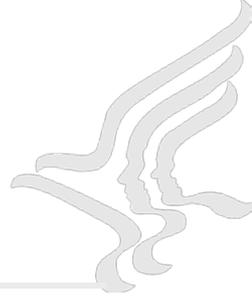


# Module 3: An Overview of Psychological and Biomedical Issues During Detoxification



**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
Substance Abuse and Mental Health Services Administration  
Center for Substance Abuse Treatment  
<http://www.samhsa.gov>

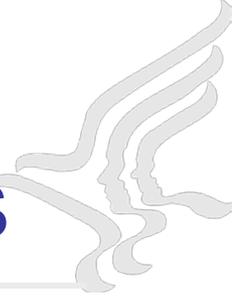
# Module 3 Objectives



- Identify overarching principles for patient care during detox
- Describe strategies for evaluating/addressing psychosocial/medical issues for detoxing patients
- Identify at least two considerations in each of the following for detoxing patients: adolescents, parents with dependent children, domestic violence victims, and culturally diverse patients
- Describe strategies for engaging/retaining detox patients
- Identify effective referral techniques promoting initiation of substance abuse treatment

# Biomedical Evaluation Domains

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- General health history
- Mental status
- Physical assessment
- Use and patterns of substance abuse
- Past treatments for substance abuse

# Psychosocial Evaluation Domains

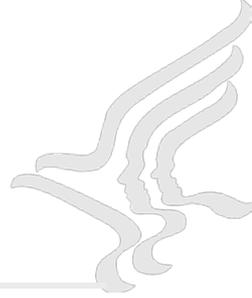


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- Demographics
- Living conditions
- Violence/suicide risk
- Transportation availability
- Financial situation
- Dependent children
- Legal status
- Physical, sensory, or cognitive abilities

# Conditions Requiring Immediate Medical Attention

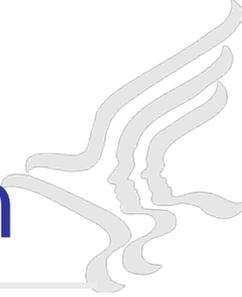
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- Change in mental status
- Increase in anxiety and panic
- Hallucinations
- High body temperature
- Increase/decrease in blood pressure
- Insomnia
- Abdominal pain
- Upper/lower gastrointestinal bleeding
- Changes in responsiveness of pupils

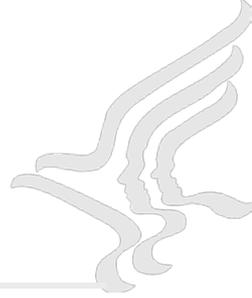
# Conditions Requiring Immediate Psychiatric Attention

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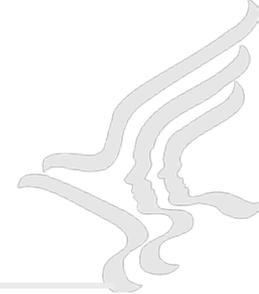
- Suicide risk
- Anger
- De-escalating aggressive behaviors
- Co-occurring mental disorders

# Nutritional Considerations During Detoxification



- Malnutrition can interfere with detox process
- Stress of detox requires additional nutrients
- Nutritional evaluation is necessary for detox
- New routines for mealtime and diet are crucial
- Important to manage gastrointestinal symptoms during detox
- Nutrition therapy may be required

# Detoxification Considerations for Adolescents



- Binge drinking is common
  - Can cause escalating blood alcohol levels
- Some drugs taken are not identifiable
  - Routinely screen for illicit drugs
- Nondisclosure of drug use
  - Multiple substances may have been taken with alcohol
  - Establish rapport
  - Obtain thorough substance use history
- Screen for suicide potential

# Detox Consideration for Parents with Dependent Children

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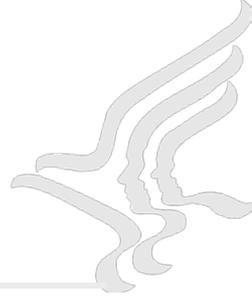


## Barriers to treatment:

- Parents, especially mothers, fear for the safety of their children
- Some children experience distress while parent is in treatment
- Ensure children have a safe place to stay
- Social services may need to be involved

# Detox Consideration for Domestic Violence Victims

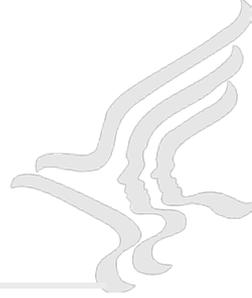
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- Both men and women may be victims
- Increased risk for female drug abusers to be victims
- Develop safety plan when violence is disclosed
- Avoid communications between abused and abuser during detox
- Victims may need help with parenting skills
- Know local childcare resources

# Detox Consideration for Culturally Diverse Patients

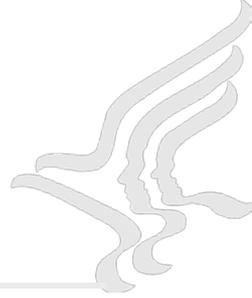
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- Patients' expectations of detox may vary
- Patients' experience in health care system may vary
- Patients cannot be defined by their culture/ethnicity
- Use open-ended questions to gain understanding
- Important to have bilingual staff to avoid language barriers

# Detox Consideration for Chronic Relapsers

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- Relapser may feel hopeless and vulnerable
- Acknowledge progress made before relapse
- Reassure that gains from prior progress have not been lost
- Reinforce the importance of recovery

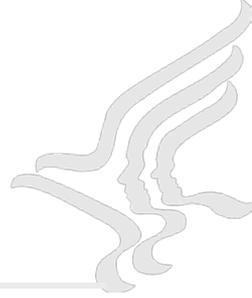
# Strategies to Engage and Retain Patients in Detoxification



- Offer hope
- Provide an atmosphere with comfort, relaxation, cleanliness, and security
- Educate patients on the withdrawal process
- Utilize support systems
- Maintain a drug-free environment
- Consider alternative approaches
- Enhance patient motivation
- Foster a therapeutic alliance

# Enhancing Patient Motivation

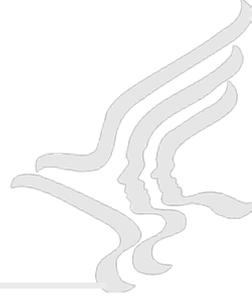
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- Focus on strengths
- Show respect for autonomy
- Avoid confrontation
- Provide individualized treatment
- Avoid using labels
- Use empathy
- Recognize small steps toward achieving goals
- Raise awareness of discrepancies
- Use reflective listening

# Stages of Change

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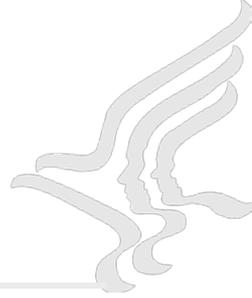
- Precontemplation
  - No consideration for change
  - Unaware of problem
- Contemplation
  - Some awareness of problem
  - Willing to consider change, but ambivalent
- Preparation
  - Aware of problem
  - Decision made to commit to change
  - Goal setting
- Action—takes steps to achieve goals to change
- Maintenance—works to maintain changes made

# Fostering a Therapeutic Alliance



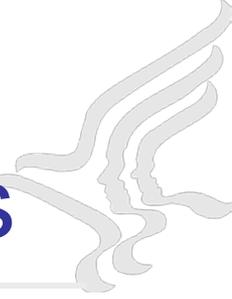
- Be supportive and empathic
- Refer when patient cannot be engaged
- Establish rapport with all patients
- Discuss confidentiality issues
- Be cognizant of patient challenges ahead
- Be consistent, trustworthy, reliable
- Be calm and cool
- Show confidence and humility
- Be able to set limits without a power struggle
- Be cognizant of patient's progress
- Encourage patient's self-expression

# Common Barriers to Referral After Detox



- Patients may believe they are “cured” once eliminating substance
- After detox patients may feel they no longer need help
- Insurance may only provide partial or no coverage
- Paperwork for insurance coverage may be overwhelming
- Patients have difficulty navigating the insurance system to determine coverage

# Evaluating Rehabilitation Needs

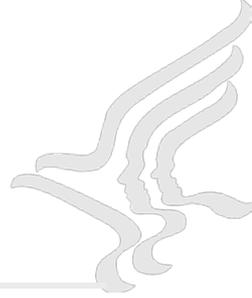


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- Psychosocial needs
- Special needs may limit access to rehab
- Limitations or conditions may limit suitable treatment settings
- Support system may influence referral
- Dependent children may impact needs
- May be need for gender-specific treatment

# Areas for Assessment

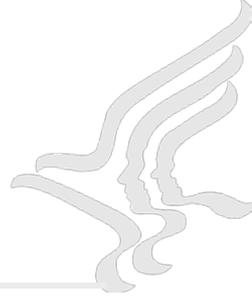
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1. Medical conditions and complications
2. Motivation/readiness to change
3. Physical, sensory, or mobility limitations
4. Relapse history and potential
5. Substance abuse/dependence
6. Developmental and cognitive issues
7. Family and social support
8. Co-occurring disorders
9. Dependent children
10. Trauma and violence
11. Treatment history
12. Cultural background
13. Strengths and resources
14. Language

# Treatment Settings

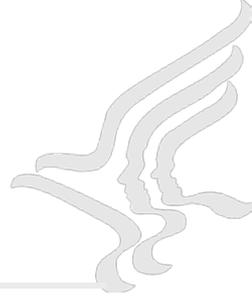
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1. Inpatient programs
2. Residential treatment programs
3. Therapeutic communities
4. Transitional residential and halfway houses
5. Partial hospital and day treatment programs
6. Intensive outpatient programs
7. Traditional outpatient services
8. Recovery maintenance activities

# Following Through with Treatment Referral

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Patients will more likely initiate treatment if they:

- Believe they will be helped
- Are employed
- Are motivated beyond precontemplation stage
- Have family and social support
- Have co-occurring psychiatric conditions

# Strategies to Promote Initiation of Treatment After Detox



- Assess degree of urgency
- Reduce wait time to appointment
- Call to reschedule missed appointments
- Provide information to show expectations
- Offer tangible incentives
- Engage the support of family members
- Introduce the patient to the counselor who will deliver rehabilitation services
- Offer services and referrals to address other needed services
- Minimize access to treatment barriers
- Maintain motivation during waiting list period
- Facilitate coordination of treatment for any co-occurring disorders
- Ensure all necessary medical appointments are being made
- Some patients may require something other than a traditional treatment approach