

SUD-PTSD Workgroup

Substance Use Disorder QUERI

April 2012

Co-Occurring SUD and PTSD

Many Veterans in VA settings have PTSD (post-traumatic stress disorder), with estimates ranging from 25% to 45%. Among newly returning Veterans from Iraq and Afghanistan, 20% are diagnosed with post-traumatic stress disorder (PTSD). Rates of substance use disorders (SUDs) also are high, with estimates up to 19% (primarily alcohol, but also other substances). Moreover, 2008 data indicate that across all medical conditions of returning Veterans, mental health disorders are the second most common (40%), with both PTSD and SUD among the highest within this category. Yet many Veterans with diagnosable PTSD and SUD do not access VA care. In general, 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. Clinicians are not typically trained in evidence-based models for treating SUD and PTSD. They may 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.

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A solid body of evidence documents the importance of addressing substance use disorder (SUD) and PTSD (post-traumatic stress disorder) 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 Workgroup of the Substance Use Disorder Quality Enhancement Research Initiative (SUD-QUERI) is working with VA clinical partners and scientists on multiple initiatives to promote effective care for this population. These initiatives include:

- 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 adapt the Seeking Safety model for SUD-PTSD for returning Veterans from Iraq and Afghanistan;
- Rapid-response project to create an automated telephone screening for PTSD and SUD for community Veterans to encourage their use of VA care, if needed;
- Rapid-response project to develop a program-level assessment on

SUD-PTSD to evaluate the level of awareness of SUD-PTSD treatment principles; and

- 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 Workgroup 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 workgroups and key stakeholders within VA who seek to improve the quality of care for Veterans with SUD and PTSD.

How do I learn more?

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

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For general information about the SUD-QUERI, please contact:

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Web Resources

For more information about the QUERI program in general, and to link to the individual QUERI Centers, please go to

www.queri.research.va.gov

The SUD-QUERI Executive Committee

Each QUERI Executive Committee is co-chaired by a research expert and a clinician. The research expert and Director for SUD-QUERI is **Alex Sox-Harris, Ph.D.**; the Clinical Coordinator is **Elizabeth Gifford, Ph.D.**; and the Implementation Research Coordinator is **Hildi Hagedorn, Ph.D.** The Executive Committee includes other experts in the field of substance use disorders: Paul Barnett, Ph.D.; Thomas Berger, Ph.D.; Katharine Bradley, M.D.; Geoff Curran, Ph.D.; John Finney, Ph.D. (Research Coordinator Emeritus); Adam Gordon, M.D.; Kim Hamlett-Berry, Ph.D.; Daniel Kivlahan, Ph.D.; Thomas Kosten, M.D.; Lisa Najavits, Ph.D.; Dave Oslin, M.D.; Robert Rosenheck, M.D.; Mary Schohn, Ph.D.; Mark Shelhorse, M.D.; Ken Weingardt, Ph.D.