

# Co-occurring SUDs and PTSD

Substance Use Disorders-QUERI Update

May 2008

Many veterans in VA settings have PTSD, with estimates ranging from 25% to 45%. Rates of substance use disorders also are high. Among returning veterans from Iraq and Afghanistan who receive VA healthcare, up to 19% are diagnosed with substance use disorder. Moreover, SUDs and PTSD (post-traumatic stress disorder) co-occur for many veterans. For example, among VHA patients in FY06, over 20% of those with diagnosed PTSD also had SUD diagnoses other than nicotine dependence. Veterans with SUD and PTSD, compared to those with either disorder alone, have consistently worse treatment outcomes and more problems in a wide variety of domains, including psychological, physical, legal, social, and vocational.

However, many clinicians are not trained in evidence-based models for treating SUD and PTSD.

Clinicians often need special assistance in how to effectively engage this population, how to address barriers to care, and how to screen appropriately. There also is a need for more research on optimal training methods and dissemination strategies to help clinicians deliver high-quality care for veterans with co-occurring SUD and PTSD.

# **SUD-PTSD Work Group**

A solid body of evidence documents the importance of addressing SUDs and PTSD simultaneously, rather than older practice models in which the substance use disorder was targeted first. Clinicians in all types of programs can conduct simultaneous treatment of SUD and PTSD, which can enhance treatment outcomes and cost-effectiveness.

The SUD-PTSD Task Group (PSTG) of the Substance Use Disorders Quality Enhancement Research Initiative (SUD-QUERI) is working with clinical partners and scientists in the VA on multiple initiatives to promote effective care for this population. These initiatives include:

- Nationwide VA survey of key informants to identify treatment and systems-level needs to improve care for co-occurring SUDs and PTSD;
- Implementation study to enhance treatment retention and outcomes among male veterans with SUD and PTSD via an evidence-based model, and to evaluate two potential pathways (PTSD symptom reduction and acquisition of coping strategies);
- Training evaluation study to compare basic versus enhanced training in an evidence-based model for SUD-PTSD;
- Rapid-response project to develop web-based training of clinicians on evidence-based models for SUD and/ or PTSD;
- Rapid-response project to adapt the Seeking Safety model for SUD-PTSD for returning veterans from Iraq and Afghanistan;

 Creating a monthly VA-wide teleconference for researchers focused on SUD-PTSD to share knowledge and develop new projects.

In addition, general areas of interest for the SUD-PTSD Task Group include:

- Improving screening and assessment,
- Dissemination of effective treatments.
- Identifying systems issues that impact services,
- Training clinicians and program administrators,
- Making use of technology solutions to enhance practice, and
- Collaborating with other work groups and key stakeholders within VA who seek to improve the quality of care for veterans with SUD and PTSD.

Members of the SUD-PTSD Task Group include: Lisa Najavits, PhD (Task Group Leader); Sonia Batten, MD; Tom Berger, PhD; Amit Bernstein, PhD; Sandra Brown, PhD; Patrick Calhoun, PhD; Nancy Jo Dunn, PhD; Christopher Erbes, PhD; John Finney, PhD; Hildi Hagedorn, PhD (Implementation Research Coordinator); Thomas Horvath, MD; Rachel Kimerling, PhD; Daniel Kivlahan, PhD (Clinical Coordinator); Thomas Kosten, (Research Coordinator); Eric Kuhn, PhD; Sonya Norman, PhD; Paige Ouimette, PhD; Melissa Polusny, PhD; Craig Rosen, PhD; Josef Ruzek; PhD; Martha Schmitz, PhD; Karen Seal, MD; Tracy Simpson, PhD; Kristy Straits-Troster, PhD; Jodie Trafton, PhD; Robyn Walser, PhD; Christopher Weaver, PhD; and Ken Weingardt, PhD.

### **How Do I Learn More?**

If you are interested in learning more about PTSD or the work of the SUD-QUERI PTSD Task Group, contact:

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For general information about the SUD-QUERI, contact:

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#### **Web Resources**

For more information about the QUERI program in general, visit the national QUERI website at

www.hsrd.research.va.gov/research/queri

Access QUERI's "Guide for Implementing Evidence-Based Clinical Practice and Conducting Implementation Research,"

http://www.hsrd.research.va.gov/queri/ implementation/

#### **SUD-QUERI Executive Committee**

Each QUERI Executive Committee is co-chaired by a research expert and a clinician. The research coordinator for SUD-QUERI is **Thomas Kosten**, **MD**, and the clinical coordinator is **Daniel Kivlahan**, **PhD**. The Executive Committee includes other experts in the field of substance use disorders: John Allen, PhD; Paul Barnett, PhD; Thomas Berger, PhD; **Katharine Bradley**, **MD** (Co-Clinical Coordinator); Mr. Anthony Catapano; Geoff Curran, PhD; John Finney, PhD (Research Coordinator Emeritus); **Hildi Hagedorn**, **PhD** (Implementation Research Coordinator); Kim Hamlett-Berry, PhD; Kathy Henderson, MD; Keith Humphreys, PhD; Joseph Liberto, MD; Rudolf Moos, PhD; Jon Morgenstern, PhD; Lisa Najavits, PhD; Mark Shelhorse, MD; Scott Sherman, MD; and Mark Willenbring, MD.