http://www.health.nsw.gov.au/about/ministry/pages/default.aspx>

This webinar is presented by



Tonight's panel



Associate Professor
Adrian Dunlop



Dr Grant Sara
Psychiatrist



Dr Hester Wilson
General Practitioner



Professor Amanda Baker
Clinical Psychologist

Facilitator



Dr Catherine Boland
Psychologist

Ground Rules



To help ensure everyone has the opportunity to gain the most from the live webinar, we ask that all participants consider the following ground rules:

- Be **respectful** of other participants and panellists. Behave as if this were a face-to-face activity.
- Post your **comments and questions** for panellists in the '**general chat**' box. For help with **technical issues**, post in the '**technical help**' chat box. Be mindful that comments posted in the chat boxes can be seen by all participants and panellists. Please keep all comments on topic.
- If you would like to **hide the chat**, click the **small down-arrow** at the top of the chat box.
- Your feedback is important. Please **complete the short exit survey** which will appear as a pop up when you exit the webinar.
- Be mindful of **self-care** if you are dealing with any of the issues raised tonight.

Learning Outcomes



Through an exploration of comorbid mental health and methamphetamine use, the webinar will provide participants with the opportunity to:

- Recognise clinical effects and harms related to methamphetamine use and co-morbid mental health
- Increase skills and understanding of managing methamphetamine users and improve awareness of evidence based interventions
- Identify strategies to engage specialist services when treating someone using methamphetamine

Addiction Medicine Specialist



Methamphetamine intoxication

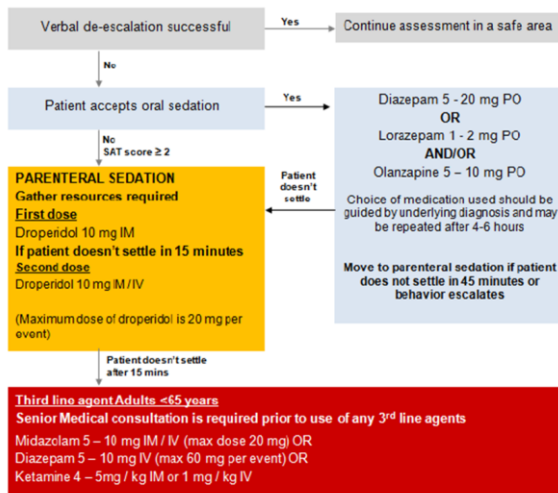
Andrew in the ED - clinical effects:

- Increased energy > can't sit still, pacing
- Elevated pulse, BP, temperature, respirations
- Sweaty, dilated pupils
- Mental state – abnormal – social withdrawal?
 - Anxiety/agitation/paranoia, delusions/magical thinking/psychosis
 - Related effects
 - Repeated checking, weapons?



Associate Professor
Adrian Dunlop

5.1.1 Adult (under 65 years or no diagnosis of organic cognitive impairment) sedation algorithm for patients with acute severe behavioural disturbance in the emergency department



http://www0.health.nsw.gov.au/policies/gi/2015/pdf/GL2015_007.pdf



Associate Professor Adrian Dunlop

Addiction Medicine Specialist

Medical complications - methamphetamine

Common

- Injury – intoxication
- HCV, HBV exposure if injecting
- STIs

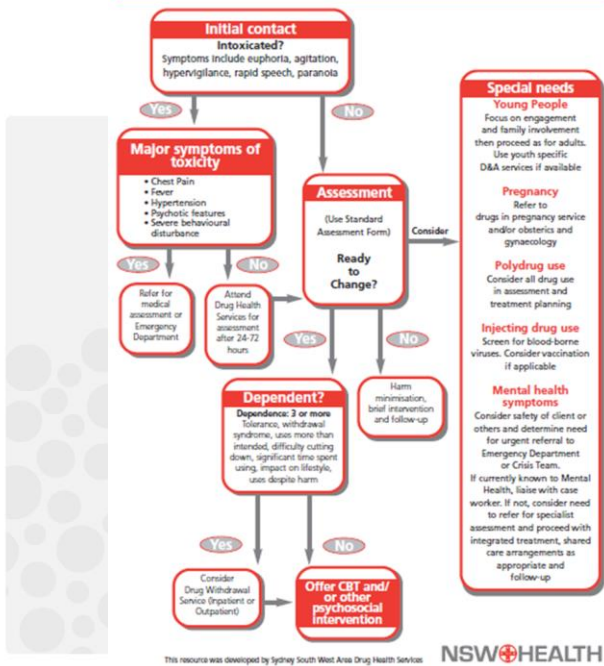
Less common but possible

- Cardiovascular
 - palpitations, sinus tachycardia, hypertension, arrhythmias - atrial and ventricular fibrillation, ischemia and infarction, cardiomyopathy, vasculitis, disseminated intravascular coagulation
- Brain
 - sub-arachnoid and cerebral haemorrhages, vasculitis - stroke, seizures: generalised tonic-clonic, risk Parkinson's
- Hyperthermia
 - dehydration, seizures, rhabdomyolysis (muscle breakdown), renal failure
- Gastro-intestinal
 - GI haemorrhage, hepatic necrosis



Associate Professor Adrian Dunlop

Flowchart for Assessment and Management of Psychostimulant Users



Associate Professor
Adrian Dunlop

Addiction Medicine Specialist



Who else needs to be involved in care?

- Mental Health
 - Assessment and management of psychosis/other acute severe mental health problems
- Drug and Alcohol aftercare
 - Engagement in treatment
 - Low intensity: counselling
 - Higher intensity: day care/residential treatment & after care
- Addressing related social problems:
 - Housing, relationships, family, parenting, legal etc...
- DASAS (health professionals support)
 - 1800 023 687

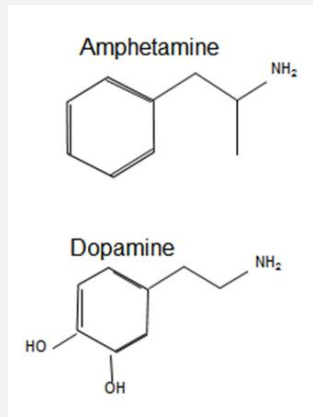


Associate Professor
Adrian Dunlop

Psychiatrist

Amphetamines trigger acute psychotic symptoms

- Experimental challenge
- High rates in recreational users
- Dose effect
- Effect on Dopamine systems?



Dr Grant Sara

Psychiatrist

“Drug induced psychosis”

- Poor reliability and validity as a diagnosis
- High proportion go on to other disorders

NSW data: 7,155 people admitted with brief, atypical or drug-induced psychosis

46% had later diagnoses of Schizophrenia

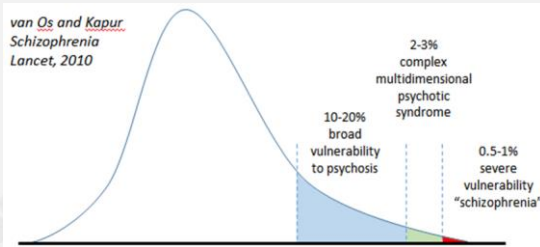
- Vital to understand the individual’s broader risk factors



Dr Grant Sara

Psychiatrist

Psychoses are developmental disorders



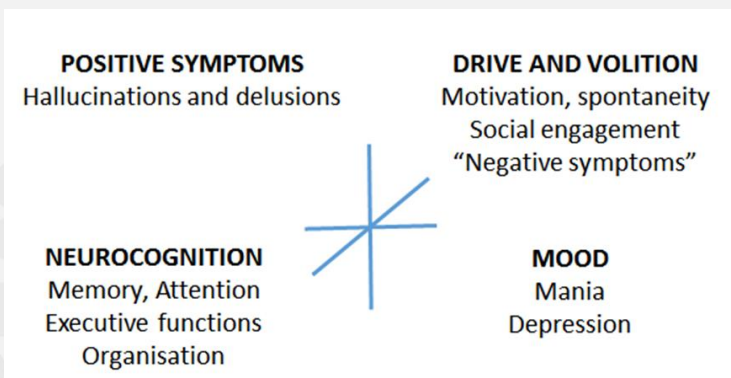
- Developmental risk factors: genetics / family history
- Early brain injury: in utero illness, early childhood trauma
- Learning, sensory and motor problems
- Brain changes in adolescence
- Substances



Dr Grant Sara

Psychiatrist

Psychoses have many dimensions



Dr Grant Sara

Psychiatrist

Andrew

- Needs careful assessment
 - Symptoms of psychosis (CAARMS)
 - Risk factors: family, developmental
 - Other symptom dimensions
- Corroborative history: Amy, parents
- Reasons for recent decline
 - Drug effects
 - Depression / anxiety
 - At risk state
- Strengths, supports, usual strategies for coping
- **Positive prognosis should not lead to benign neglect**
- Substances (amphetamines, cannabis) are risk factors which can still be influenced



Dr Grant Sara

General Practitioner

Who is using methamphetamines?

- More likely to be employed
- Don't see themselves as coming to harm
- May not use often
- Don't access traditional AOD services
- Prefer self treatment
- Don't see that they need help
 - 50% classified as methamphetamine-dependent;
 - 46% using methamphetamine >weekly;
 - 50% primarily injected methamphetamine;
 - 62% experienced methamphetamine-related financial problems last 6 months;



Dr Hester Wilson

Quin 2012

General Practitioner

GPs are seeing people who use 'Ice'

In study of 200 psychostimulant users

- Many patients identified problems with dependent use as prompt to seek help
- Many reported high levels of satisfaction with treatment received from a general practitioner
 - Drug use, often not presenting issue,
 - psychological problems
 - physical health problems
 - dependence
 - financial problems



Dr Hester Wilson

Hando, J., Topp, L. and Hall, W. (1997). Amphetamine-related harms and treatment preferences of regular amphetamine users in Sydney, Australia. *Drug and Alcohol Dependence*, 46, 105-113.

Vincent, N., Shoobridge, J., Ask, A., Allsop, S. and Ali, R. (1999). Characteristics of amphetamine users seeking information, help and treatment in Adelaide, South Australia. *Drug and Alcohol Review*, 18, 63-73.

General Practitioner

How do people present in General Practice?

- Poor nutrition
- Skin problems (ulcers, infections, facial sores)
- Engaging in high-risk behaviours (injecting, unsafe sexual activity, binge drinking, drug driving etc)
- Blood borne viruses (BBVs) and sexually transmitted diseases (STDs)

- Psychosis, paranoia, misperceptions
- Depression, anxiety, panic reactions, sleep disorders

- Cardiovascular complications
- Cerebrovascular complications
- Serotonin toxicity

- Family and relationship problems
- Financial difficulties
- Work and study effects
- Accidents
- Violent incidents



Dr Hester Wilson

General Practitioner

Motivational interviewing and BI

The 5 As

- **Ask**, permission, Ask directly, normalise
- **Assess**, mode and level of use, toxicity, dependence, problematic use
- **Advise/agree**, give information, brief advice
- **Assist**, develop management plan, self monitoring, ? medications
- **Arrange**, follow up, relapse prevention, referral

- SNAP-D
- Do need drug specific info
- Stages of change
- Motivational techniques



General Practitioner

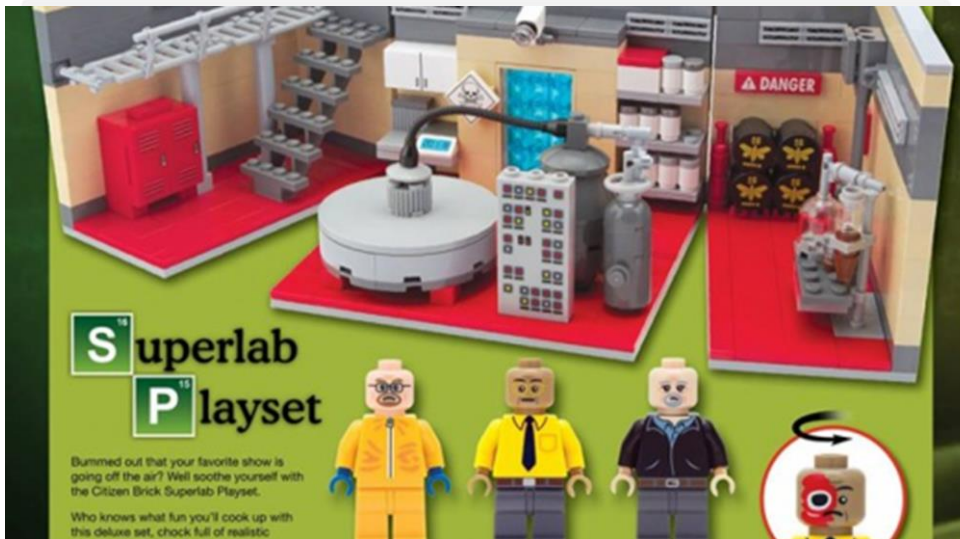
The GP role

- Early intervention
- Locus of care
- Working with specialist services
- Aftercare



Dr Hester Wilson

General Practitioner



Clinical Psychologist



Methamphetamine users as people



Professor
Amanda Baker

Clinical Psychologist

Effective responses

(Degenhardt et al., 2013)

- Counselling interventions are effective
- Needle & syringe programs
- HIV antiretroviral therapy



Professor
Amanda Baker

Clinical Psychologist

People who use MA

Addiction, 2005, 100, 367-378.

RESEARCH REPORT

Brief cognitive behavioural interventions for regular amphetamine users: a step in the right direction

Amanda Baker¹, Nicole K. Lee², Melissa Claire¹, Terry J. Lewin¹, Tanya Grant³, Sonja Pohlman², John B. Saunders⁴, Frances Kay-Lambkin¹, Paul Constable¹, Linda Jenner¹ & Vaughan J. Carr¹

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ABSTRACT

Aims The present study sought to replicate and extend a small pilot study conducted by Baker, Boggs & Lewin (2001) which demonstrated that brief interventions consisting of motivational interviewing and cognitive-behaviour therapy (CBT) were feasible and associated with better outcomes compared with a control condition.

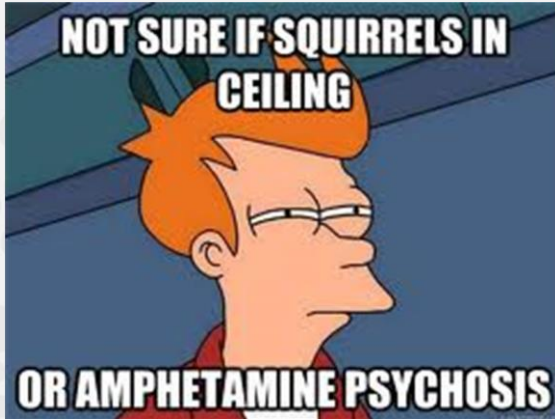
Design Randomized controlled trial (RCT).



Professor
Amanda Baker

Clinical Psychologist

Distress associated with psychosis



Professor
Amanda Baker

Clinical Psychologist

Empathic and optimistic counsellors

- Empathic
- Compassionate
- Respectful
- Optimistic



Professor
Amanda Baker

Clinical Psychologist

Brief MI/CBT is effective for MA

- Even 1-2 sessions
- MA use



Professor
Amanda Baker

Clinical Psychologist

More sessions improve mental health outcome

- Depression
- Overall psychiatric severity



Professor
Amanda Baker

Baker et al 2005; Polcin et al 2014

Clinical Psychologist



Mutual aid groups



Professor
Amanda Baker



Q&A session

Thank you for your participation



- This webinar has been made possible through funding provided by NSW Ministry of Health.
- Please ensure you complete the exit survey before you log out (it will appear on your screen after the session closes). Certificates of attendance for this webinar will be issued within two weeks.
- Each participant will be sent a link to online resources associated with this webinar within one week.

Future webinar



- The Department of Veterans' Affairs has engaged MHPN to produce a series of six webinars focussed on supporting the mental health of veterans. The first webinar in the series, Understanding the military experience: from warrior to civilian will be held on Tuesday, 16th August 2016.

Register here: www.mhpnp.org.au

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**Thank you for your contribution and
participation**

Good evening