Stimulants

(Session 2)

Michael Weaver, MD, DFASAM

Professor and Medical Director Center for Neurobehavioral Research on Addiction The University of Texas Health Science Center at Houston

Objectives



Discuss Contingency Management for enhancement of counseling.

Recognize the basics of Mindfulness for addiction treatment.

Identify promising pharmacologic options for treatment of stimulant use disorder.





OUTPATIENT
BEHAVIORAL
COUNSELING
Individual
Facilitated groups

RESIDENTIAL

THERAPEUTIC COMMUNITY

MUTUAL-HELP GROUPS

12-Step (Narcotics Anonymous)

SMART Recovery

FAMILY THERAPY

TREATMENT
OF STIMULANT
ADDICTION

CONTINGENCY MANAGEMENT

Behavioral Addiction Treatment

MOTIVATIONAL INTERVIEWING

Motivate the patient to reduce/stop drinking and/or seek further treatment

COGNITIVE-BEHAVIORAL TREATMENT

Identify life stressors, high-risk situations for drinking, and coping skills deficits

Use modeling and rehearsal

RELAPSE PREVENTION

Identify triggers, practice avoiding, emphasize responsibility

A 'slip' is a learning opportunity

Other Types of Addiction Counseling

- Supportive psychotherapy
- Network therapy
- Building Social Networks
- Community Reinforcement and Family Training (CRAFT)
- Acceptance and Commitment Therapy

Contingency Management

- Behavioral therapy that has shown success for stimulant addiction and others
- "Paying addicts to stay clean"
- Voucher-based system to give positive rewards for staying in treatment and giving urine samples that are negative for drugs
- Exchange vouchers for items that encourage healthy living
- Drug-free lifestyle goals eventually replace need for vouchers as rewards
- Expensive, but less than costs of addiction to society



Paying People (less) to Stay Clean



Contingency Management strategies are effective for treating addiction

Expensive

Prize-based CM is less expensive

Earn chance to draw a chip for a prize (0-\$100) for each clean urine

Number of draws increases as number of weeks clean increases

Can also use lottery tickets

Mindfulness

- Derived from philosophies concerning cultivation of awareness
- Practices designed to evoke a state of mindfulness
- Focused attention
 - Concentrate on breathing
- Acknowledge and disengage from distracting thoughts and emotions
- State of metacognitive awareness

- Moment-by-moment monitoring
 - Cognition
 - Emotion
 - Sensation
 - Perception
- Attentive and nonjudgmental
- No perseveration on thoughts of past and future

Mindfulness and Addiction

Mindlessness

- Characteristic of addiction
- Habitual responses
- Automatic behavior
- No regard for consequences

Mindfulness

- Remain nonreactive
- Accept distressing thoughts and emotions
- Mindfulness enhances capacity for cognitive control

- Reduces substance use and craving
- Mindfulness originally focused on reducing emotional distress
 - Stress
 - Chronic pain
 - Depression
- Mindfulness meditation leads to changes in brain structure

Mindfulness-based Interventions

Practices

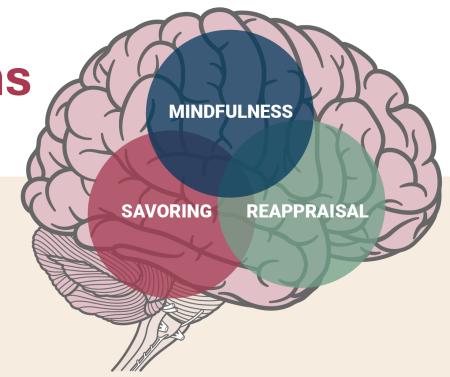
- Mindful breathing
- Body scan meditation
- Debrief as group

Chocolate exercise

Compare with craving for drugs

Mindfulness de-automatizes addictive behavior

- Deconstruct craving
- Adaptively respond to urge rather than automatically react to cues to use



- Group therapy format
- Weekly sessions for around eight weeks
 - Psychoeducational material
 - Homework exercises
- Guided by trained clinician
 - Requires intensive instructor training

Smartphone Apps

- Recovery-based applications (apps) for smartphones combine evidence-based research and technology
- 24/7 access to support and connection
- Doesn't require interpersonal interaction
- Features
 - Track sobriety
 - Monitor triggers
 - Connect with peers in recovery
 - Access information
 - Keep a journal



Pharmacologic Treatments for Stimulant Use Disorder

- Desipramine
- Imipramine
- Monoamine oxidase inhibitors
- Fluoxetine
- Trazodone
- Haloperidol
- Flupenthixol

- Lithium
- Methylphenidate
- Levodopa
- Bromocriptine
- Amantidine
- Carbamazepine
- Valproate

- Topiramate
- Mazindol
- Naloxone
- Buprenorphine
- Methadone

Possible New Combination?

- Accelerated Development of Additive Pharmacotherapy Treatment (ADAPT) for Methamphetamine Use Disorder
- Sponsored by National Institute on Drug Abuse Clinical Trials Network (NIDA CTN)
- High-dose bupropion
 - Depression medication
- High-frequency naltrexone injections
 - Opioids, alcohol
- 400 subjects with daily methamphetamine use
- Multiple sites throughout U.S.
- Just published positive findings

Referral to Treatment

- Refer high-risk patients for a full assessment
- If nearby treatment resources are not available, provide
 - Support group contact information
 - Counseling resources
 - Clergy
 - Mental health referrals
- SAMHSA Treatment locator website <u>www.findtreatment.samhsa.gov</u>
- American Society of Addiction Medicine <u>www.asam.org</u>
- American Academy of Addiction Psychiatry <u>www.aaap.org</u>
- National Association for Alcohol and Drug Abuse Counselors <u>www.naadac.org</u>

Summary

- Different types of addiction treatment are available, which are successful and cost-effective
- Cognitive-Behavioral Therapy helps identify triggers to use and works on enhancement of coping skills
- Contingency Management provides immediate positive rewards for specific recovery behaviors to compete with the rewarding aspects of stimulant use
- Mindfulness helps resist cravings and disrupt automatic behaviors of using stimulants
- No FDA-approved medications are currently available for treatment of stimulant use disorder

References

- Weaver MF: Addiction Treatment. Carlat Publishing, 2017
- Weaver MF, et al: Role of the primary care physician in problems of substance abuse. Archives of Internal Medicine 1999;159:913
- Miller SC, et al: Principles of Addiction Medicine, 7th Ed., New York: Wolters Kluwer, 2024
- Trivedi MH, et al: Bupropion and naltrexone in methamphetamine use disorder. N Engl J Med 2021;384(2):140-153.

Resources

- Clinical Practice Guideline for Stimulant Use Disorder Management,
 American Society of Addiction Medicine https://www.asam.org/quality-care/clinical-guidelines/stimulant-use-disorders
- Treatment of Stimulant Use Disorder, SAMHSA https://store.samhsa.gov/sites/default/files/pep20-06-01-001.pdf