Understanding Substance Use

Steven Lawley, M.A., LPC PERC Counseling Psychotherapist

> Danielle Simpson, M.D. PERC Psychiatry Resident

Agenda

- Introduction
- Important Considerations
- Substances
 - Nicotine
 - Cannabis
 - \circ Alcohol
 - Stimulants
- Case Example
- Steering vs. Fueling
- The Drama Triangle
- The Empowerment Dynamic
- Discussion and Q&A

Questions to Consider

- What is it doing for you?Is it working?
- Does it cause me any harm?
- Are there other, healthier ways to reach the same goal?



Nicotine

- People with psychosis symptoms frequently smoke, for many reasons!
- Nicotine affects the brain, including the release of dopamine, serotonin, and glutamate
- Can nicotine help with some symptoms that come with psychosis, like concentration and motivation???



Scott, J. G., Matuschka, L., Niemelä, S., Miettunen, J., Emmerson, B., & Mustonen, A. (2018). Evidence of a Causal Relationship Between Smoking Tobacco and Schizophrenia Spectrum Disorders. Frontiers in psychiatry, 9, 607. https://doi.org/10.3389/fpsyt.2018.00607

Nicotine

- No clear benefits, outside of preventing withdrawal
- Side effects of smoking are unacceptable!
- Talk to your team about other ways to help with concentration, motivation, anxiety, or fatigue, that are safer and healthier!
- Your doctor can also discuss ways to make it easier to stop smoking



Boggs DL, Surti TS, Esterlis I, Pittman B, Cosgrove K, Sewell RA, Ranganathan M, D'Souza DC. Minimal effects of prolonged smoking abstinence or resumption on cognitive performance challenge the "self-medication" hypothesis in schizophrenia. Schizophr Res. 2018 Apr;194:62-69. doi: 10.1016/j.schres.2017.03.047. Epub 2017 Apr 6. PMID: 28392208; PMCID: PMC5630481.

Nicotine

Note: Medication interactions with smoking
 Olanzanine (Zypreva)

- Olanzapine (Zyprexa)
- **Clozapine** (Clozaril)

• Some people try to address side effects of medication by smoking (restlessness, tiredness)- talk to your doctor!

- People with psychosis symptoms are more likely to have used or use cannabis than their peers
- Reasons for using cannabis vary



Hunt GE, Large MM, Cleary M, et al. Prevalence of comorbid substance use in schizophrenia spectrum disorders in community and clinical settings, 1990-2017: systematic review and meta-analysis. Drug Alcohol Depend. 2018;191:234-258.



Source: ElSohly MA, Mehmedic Z, Foster S, Gon C, Chandra S, Church JC. Changes in cannabis potency over the last 2 decades (1995–2014): analysis of current data in the United States. Biological Psychiatry. 2016 Apr 1;79(7):613-9.

What do you mean by "weed"? THC + CBD + ?

Table 1. CNS and cardiovascular effects of THC and CBD.		
	THC	CBD
Anticonvulsant	+	++
Muscle relaxant	++	+
Analgesic	++	+
Anxiolytic	±	++
Antipsychotic	-	++
Neuroprotective	+	++
Antiemetic	++	+
Sedation	+	-
Bradycardia	-	+
Tachycardia	+	-
Hypertension	+	-
Hypotension	-	+

Adapted from Russo E, Guy GW. A tale of two cannabinoids: the therapeutic rationale for combining tetrahydrocannabinol and cannabidiol. Medical Hypotheses. 2006 Dec 31;66(2):234-46. • Muscle relaxant, pain relief, anti-nausea

 THC can cause brief psychosis symptoms, like paranoia, hearing voices, or disorganized thoughts

 Decreased learning, memory, attention, executive function

People with psychosis who keep using THC often have more symptoms!

Longer hospital staysMore symptoms



 Marconi A, Di Forti M, Lewis CM, et al. Meta-analysis of the association between the level of cannabis use and risk of psychosis. Schizophr Bull. 2016;42:1262-1269.
 Schoeler T, Monk A, Sami MB, et al. Continued versus discontinued cannabis use in patients with psychosis: a systematic review and meta-analysis. Lancet Psychiatry. 2016;3:215-25.

CBD

Talk to your doctor!



Alcohol

- Very common
 Used for multiple reasons:

 Sleep
 Anxiety
 - \circ Mood

$\begin{array}{ccc} H & H \\ & & \\ H - C - C - O - H \\ & & \\ H & H \end{array}$

Alcohol

H H H-C-C-O-H H H

Used for multiple reasons:

- Effects on sleep: lighter sleep, earlier awakening
- <u>Effects on anxiety</u>: short-term benefit, followed by rebound anxiety
- Effects on mood: Depressant
- Effects on executive function/ attention: Reduces frontal lobe control; increases risk of behavior outside of a person's normal values, and of dangerous behavior

Alcohol



Medication Interactions

- Sedation (sleepiness)

 can be dangerous or lifethreatening with some medicines; talk to your doctor!
- Worsens sleep, anxiety, mood (...all make it hard to succeed)

Stimulants

- Adderall, Ritalin- prevalent among students
 - Participants can react differently to these medications than they have in the past, and differently from people who don't have psychosis symptoms
 - Can cause short term paranoia, confusion, voices in *some* people
 - None of these things help with studying...
 - There are safer ways to work on focus and learning!



Be a scientist about it!

-All of us here, not just participants!!

-If you have the thought to smoke or drink-

- Why? What is it helping you accomplish?
- Note your mood/anxiety over the next 2 days

-Does it work?



- -Are there ways that it doesn't work, or causes harm?
- -Are there other ways that I can relax? Go to sleep? Have fun with friends? Take a break? Wind down? Focus?

Case Example

"Shaun" is a 27 year old male who has been struggling with depression & anxiety, and has experienced two episodes of psychosis over the past year.

Shaun has been using cannabis daily since he was 17 years old and has experimented with a variety of other substances recreationally.

Shaun has been diagnosed with Schizoaffective Disorder, Major Depressive Disorder, and Generalized Anxiety Disorder.

Shaun is currently unemployed and therefore financially dependent on his parents. Shaun's parents pay for his mental health treatment, all of his living expenses, and also provide him with a generous stipend for spending money.

Shaun and his family sought out mental health treatment to address his challenges with depression, anxiety, psychosis, substance use, and the transition to adulthood. Shaun hopes to improve his mental health & develop skills for independent living, and has been working with a psychiatrist, psychotherapist, life skills coach, and participates in neurofeedback training.

Shaun's parents are very supportive of his goals and aspirations, giving him freedom to explore his interests at his own pace.

Case Questions

- What role do you think Shaun's substance use has had on his mental health?
- What stance do you think Shaun's parents should take on his substance use?
- How could Shaun's parents support him more effectively?

Steering vs Fueling

Let's use the metaphor of life as a car. If your son or daughter's life were a car, when they were little it would have been your job to *steer*.

You would have to keep them safe, provide a rational structure, and help them when they were stuck emotionally or struggling with one of life's many challenges.

Before they truly become an adult, they will need to be able to steer their own car, to pick a destination and know how to get there, to stay safe despite the dangers of the road, and to keep the car running in a healthy way.

By the time your son or daughter is an adult, your days of steering are long over. Your role has changed. It's time to focus on *fueling*.

Steering vs Fueling

Before we begin discussing the differences between **steering** and **fueling**, let's take a look at when it may be appropriate to steer.

<u>Safety</u> and <u>stability</u> are essential components of success in life. We seek to actively monitor factors that could threaten a safe and stable rhythm.

Steering is justified when safety and stability are seriously threatened.

Once there is a sense of basic safety and stability, proper fueling is the best support for growth into adulthood and autonomy.

Steering

Steering is attempting to control.

Steering is checking to make sure that your child made a doctor's appointment. Steering is giving your child money if they get good grades. When you call with a list of concerns that you hope to make them aware of, that's steering too. So is telling them that you won't pay for any more classes if they fail again.

Steering isn't inherently bad, it just does more to support perpetual adolescence than to support a launch towards adulthood.

You probably already know from hard-won experience that it's difficult to steer someone else's life very effectively.

When we steer, the tendency is for our kids to feel a little judged or even a little inadequate. It's as if we don't trust them to be able to handle life's challenges. Or we create conflict. We come across as being too alarmist or a nag. We can end up unsure whether or not we got our point across, and whether or not it was worth it even if we did.

Rather than trying to figure out how best to steer, *the parent journey is more about how to <u>fuel</u>. If you are like many parents, contact with your son or daughter is sometimes strained.*

Fueling means that after having contact with your son or daughter they leave feeling more empowered and capable.

Fueling

<u>Fueling</u> is about believing in them, keeping the faith in who they are, and who they will become, even if they don't feel confident themselves.

Fueling is about being able to hang out and enjoy your time together, without any particular agenda.

If they don't call you back, if they give one-word answers, if you feel like you are being avoided, let's face it - these are all signs that despite our best intentions, they are not feeling fueled.

We come back to the idea of **fueling** versus **steering** again and again in our family work. Two initial goals that we have for all families are:

(1) To be able to identify their interactions as either *fueling* or *steering*

(2) To practice communication that fuels rather than steers.

Karpman's Dreaded Drama Triangle

• A <u>Victim</u>

- Feels as though they are unable to control what happens in their life
 - Powerless
 - Helpless

• A <u>Persecutor</u>

- Controls others through blame, criticism, and oppression
- Thinks they must win at any cost

• A <u>Rescuer</u>

- \circ ~ Intervenes on behalf of the victim to save them from perceived harm.
- Inadvertently fosters dependency by relieving the victim of responsibility and learning how to overcome hardship

Drama Triangle



The Empowerment Dynamic

• A <u>Creator</u>

- Focuses on vision and desired outcomes
- Takes full responsibility for initiating action to achieve their desired outcomes

• A <u>Challenger</u>

- Sparks learning by challenging assumptions and the status quo
- Focuses on improvement and development by holding people accountable for taking action

A <u>Coach</u>

• Empowers others through inquiry and guided-self discovery to help them gain clarity

The Empowerment Dynamic



Sparks learning by challenging assumptions and the status quo. Focuses on improvement and development by holding people accountable for taking action.

Challenger

Persecutor

Thinks they must win at any cost. Controls others through blame, criticism, and oppression.

Thinks they are powerless and at the mercy of life circumstances. Is unwilling to take responsibility for what happens in their life.



Victim

Focuses on vision and desired outcomes. Takes full responsibility for initiating action to achieve their desired outcomes.

> Empowers people through inquiry to help them gain clarity.

Coach

Rescuer

Intervenes on behalf of the Victim to save them from perceived harm. Fosters dependency by relieving the Victim of taking responsibility.

Discussion

- What are you taking from today's group?
- What gets in the way of having productive discussions about substance use?
- What goals do you want to work towards?



References

- 1. Emerald, D. (2015). *The Power of T.E.D. (The Empowerment Dynamic)*. Polaris Publishing.
- 2. Karpman, S. (1968). Fairy tales and script drama analysis. *Transactional Analysis Bulletin*, 7(26), 39-43.