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GERONTOLOGICAL
SOCIETY

FREE WEBINAR
January 19, 2022
12:00 - 1:30 pm

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questions during
the webinar

**Gray Matters: Understanding
Substance Abuse Disorders in
Older Adults**

**Kay King, Older Adults Program Coordinator, NAMI/MN
(the National Alliance on Mental Illness of
Minnesota)**

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MINNESOTA

Gray Matters

**Understanding Substance Use
Disorders in Older Adults**

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Welcome

Kay King, Community Educator

kking@namimn.org

NAMI Minnesota

1919 University Ave West, Suite 400

St. Paul, MN 55104

651-645-2948

1-888-NAMI-HELPS

www.namimn.org

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Presentation Objectives

- Learn why abuse of alcohol, drugs and prescription medications, among adults 60 and older, is one of the fastest growing health problems in the U.S.
- Recognize the negative consequences of improper use or over-use of alcohol, drugs, prescription medications and over-the-counter medications



Presentation Objectives Continued

- Be able to identify three or more age-related changes that could elevate an older adult's sensitivity to the effects of drugs and alcohol; and that make older adults more at risk for substance use problems
- Be able to identify three or more resources to learn more about older adults and substance abuse

How We Visualize Substance Use Disorder

- Close your eyes
- Picture a person using heroin, smoking pot or intoxicated and passed out
- **Who** do you see?
- **What** is their age, gender, race?
- **Where** are they?



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Positive Images

- Every age, race, ethnicity, gender and occupation
- Sir Anthony Hopkins 1937 -
- Eric Clapton 1945 -
- First Lady Betty Ford 1918 - 2011
- Texas Governor Ann Richards 1933 - 2006
- Sir Elton John 1947 -
- Cindy McCain 1954 -
- Former WCCO News Anchor Don Shelby 1947 -
- Governor Mark Dayton 1947 -



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What Are Substance Use Disorders?

- Dependence
- Abuse that leads to problems at home or work
- Abuse that causes damage to health



Aging and Substances

- Older adults tend to take more medications as they age
- Aging bodies respond differently to alcohol, other substances and medication than when the person was younger
- Many medications do not mix well with alcohol

Aging and Substances

- Medication and alcohol misuse can happen unintentionally
- Older adults who do not have a history of substance abuse problems may not understand their new vulnerabilities
- Substance abuse can be a contributing cause of memory loss

Why Concern for Substance Abuse in Older Adults?

- Demographics
- Elevated risk factors brought about by:
 - Age-related health changes
 - Psychosocial changes
 - Double stigma of both mental illness and aging

Why Concern for Substance Abuse in Older Adults?

- Unaddressed problems:
 - Worsen other health conditions
 - Contribute to high health care costs
 - Elevate the risk for premature or unnecessary hospitalizations and nursing home admissions
 - Premature deaths

Why Concern for Substance Abuse in Older Adults?

- Misuse of alcohol, meds and drugs can cause falls, confusion and delirium. Those conditions, in turn, are associated with a high rate of emergency hospitalizations and mortality

Why Concern for Substance Abuse in Older Adults?

- Highest users of over-the-counter (OTC) and prescription medications
- More than 25% use prescription psychoactive meds that have abuse potential
- Substance use problems are greatly under-identified and undertreated in older adults



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Why Concern for Substance Abuse in Older Adults?

- Fewer than 40% of older adults with substance use disorders get treatment
- Risk factor for developing other mental illnesses
- Risk factor for suicide



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Risk Factors Substance Use Disorders in Older Adults

- Social and physical changes
- Loss of loved ones, juggling multiple roles, retirement, loss of professional identity, changes in income
- History of using alcohol or drugs to cope
- Slower metabolism
- Use of medications for age-related health conditions and drug interactions

Risk Factors Substance Abuse in Older Adults

- Boomers' history of illicit drug use and their relatively tolerant attitudes toward it
- Availability in society
- Social factors
- Other mental illnesses
- Genetic predisposition

Age-related Changes Intensify the Impact of Substance Use

- Slowing of metabolism
- Changes in absorption and excretion
- Changes in ratio of muscle and fat tissue
- Reduced water in cells and body tissue
- Changes in vision, balance and coordination

Age-related Changes Intensify the Impact of Substance Use

- Illness or chronic conditions
- Use of medications: prescription, over-the-counter, herbal remedies and supplements
- Some older adults continue abusive habits formed earlier in life without the restraint of a daily job, structured time or social system
- No significant others to notice or assist in motivating the partner/friend to seek help



Common Substances

- Alcohol
- Marijuana
- Tobacco
- Heroin and other opioids
- Fentanyl
- Cocaine
- Sedatives and Tranquilizers
- Amphetamines



Common Substances

- Hallucinogens
- “Bath Salts”
- Inhalants
- Methamphetamines

Possible Signs of a Substance Use Problem

- Memory trouble after a drink or taking medicine
- Loss of coordination e.g., walking unsteadily, frequent falls
- Changes in sleeping or eating habits
- Unexplained bruises
- Irritability, sadness, depression

Possible Signs of a Substance Use Problem

- Trouble concentrating or finishing sentences
- Lack of interest in usual activities
- Isolation
- Failing to bathe or keep clean
- Difficulty staying in touch with family and friends

Alcohol and Older Adults

- Most common of substance abuse problems among older adults
- About 40% of adults ages 65 and older drink alcohol
- About 14% of men and 3% of women over age 65 binge drink
- Cultural differences

Alcohol Use

- **Low-risk use** – doesn't cause any problems. It reflects the person's ability to set limits and use good judgment. These older adults do not binge drink, drive vehicles or use contraindicated medications when they drink. They could "take-it-or-leave-it"



Alcohol Use

- **At-risk use** – is alcohol use in a way that increases chances of problems. Older adults might drink more than the recommended amounts and drink in situations or under circumstances that aren't safe (e.g. drinking despite warning labels on medications)



Alcohol Use

- **Problem use** – Using alcohol despite already adverse consequences. Older adults in this category drink alcohol even though their drinking has already caused medical, social, family, work, criminal or mental health problems. In addition, the drinker may deny any problem with alcohol

Risks Associated with Late-life Drinking

- Metabolic changes result in elevated blood alcohol levels for longer periods of time
- Effects of alcohol are experienced with even small volumes
- Alcohol can cause sleep disorders
- Mixing alcohol and medications can be extremely dangerous

Risks Associated with Late-life Drinking

- Alcohol can worsen diabetes, high blood pressure, memory loss, pain, osteoporosis, mood disorders (e.g., depression, bipolar disorder)
- Increases risk for suicide

Alcohol Use

- SAMHSA and NIAAA recommend that adults aged 60 and older, have no more than seven drinks per week or one standard drink per day to minimize risky or problem drinking
- In August 2018 - large new global study published in the *Lancet* has confirmed previous research which has shown that there is no safe level of alcohol consumption for any age

No Alcohol Use

- If taking certain prescription medications, especially psychoactive prescription medications and certain over-the counter (OTC) medications
- If you have medical conditions that can be made worse by alcohol: diabetes, heart disease, dementia, bipolar disorder, depression, anxiety disorders, etc.



No Alcohol Use

- If planning to drive a car or engage in activities requiring alertness, skill and balance
- If recovering from alcohol dependence



Older Adults vs Adults

- More willing to accept a medical diagnosis than a psychiatric one
- May genuinely think their problems and symptoms are simply related to old age and are reluctant to complain too much
- May not accept that alcohol or other drug-related disorders are diseases (mental illnesses)
- Compared with younger adults, older adults are more likely to complete treatment and have similar or better outcomes

What is a Baby Boomer?

- Born between 1946 – 1964 so today they are ages 58 - 76
- 75 million born in the U.S. between 1946 – 1964
- Every day 10,000 people are turning 65
- Baby boomers control over 80% of personal financial assets in the U.S. and account for over 50% of consumer spending



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Baby Boomers and Substance Abuse

- Boomers more likely than Pre-Boomers to use illicit drugs
- Cultural: Boomers are from an era when illicit drugs were widely available and had a certain allure



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Baby Boomers and Substance Abuse

- Emotional: Aging Boomers may turn to substances to cope with grief and loss such as death of spouse/partner or the end of a career
- Physical: Boomers perhaps functioned okay for many years despite substance abuse. Now bodies are aging, and they can no longer tolerate the physical and mental effects



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Baby Boomers and Substance Abuse

- Economic: Possible increased use because of heightened anxiety from COVID (early retirements), inflation and inadequate retirement savings



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Why Difficult to Diagnose Substance Abuse in Older Adults?

- Ageism, lack of awareness, medical professional lack of training and comorbidity
- Signs of substance abuse may mirror symptoms of physical and mental health conditions that affect older adults

Diagnostic Barriers

- Many assessment instruments used to diagnose substance abuse are designed for younger people
- Older adults can be less engaged in community when they retire; or when children move out (or live away) or a partner dies, so it's harder to see day-to-day functioning of the older adult



Diagnostic Barriers

- Even if substance abuse is suspected, convincing an older adult they have a problem and need treatment can be difficult. Such users may believe they deserve to use substances because of the years they've put in at work or raising a family



Diagnostic Barriers

- Because of stereotypes, medical professionals less likely to detect alcohol problems in women, the educated and those with higher socioeconomic status
- Problems related to alcohol and drugs compete for discussion time against other health problems of older adults during a medical appointment

Diagnostic Barriers

- Medical providers may believe people with alcohol dependence must be heavy drinkers and may miss the opportunity to intervene with an older adult because the provider's definition of problem drinking is based upon criteria that don't apply to older adults

Diagnostic Barriers

- Relatives of older adults may have an assumption that it's not worth treating older adults for substance abuse problems or it does not inspire the same urgency for care as a problem in younger adults (ageism)
- Assumption (perhaps unstated) – it's a waste of health care resources



Diagnostic Barriers

- Even if a diagnosis of substance abuse is made, an older patient is less likely to have treatment recommended
- Disapproval and shame about use and misuse of substances in the pre-boomer group



Substance Use Drug Facts

- 2019 NIH executive summary on older adults includes opioid pain medication, marijuana, nicotine vaping, prescription medication and alcohol
- <https://www.drugabuse.gov/publications/substance-use-in-older-adults-drugfacts>



Behavioral Treatment Strategies

- Teach strategies to function without drugs
- Deal with cravings
- Avoid drugs and situations that could lead to drug use
- Plan for a relapse and learn strategies to handle a relapse should it occur



Behavioral Treatments

- Individual counseling
- Group or family counseling
- Cognitive behavioral therapy (CBT)
- Contingency management



Pharmacological Treatment

- Some addictions (e.g., opioid) can be treated with medications
- The medications can be used to relieve withdrawal symptoms, help overcome drug cravings or treat an overdose
- Research shows that a combined approach of behavioral and pharmacological treatment may be best



Withdrawal Older Adults

- Detoxifying process is longer and could be more dangerous
- Prescription medications complicate withdrawal
- Likely used substances more years than those younger
- Concurrent health problems

Substance Abuse: What Can Help?

- Primary care physicians/providers screen older adults for substance abuse and arranging a referral to specialty care if needed
- Psycho-education to advise patients on the health effects of substance abuse
- Education and support for family and caregivers

Substance Abuse: What Can Help?

- Share your concerns with a friend, family member or spiritual advisor
- Provide transportation
- Get treatment: older adults respond at least as well as younger ones to substance abuse therapies
- Don't drink alcohol if you are taking medication for sleeping, pain, anxiety or depression

Substance Abuse: What Can Help?

- Withdrawal management
- Talk therapy
- Alcoholics Anonymous (AA) and Narcotics Anonymous (NA)
- Harm reduction -The San Marco Apartments Duluth. Documentary *No Losers* about their harm reduction program
<http://www.centercityhousing.org/housing/san-marco-apartments/>
- Consult with a geriatric-trained professional



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Substance Abuse: What Can Help?

- Create opportunities for substance free social events
- Scholarships if insurance doesn't cover
- Help clients/family build a sober network
- Provide referrals for grief/loss groups
- Teach relaxation, breathing, mindfulness and other stress management strategies
- Refer family to groups like Al-Anon



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Substance Abuse: What Can Help?

- Assessment, treatment and recovery should be tailored to the unique issues of each older adult
- Provider help in building relationships – sober network
- Age-specific group therapy
- Create opportunities for chemical free social interactions
- People are NEVER too old to recover and have a better quality of life



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Statistical Info from National Survey

- SAMSHA published the *National Survey on Drug Use and Health* in October 2021
- Data is about key substance use and mental health indicators in the U.S.
- Survey statistics are from 2020 and include some COVID questions
- Any older adult figures are for adults 50+
- It's 156 pages but has an executive summary



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Substance Use Disorders From the 2020 Survey

- Among people aged 12 or older in 2020, 58.7 percent (or 162.5 million people) used tobacco, alcohol, or an illicit drug in the past month (also defined as “current use”) **including**
- 50.0 percent (or 138.5 million people) who drank alcohol
- 18.7 percent (or 51.7 million people) who used a tobacco product
- 13.5 percent (or 37.3 million people) who used an illicit drug



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Integrated Dual Diagnosis Treatment (IDDT)

- Counseling techniques for people managing both mental illness and substance use (co-occurring disorders)
- Provided by trained professionals schooled in both disorders
- Evidenced-based practice
- Check providers in your health plan



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Mental Illness: What Can Help?

- Stable housing
- Healthy diet
- Stress reduction
- Exercise
- Affirming relationships
- Activities you enjoy
- Pets
- Sleep

Mental Illness: What Can Help?

- Spiritual connection
- Psychosocial rehabilitation (e.g., ACT teams, ARMHS worker)
- Self-management strategies
- Geriatric psychiatrist; care team including a pharmacist
- Support groups

Strategies for Working with People Managing Both Disorders

- Educate yourself and families you work with
- Build teams so care partners and families aren't isolated
- Help people and their families develop crisis plans
- Encourage health care directives



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Mental Illness Resources

- In-patient and out-patient senior mental health units (not complete) like Fairview Riverside Hospital, Meeker Memorial Hospital Litchfield and CentraCare Monticello
- MN Department of Human Services (DHS)
- National Institute of Mental Health
www.nimh.nih.gov



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Mental Illness Resources

- Senior LinkAge Line: (800) 333-2433
www.minnesotahelp.info
- www.schizophrenia.com
- Adult Foster Care
- NAMI's free Family-to-Family or Hope for Recovery classes
- Ombudsmen for Long-Term Care (LTC) or Ombudsmen for MI/DD



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Mental Illness Resources

- Veterans Administration (VA) in Minneapolis and St. Cloud and clinics statewide
- Adult Daycare
- Jewish Family Service of St. Paul and Jewish Family and Children's Service of Minneapolis
- People Incorporated – Stark Mental Health Clinic - Minneapolis
- Wilder Senior Services – St. Paul



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Mental Illness Resources

- Community Mental Health Centers statewide – e.g., Hiawatha Valley Mental Health, Canvas Health, etc.
- NAMI's Family-to-Family or Hope for Recovery classes; Mental Health First Aid classes



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Why Don't Older Adults Get Help?

- Older adults might be uncomfortable talking openly about mental illness and/or substance abuse
- May feel stigma and shame about emotional problems
- May view a mental illness as evidence of moral or physical weakness, a character flaw or laziness



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Why Don't Older Adults Get Help?

- Fear and misunderstanding
- Lack of insight
- Anosognosia
- Access to care
- Lack of energy
- Ageism
- No funding for outpatient services

Stigma

“Mental Health: A Report of the Surgeon General” identified stigma as one of the major barriers that discourages adults with mental illnesses from seeking treatment.



Substance Abuse Resources

- SAMHSA (Substance Abuse and Mental Health Services Administration): www.samhsa.gov
- National Institute on Alcohol Abuse and Alcoholism: www.niaaa.nih.gov
- National Institute on Drug Abuse: www.drugabuse.gov



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Substance Abuse Resources

- Narcotics Anonymous: www.na.org
- Alcoholics Anonymous: www.aa.org
- Al-Anon: www.al-anon.org



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Substance Abuse - Quit Smoking Resources Minnesota

- Tobacco cessation classes & support groups – NAMI Minnesota’s Wellness Coordinator
www.namimn.org
- NAMI Minnesota “*Smoking Cessation Strategies for Mental Health Providers: Addressing Smoking Cessation, Encouraging Change*” – free on-line class with three CEUs
- Quit Partner Minnesota www.quitpartnermn.com
1-800-QUIT-NOW



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Substance Abuse - Quit Smoking Resources National

- Center for Disease Control and Prevention – Smoking Cessation: www.smokefree.gov
- National Cancer Institute Smoking Quitline:
1 (877) 448-7848
- Screening Sites: www.drugscreening.org,
www.alcoholscreening.org



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Substance Abuse Resources Minnesota

- Avivo: www.avivomn.org
- The Retreat – Wayzata: www.theretreat.org
- Silver Sobriety – east metro www.silversobriety.org
- Senior Recovery Center – east metro
www.seniorrecoverycenter.squarespace.com



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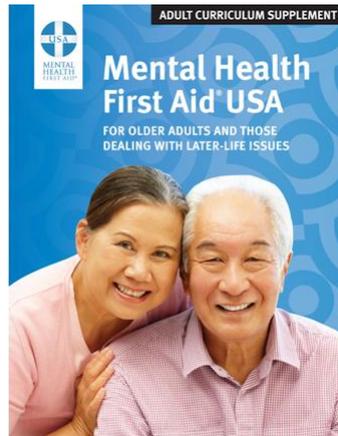
Substance Abuse Resources Minnesota

- Minnesota Recovery Connection:
www.minnesotarecovery.org



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Mental Health First Aid Class



What We Do

- Education classes, on-line training, booklets and fact sheets
- Suicide prevention
- Support groups, Helpline
- Public awareness presentations
- Legislative advocacy
- NAMIWalks – 4th Saturday in September

Support NAMI Minnesota

- Advocate for a better Mental Health System
- Attend an event
- Sign up for a newsletter
- Join an affiliate
- Be a sponsor
- Volunteer
- Become a donor



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Thank You

Kay King, Older Adult Program Coordinator and
Community Educator

kking@namimn.org

NAMI Minnesota

1919 University Ave West, Suite 400

St. Paul, MN 55104

651-645-2948

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Dec 2021



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Questions or comments?
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Next Webinar: Thursday, Feb 10 2022
12N-1PM

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