

# Table of Contents

INTRODUCTION3
SUBSTANCE ABUSE, ADDICTION AND DEPENDENCE
WHY OLDER ADULTS ABUSE DRUGS AND ALCOHOL
THE MOST COMMONLY ABUSED SUBSTANCES AMONG OLDER ADULTS
ADDICTION AMONG OLDER ADULTS IS DIFFICULT TO DIAGNOSE
SIGNS AND SYMPTOMS OF ADDICTION IN OLDER ADULTS
WHY OLDER ADULTS MAY AVOID TREATMENT
HOW TREATMENT RESTORES YOUR LIFE

## Introduction

Addiction is a complex disease that affects nearly 23 million Americans.¹ Older adults struggling with a substance use disorder face a number of unique challenges. The Substance Abuse and Mental Health Services Administration points out that even as the number of older adults with an addiction continues to grow, this population remains under-diagnosed and under-treated.

Understanding the underlying causes of addiction among older adults and the challenges they face in getting help for an addiction can help you determine whether you or an aging loved one needs help recovering from a substance use disorder.





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Previous editions of the *Diagnostic and Statistical Manual of Mental Disorders* had separate diagnostic criteria for substance abuse, addiction and dependence. The newest edition combines these under the umbrella of "substance use disorder," or SUD, and classifies it as mild, moderate or severe.

However, the terms substance abuse, addiction and dependence are still widely used, and in many cases, they're used interchangeably. But they aren't the same. Understanding the difference between substance abuse, addiction and dependence is important for understanding how these are diagnosed and treated.

#### **Substance Abuse**

Substance abuse is the act of using drugs or alcohol in a way that causes problems in your life. These may include health, relationship, legal or financial problems. They may also include engaging in risky behaviors while under the influence, such as driving while intoxicated or engaging in unsafe sex.

The most common form of substance abuse is binge drinking, which is considered drinking enough alcohol in the space of two hours to increase your blood alcohol level to .08 percent. For women, this is typically four drinks, and for men, it's five drinks. Although substance abuse isn't the same as addiction or dependence, it can lead to both.

### Addiction

Addiction is characterized by compulsive drug use despite negative consequences. If you're addicted, you'll find that you can't stop using drugs or alcohol for the long-term, even if you want to or have tried to.

Addiction is a disease marked by brain changes that affect the way you think and behave. Chronic drug or alcohol use changes the structures and functions of the brain, particularly affecting the learning, memory and reward centers. Your brain begins to associate liking drugs or alcohol with wanting them.

The mechanism that leads you to eventually crave drugs is the same one that drives you to eat food and procreate. Your brain links drug use with survival, and this powerful connection makes it extremely difficult to stop using drugs or alcohol on your own. The National Institute on Drug Abuse stresses that willpower and good intentions are rarely enough to overcome an addiction for the long-term.<sup>2</sup> Professional help is almost always needed.



## **Dependence**

While it's possible to be addicted but not dependent or dependent but not addicted, addiction and dependence typically occur together.

Dependence is the result of changes in brain function that lead to withdrawal symptoms that set in when you stop using drugs or alcohol. As you chronically abuse a substance, your brain changes the way it functions chemically to compensate for the frequent presence of the substance. This causes tolerance, which is characterized by needing increasingly larger doses of drugs or alcohol to get the same effects.

At some point, brain function may shift so that the brain operates more comfortably when drugs or alcohol are present than when they're not. Then, when you stop using, brain function rebounds and causes withdrawal symptoms, which can range from mild to severe. In some cases, such as with alcohol or benzodiazepines like Valium or Xanax, withdrawal can be dangerous or even fatal.

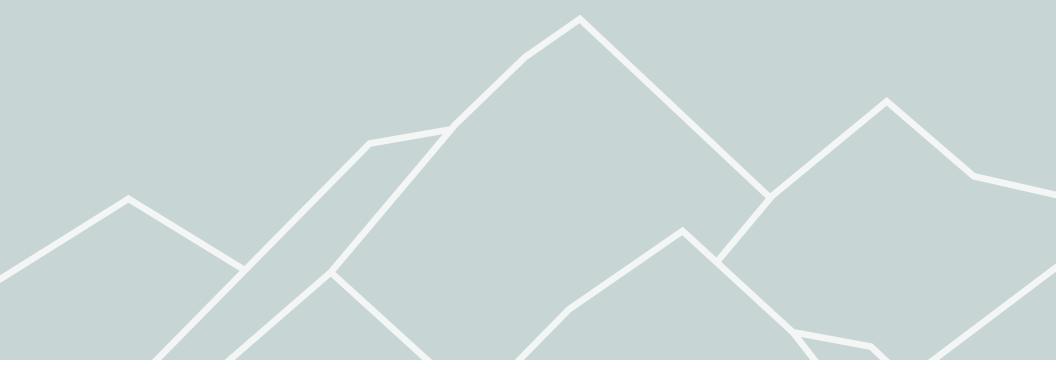




A great deal of money and energy is put toward prevention programming to discourage young people from using drugs and alcohol. That's because addiction most commonly affects young people, with 7.5 million 18- to 25-year-olds needing treatment in 2015, according to the National Survey on Drug Use and Health.<sup>3</sup>

But little attention is given to preventing substance abuse among older adults. In 2015, 2.3 million adults over the age of 40 needed treatment for a substance use disorder, and the U.S. Department of Health and Human Services projects that this number will reach 5.7 million by 2020.4

Aging adults use drugs and alcohol for different reasons than young people. A number of factors increase the risk of an older adult developing a substance use disorder.



### Gender

Older men who drink are up to six times more likely than their female counterparts to experience medical problems related to their substance abuse, and they're far more likely than older women to develop a substance use disorder. On the other hand, older women are more likely to report more negative consequences of their substance abuse. They're also more likely to use prescription drugs for mental health issues, and these drugs often have a high abuse potential.

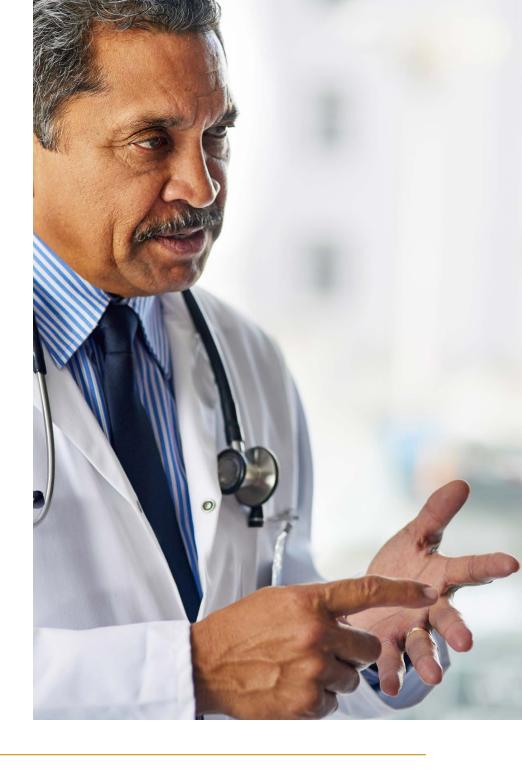


#### **Mental Health Issues**

Up to 30 percent of aging adults have a mental illness. Many people use drugs or alcohol to self-medicate symptoms of anxiety, depression and other mental health problems. This puts them at a higher risk of developing a substance use disorder. Older women are more likely than men to suffer from depression and anxiety, and they often choose not to seek help due to generational attitudes toward mental illness. Older women are more likely than their male counterparts to report feeling depressed before drinking alcohol.

#### Illness

Chronic illness may lead to substance abuse as a way to cope with negative emotions and physical symptoms. Older adults are also likely to be on medications that have a high potential for abuse, such as opioid painkillers and central nervous system sedatives. Illness can also leave older adults with feelings of isolation and boredom, and drugs or alcohol may be used to fill a void.



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#### Loss

Separation, divorce and the death of a spouse are key factors for substance abuse among older adults. Alcohol abuse is more common among recently divorced or separated aging adults. Older people who lose their spouse may turn to drugs or alcohol to cope.

#### Retirement

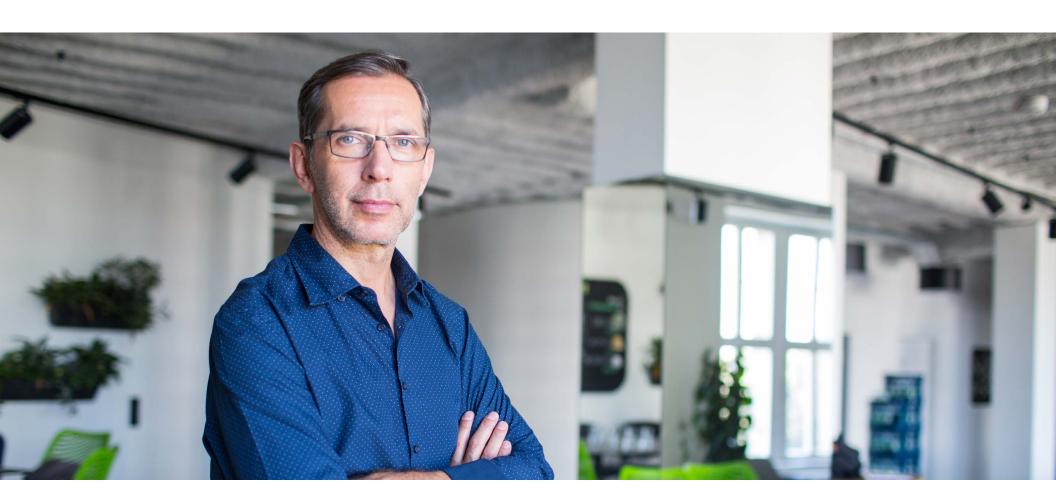
Retirement is a different kind of loss that may leave older adults feeling bored, isolated and lacking purpose. People who retire often lose a major social support they relied on for much of their life. Retirement can lead to reduced self-esteem and a lack of daily structure. Older retired adults may replace this social support with drugs or alcohol.

## **Physiology**

The way an aging body metabolizes alcohol in particular may play a role in developing a substance use disorder.<sup>5</sup> Alcohol is metabolized in the gastrointestinal tract more slowly in older people, so their blood alcohol content may be increased for a longer period of time. Older adults also have less body water than younger people. They may have an increased sensitivity to alcohol, and they may experience a decrease in tolerance, which means they need less alcohol or drugs to get the desired effects.

## **Past Drug Use**

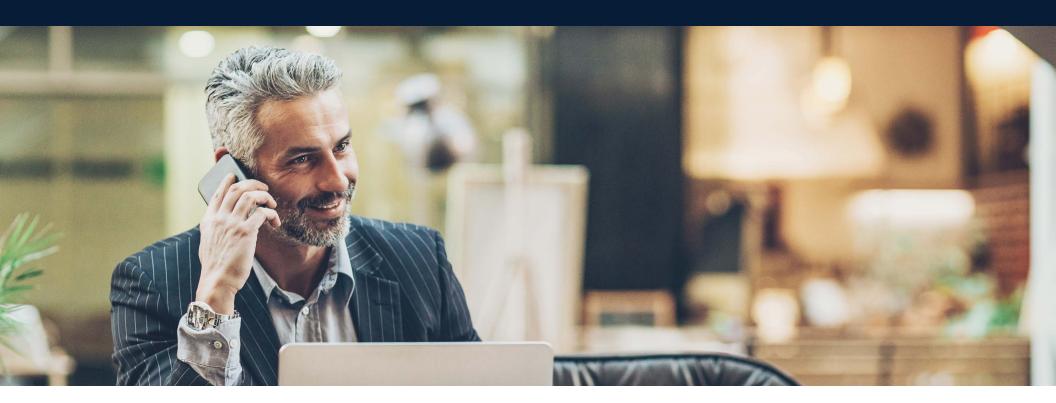
Early drug or alcohol use can increase the risk of substance abuse problems later on. In fact, older adults who initiated their drug or alcohol use between the ages of 17 and 20 are twice as likely as those who started using between the ages of 21 and 32 to develop a substance use disorder after the age of 50.





By far, the most commonly abused substance among older adults is alcohol. Problems related to drinking far outnumber other substance abuse problems in this population.

While the abuse of heroin and prescription opioid painkillers is rare among aging populations, other prescription drugs are commonly abused by older adults. These include drugs like Xanax and Valium, which are prescribed for anxiety and insomnia. Benzodiazepines account for about 23 percent of all drugs prescribed to older adults. This class of drugs can cause serious problems, including memory problems that are often attributed to dementia, a higher risk of falls and dangerous interactions with alcohol.





Even as the number of older adults with an addiction increases, people over the age of 40 who have an addiction remain underidentified, under-diagnosed and under-treated, according to the Substance Abuse and Mental Health Services Administration.<sup>6</sup>

Several factors contribute to the difficulty of diagnosing substance use disorders in older adults.

## **Different Attitudes Toward Aging Adults**

Both family members and medical professionals may have longheld attitudes that prevent them from addressing substance abuse in older adults. Family members may not see a problem with Grandpa's heavy drinking. "He deserves to unwind," "He's been lonely since Grandma passed," and "You can't teach an old dog new tricks" are common attitudes toward drinking in older adults. Younger relatives and medical professionals may feel that quitting drugs or alcohol in the advanced years will lead to more harm than good. These attitudes enable older adults to continue abusing drugs or alcohol without fanfare.



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## **Attributing Symptoms to Other Problems**

It's easier to miss the signs and symptoms of a substance use disorder in an older adult. That's because some symptoms may be mistaken for those of other medical or mental health issues, such as anxiety or depression, or attributed to side effects from certain medications.

### Older Adults' Attitudes Toward Substance Abuse

Many older adults view addiction as a moral issue rather than as a medical problem needing professional attention. Older adults may fear the social stigma of addiction and feel shame about their substance abuse. They may hide their addiction from friends and family, who may attribute the symptoms of addiction to illness or aging. They're likely to be dishonest with their physician about their substance use habits.

## Non-Applicable Diagnosis Criteria

Physicians use eleven criteria to diagnose substance use disorders. Depending on how many of the criteria apply, the substance use disorder will be classified as mild, moderate or severe. But some criteria may not apply to an older adult. For example, one of the criteria includes "continued use of a substance despite recurring problems," which may not apply to older adults who don't realize that some of their problems stem from substance abuse. Another criterion, "failure to fulfill obligations at home, work, or school" may not apply if the person is a retired empty nester. Health care professionals may attribute problems in an older adult's life—such as relationship problems or health issues—to age-related issues like depression or dementia.



### **Hurried Doctor Visits**

Older adults who visit their physician may feel rushed and neglect to discuss their concerns about substance abuse with their doctor. Similarly, many doctors may not spend enough time with older patients or ask the right questions to determine whether substance abuse is a problem. Older adults often have several doctors and take a number of medications. The various doctors may not communicate with each other, and they may attribute symptoms of addiction to the side effects of the medications.



Signs and symptoms of addiction in older adults may differ from those experienced by younger people.

Common symptoms of addiction in aging adults include:

- Using drugs or alcohol when you're alone
- Hostility
- Depression or anxiety
- Memory loss or confusion
- Bruises from falls or other accidents
- Social withdrawal
- Hiding your drug or alcohol use from friends and family members
- Drinking ritualistically before, during or after dinner
- Drinking even though you're on prescription medications that recommend against it
- Frequently slurred speech, the smell of liquor on the breath or glassy eyes
- The presence of drug paraphernalia or empty alcohol bottles around the house
- Health problems that can't be explained with a medical diagnosis
- Defensiveness or discomfort when confronted about alcohol or drug abuse





In general, only one in 10 people who need help recovering from addiction get the help they need. Older adults are less likely than younger people to enter treatment, with only a fraction of those needing help seeking it.

This low number is largely due to attitudes aging adults have about substance abuse. Older adults typically disapprove of addiction. Many feel that it's a moral failing and may experience a lot of shame if they have a substance abuse problem. They often feel that their addiction is a private matter and won't discuss it with their physician, friends or family. This makes it difficult for them to get the help they need.





Drug abuse takes a serious toll on older adults, who are more likely than their non-using counterparts to report loneliness and low life satisfaction. Drugs and alcohol take a toll on health and well-being and can dramatically lower an individual's quality of life and cause serious mental and physical health problems.

Getting help for an addiction can restore your life, but choosing a treatment program that specializes in treating older adults is essential for the best outcome of treatment. Older adults respond best to a slower treatment pace and non-confrontational approaches to treatment. High-quality treatment for older adults typically focuses on the unique needs of this population and strives to meet the spiritual, social, emotional and mental health needs of older adults.

Treatment can restore a zest for life following the loss of a spouse, and it can help reduce feelings of loneliness and isolation by helping older adults improve their social functioning. Both traditional and complementary treatment therapies offer a holistic approach to treatment that addresses issues of body, mind and spirit for whole-person healing.

The Substance Abuse and Mental Health Services Administration stresses that there is no single pathway to recovery.<sup>7</sup> Every individual has different needs and issues, and a holistic approach to treatment ensures all of these needs are met.

A holistic approach to treatment will include a variety of therapies that help you delve into the underlying issues behind an addiction, including the loss of a spouse, a history of trauma, chronic stress, medical illness and a lack of social support.

**Cognitive-behavioral therapy** is the cornerstone of addiction treatment and helps you evaluate your thought and behavior patterns. Participants learn to replace self-destructive thoughts and behaviors with those that are healthy.

**Motivational interviewing** helps people who are ambivalent toward recovery identify their own intrinsic motivation for wanting to recover.

**Group therapy** offers the opportunity for participants to share experiences and receive support from peers going through similar challenges.



**Art therapy and music therapy** help individuals express and make sense of difficult emotions and experiences through creative pursuits.

**Meditation** improves self-awareness, reduces stress and helps improve mindfulness. It can help relieve cravings and promote calmness





Addiction is a complex disease that affects thought and behavior and reduces your quality of life. Treatment can help you restore your life and sense of well-being. You'll develop essential skills to help you cope with stress, cravings and other triggers, and you'll find purpose and meaning in a life apart from drugs or alcohol.

Hope is the foundation of recovery. Hope is the belief that a better future is possible. Treatment works to restore hope and improve lives, and it can work for you.

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