

Substance Use Disorders & Mental Health in Older Adults

Screening, Treatment, & Important Conversations

While substance use disorders (SUDs) become less common with age, over one million adults ages 65 and older in the U.S. are estimated to live with a substance use disorder.¹ This high prevalence is due, in large part, to the aging of the baby boomers — a generation that has generally been more comfortable with the use of alcohol, marijuana, prescription and non-prescription drugs, and other substances. SUDs can lead to serious illness, worsen existing medical conditions, harm mental health, impact relationships and well-being, increase healthcare usage, and even lead to death.

SUDs in older adults are under-diagnosed and under-treated, despite the fact that as we age, our bodies and brains become more vulnerable to the potential harmful effects of these substances. This resource includes guidance on recognizing and screening for SUDs, tips on having important conversations with your patients about treatment, and links to additional resources.

INCREASED RISK

A variety of medical, social, and environmental factors put older adults at heightened risk of SUDs:

- Age, certain illnesses, and concomitant use of other medications or substances can impact metabolism and the activity of liver enzymes and increase the effects of alcohol.

¹ Center for Behavioral Health Statistics and Quality. 2020. *Results from the 2019 National Survey on Drug Use and Health: Detailed tables*. Rockville, MD: Substance Abuse and Mental Health Services Administration. Available at www.samhsa.gov/data/sites/default/files/reports/rpt29394/NSDUHDetailedTabs2019/NSDUHDetTabsSect5pe2019.htm. Last accessed April 2022.

- Prescription medication use in older adults ages 60 and older is nearly twice the rate of use in the general population.² These medications are more likely to include addictive medications like benzodiazepines or opioids.
- Opioid use is common in older adults due to higher rates of painful chronic conditions and surgeries.
- Older adults often have multiple health care providers writing their prescriptions — making it more difficult to track misuse and interactions. Additionally, over-the-counter supplement and substance use that can be dangerous and interact with prescription medications is more common in older adults.
- Potential triggers of SUDs are more common in older adults — including social isolation and loneliness, trouble sleeping, mental or physical decline or disease, grief over the death of a loved one, and major life changes or stressful events.

OLDER ADULTS have increased rates of
DIAGNOSED SUBSTANCE USE DISORDER &
 are **2X** as **LIKELY TO DIE** from **misuse**.³

UNDER-RECOGNIZED AND UNDER-TREATED

Older adults with SUDs tend to be underdiagnosed and undertreated. In 2018, among older adults with a SUD, only 24 percent received treatment for drug use disorders, and only 16.8 percent received treatment for alcohol use disorders.⁴ Many providers still perceive older adults to be at lower risk of SUDs or are deferential when it comes to screening. Symptoms can also be difficult to distinguish from other causes like diabetes, dementia, and depression. Further complicating screening, SUDs can be difficult to talk about and admit to, and often carry shame and stigma.

2 Martin et al. 2019. Prescription Drug Use in the United States, 2015-2016. NCHS Data Brief, No. 334. Hyattsville, MD: National Center for Health Statistics. Available at www.cdc.gov/nchs/data/databriefs/db334-h.pdf. Last Accessed April 2022.

3 Larney et al. 2015. Mortality Among Older Adults with Opioid Use Disorders in the Veteran's Health Administration, 2000 - 2011. Drug and Alcohol Dependence 1(147)32-7.

4 Center for Behavioral Health Statistics and Quality. 2019. Results from the 2018 National Survey on Drug Use and Health: Detailed tables. Rockville, MD: Substance Abuse and Mental Health Services Administration. Available at <https://www.samhsa.gov/data/release/2018-national-survey-drug-use-and-health-nsduh-releases>. Last accessed April 2022.

SCREENING PATIENTS

In addition to a thorough examination and psychiatric, neurological, and social evaluation; several screening tools that have proven effective in detecting SUDs in older adults including the:

- [CAGE Questionnaire for Alcohol Use](#)
- [Short Michigan Alcoholism Screening Test — Geriatric Version \(SMAST-G\)](#)
- [Alcohol Use Disorders Identification Test \(AUDIT\)](#)
- [Tobacco, Alcohol, Prescription medication, and other Substance use Tool \(TAPS\)](#)

The Welcome to Medicare Visit and [Yearly Wellness Visits](#) include a review of alcohol, tobacco, and current opioid prescriptions, as well as a screening for a potential SUD.

IMPORTANT CONVERSATIONS

If you think your patient is dealing with a SUD, make sure they understand that:

- They are not alone — more than a million older adults in the U.S. are dealing with SUDs.
- Addiction is not a character defect or a sign of weakness but a complex mental illness.
- SUDs can affect anyone regardless of age, race, socioeconomic status, gender, education, or other demographic differences.
- A SUD diagnosis is not an excuse to continue the behavior.
- SUDs are treatable but the treatment and recovery process can be long, and relapses are not uncommon.
- It's important to engage their friends and loved ones in their treatment.

If you suspect substance misuse or addiction:

- Avoid judgment
- Intervene early
- Involve family members
- Ask about life changes
- Ask about sleep habits
- Keep a strong relationship to build trust
- Watch for premature medication refill requests
- Encourage counseling

- If they decide not to treat their SUD, it's important to remember that excessive alcohol and drug use can cause significant damage, increase the risk of serious health problems, and impact their work and social life.
- If your patient is misusing opioids, remind them that these drugs caused more than 93,000 overdose deaths in 2020.⁵

LEARNING MORE AND GETTING HELP

Refer your patient to a treatment center or team that can help them get the appropriate treatment and care they need or consult a colleague with expertise in this area.

Additional Resources Include:

- [Treatment navigator](#) from the National Institute of Alcohol Abuse and Alcoholism (NIAAA) at the National Institutes of Health, and Substance Abuse and Mental Health Services Administration (SAMHSA)
- SAMHSA National Helpline at 800-662-HELP
- [Opioid Treatment Program Directory](#) from SAMHSA




⁵ National Center for Health Statistics. 2021. Vital Statistics Rapid Release: Provisional drug overdose death counts. Available at www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm Last accessed April 2022.



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