

Get Connected: Linking Older Adults with Resources on Medication, Alcohol, and Mental Health Can Help Reduce Social Isolation and Improve Health

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SAMHSA
Substance Abuse and Mental Health
Services Administration



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Presentation Objectives

- Discuss how health promotion programming can become a source of social support and health education for socially isolated older adults.
- Showcase how to use *Get Connected: Linking Older Adults with Resources on Medication, Alcohol, and Mental Health* to support the development of prevention messages and education to address social support and social interaction in older adults.

Substance Use/Misuse in Older Adults



Prevalence of Substance Use/Misuse in Older Adults

- More than 80 percent of older adults use at least one prescription on a daily basis, with 50 percent taking five or more medications and supplements daily.¹
- Nearly 16.2 million older adults over the age of 65 drank alcohol in the past month, with 3.4 million reporting binge alcohol use and 772,000 reporting heavy alcohol use.²
- SAMHSA's *TIP 26: Substance Abuse Among Older Adults*, estimates combination of alcohol and medication misuse affects up to 19 percent of older Americans.³

¹ Mattson, M., Lipari, R. N., Hays, C., & Van Horn, S. L. Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. (2017). *A day in the life of older adults: Substance use facts*. Rockville, MD: Substance Abuse and Mental Health Services Administration

² What is the Scope of Prescription Drug Misuse, NIDA, 2015

³ Substance Abuse Among Older Adults: Treatment Improvement Protocol # 26, SAMHSA, 1998

Prevalence of Substance Use/Misuse in Older Adults (continued)

- The 2012-2013 National Epidemiologic Survey on Alcohol and Related Conditions III found that 55.2 percent of adults age 65 and over drink alcohol.
- The combined 2007 to 2016 National Survey on Drug Use and Health (NSDUH) data indicates that nearly 500,000 older adults used an illicit drug in the past month. NSDUH includes nine illicit drug categories: marijuana, cocaine (including crack), heroin, hallucinogens, and inhalants, as well as the nonmedical use of prescription-type pain relievers, tranquilizers, stimulants, and sedatives.

The Opioid Crisis and Older Adults

How the opioid crisis has affected older adults:

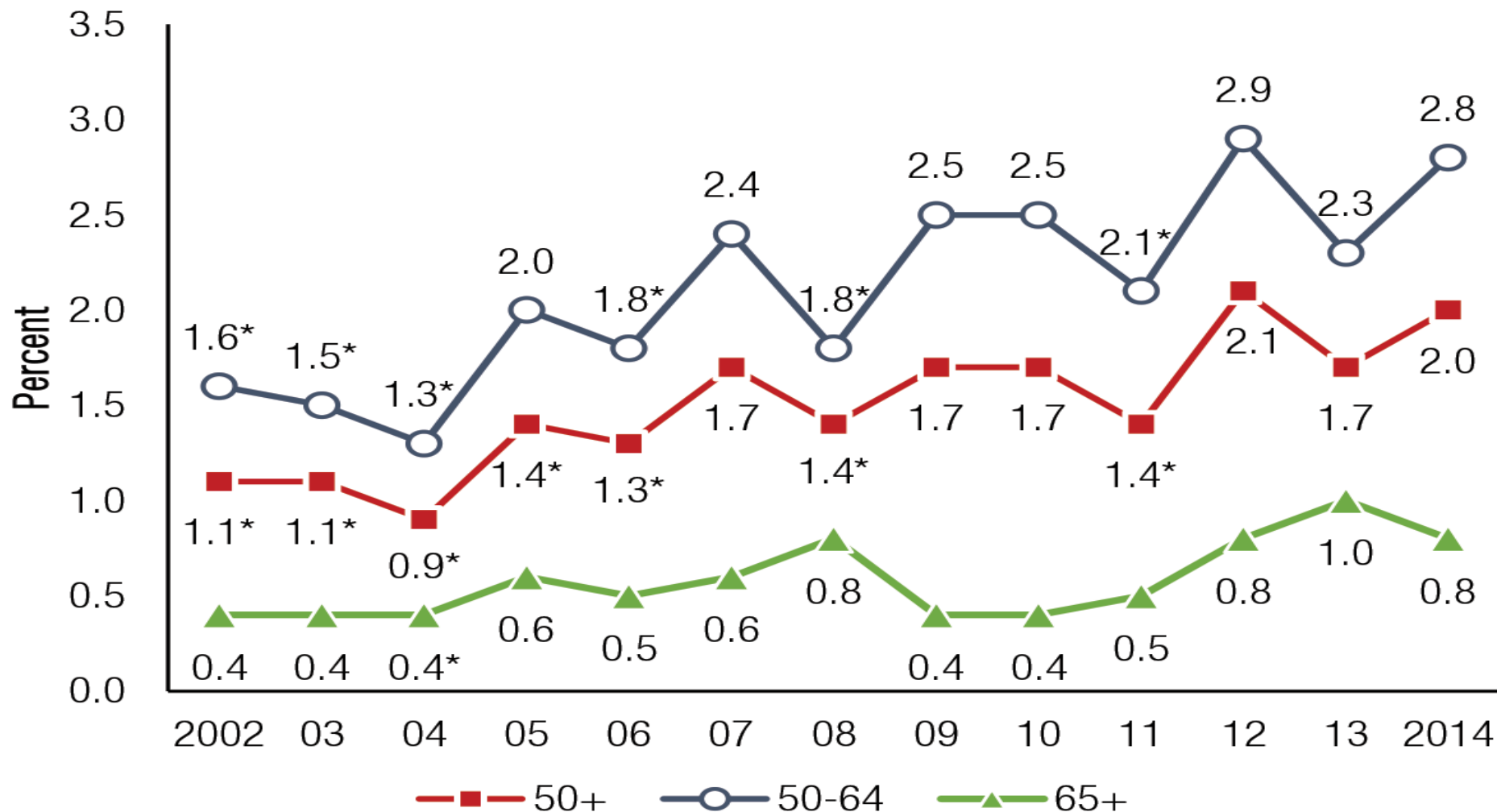
- Rates of opioid analgesic use is higher among older adults¹:
 - 8.1 percent for ages 40-59
 - 7.9 percent for those 60 and over
- According to CDC's MMWR, in 2016 over 44,000 Americans died from opioid overdose deaths, of which more than 7,000 were aged 55 and older.²
- NSDUH data indicates opioid misuse increased among older adults (50+) from 1.1 percent in 2002 to 2.0 percent in 2014, and by 2020 it's estimated to increase to 3.1 percent (5.7 million people).³

¹ Center for Disease Control and Prevention, National Center for Health Statistics Data Brief, 2015

² Center for Disease Control Morbidity and Mortality Weekly, January 4, 2019

³ Substance Abuse and Mental Health Services Administration, CBHSQ Report, July 25, 2017

Opioid Misuse in the Past Year Among Adults Aged 50 and Older by Age Group, 2002-2014



Opioid misuse refers to heroin use or nonmedical use of prescription pain relievers.

SAMHSA, NSDUH, 2002-2014

Emergency Department Visits Related to Medication Use/Misuse

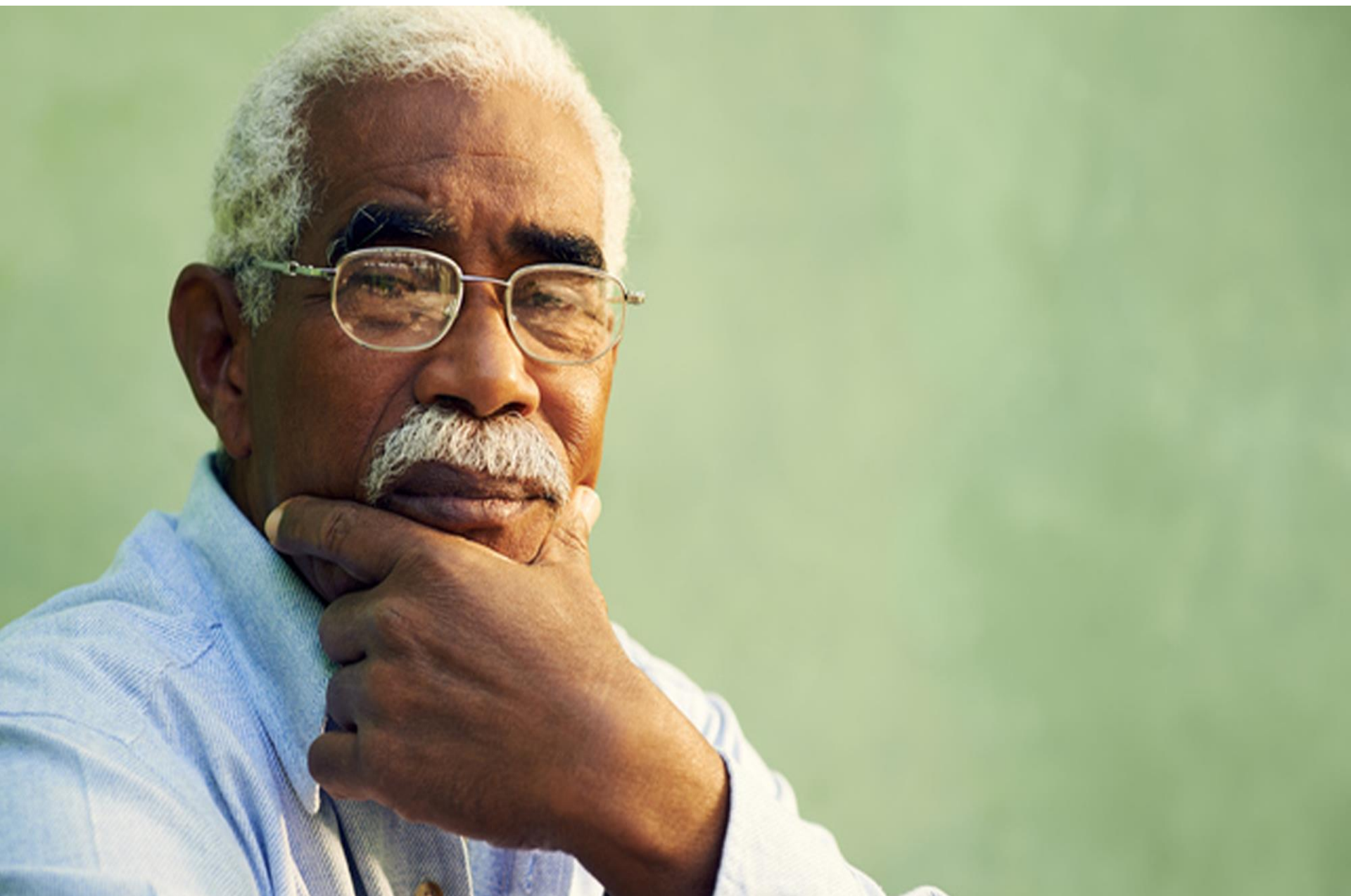
- One fifth of emergency department (ED) visits involving prescription medication use among older adults were made by persons aged 70 or older.
- Medications involved in ED visits made by older adults:
 - 43.5 percent pain relievers
 - 31.8 percent medications for anxiety or insomnia
 - 8.6 percent antidepressants
- What happened after ED visit?
 - 52.3 percent were treated and released
 - 37.5 percent were admitted to the hospital

Baby Boomers and Illicit Drug Use

According to 2016 NSDUH, Baby Boomers have a higher rate of lifetime illicit drug use:

- 50-54 years - 60.1 percent
- 54-59 years - 60.9 percent
- 60-64 years - 53.6 percent
- 65 and older - 25.6 percent

Risk Factors for Substance Use/Misuse in Older Adults



Who is at Greatest Risk for Misusing Medications and Substances?

Factors associated with prescription drug use/misuse in older adults:

- Female gender
- **Social isolation**
- History of a substance use disorder (SUD)
- Medical exposure to prescription medications with abuse potential
- History of mental health disorder – older adults with prescription drug dependence are more likely than younger adults to have a dual diagnosis

Source: Simoni-Wastila, Yang, 2006

Risk Factors (continued)

- **Being both socially isolated and socially connected have been found to be risk factors in increased alcohol use in older adults.**
- Older adults who experience stressful loss and that are not socially connected will likely drink more than those who did not experience the loss.
- Loneliness has been linked to poor health outcomes, including SUD, smoking, and inactivity. Loneliness was associated with drinking four to seven days a week.

Signs of Substance Use/Misuse

- Loss of motivation
- Memory loss
- Family or marital discord
- New difficulty with activities of daily living
- Difficulty sleeping
- Drug-seeking behavior
- Doctor shopping

Health Promotion Programming As a Way to Prevent Substance Use/Misuse in Older Adults

“Social isolation denotes few social connections or interactions, whereas loneliness involves the subjective perception of isolation — the discrepancy between one’s desired and actual level of social connection.

In other words, people can be socially isolated and not feel lonely; they simply prefer a more hermitic existence. Likewise, people can feel lonely even when surrounded by lots of people, especially if the relationship is not emotionally rewarding.”

Health Promotion Programming

- Older adults attend health promotion programs as a way of maintaining their health, and providing a way of staying socially connected.
- Caregivers, neighbors, and friends can also play a vital role in keeping older adults connected by providing transportation to these programs, and having a conversation about what they learned in the health promotion program.

Health Promotion Programs (continued)

Why substance use/misuse health programs are important:

- Provide older adults with vital information;
- Help them to understand alcohol and medication problems;
- Teach older adults important coping mechanisms and;
- Include discussions on loneliness, social isolation, and being socially connected.

Get Connected: Linking Older Adults with Resources on Medication, Alcohol, and Mental Health



Get Connected Toolkit



The *Get Connected* Toolkit helps communities:

- Build health promotion programs
- Offer prevention messages and education
- Provide screening and referral for mental health problems and misuse of alcohol and medications

www.samhsa.gov

It Can Happen to Anyone Coping with Life Transitions video

<https://www.youtube.com/watch?v=FQan4-6amJk>

Get Connected Toolkit Goals (continued)

- Educate older adults
- Link older adults to resources
- Help provider staff understand substance use/misuse and mental health issues
- Increase staff competence and confidence

Get Connected Toolkit Goals (continued)

- Help organizations understand and assess how ready they are to deliver substance use prevention services
- Encourage peer support
- Provide additional tools and resources

Get Connected Toolkit - Session Topics

- **Session One:** It Can Happen to Anyone –
Coping with Life Transitions
- **Session Two:** Using Medication Wisely
- **Session Three:** Keeping a Healthy Outlook
on Life

Who Will Benefit From Using the *Get Connected* Toolkit

- Senior Centers
- Adult Day Health Services
- Nutrition Programs
- State and Local Agencies

Who Will Benefit From Using the *Get Connected* Toolkit (continued)

- Administration for Community Living's Area Agencies on Aging
- Health and social services providers
- Faith-based organizations
- Nursing homes

Additional Resources

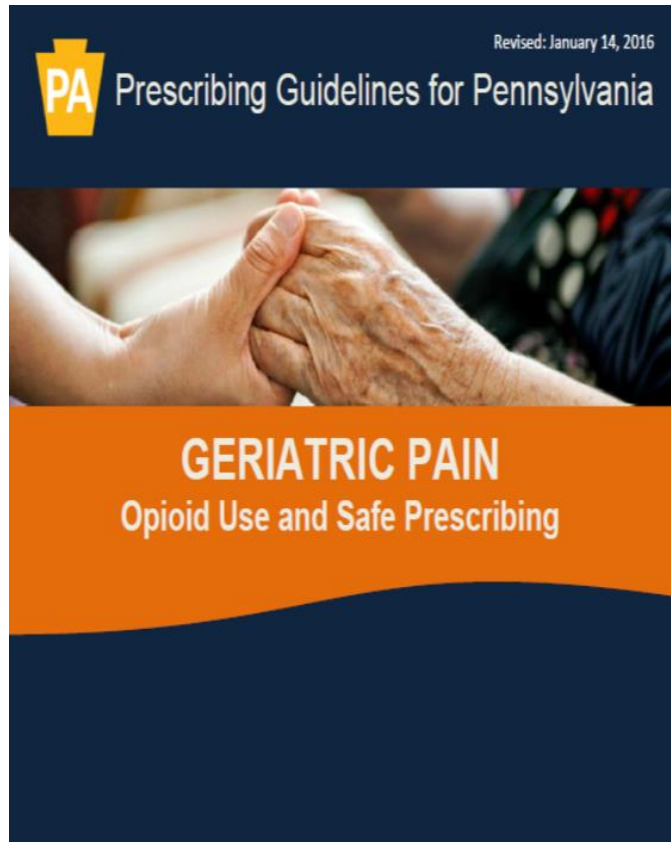


Safe Use of Medicines for Older Adults

This National Institutes of Health resource provides questions older adults can ask their doctors about the medications they are taking. These are a sample of the questions:

- What is the name of the medicine and why am I taking it?
- What medical condition does this medicine treat?
- How many times a day should I take it? At what time(s)?
- If the bottle says take “4 times a day,” does that mean 4 times in 24 hours or 4 times during the daytime?

State Example of Prescribing Guidelines



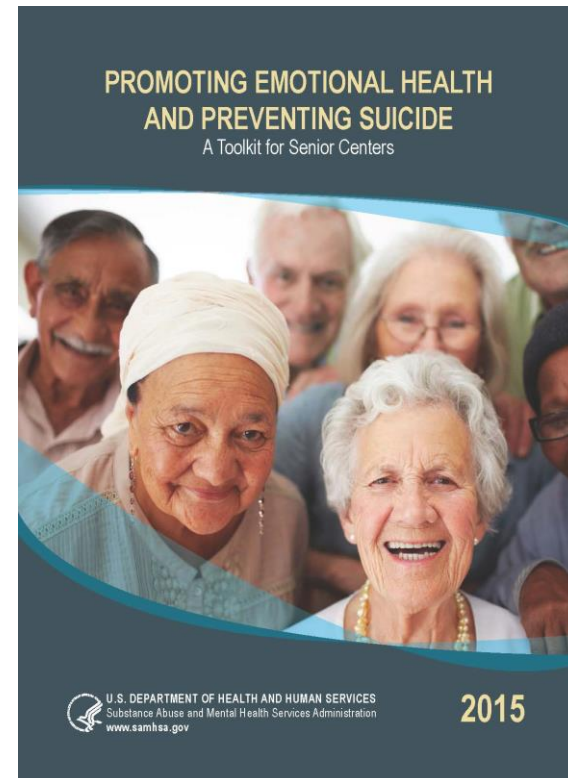
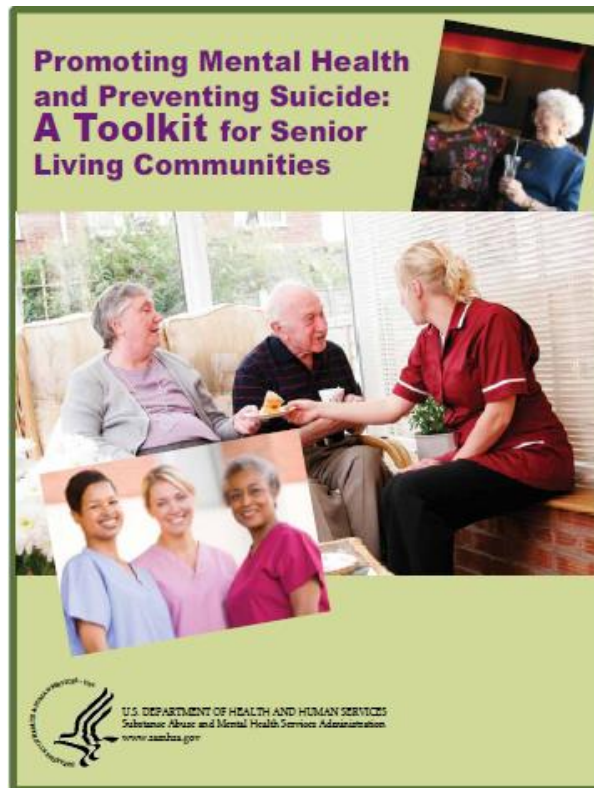
These guidelines are intended to help health care providers improve patient outcomes when providing opioid treatment, including potential adverse outcomes associated with the use of opioids to treat pain.

Additional Actions Communities Can Take Along with Using the *Get Connected* Toolkit

A screenshot of the SAMHSA Collection Site Locator website. The page has a blue header with the text "TAKE BACK DAY" and navigation links: "COLLECTION SITE LOCATOR", "PSA's", "RESULTS", "RESOURCES", and "TREATMENT INFORMATION". The main heading is "Collection Site Locator". Below it, the text says "Locate a Collection Site Near You" and "Enter zip code or County/City/State to see Collection Sites near you. Check back often; sites are added daily." There are input fields for "Zip Code", "County", "City", and "State". Below these is a "Search within ? mile radius:" section with radio buttons for "10", "25", "50", and "100+", and a "Submit" button. To the right of the form is a photograph of a person's hand dropping pills into a brown trash bag.

- Participate in National Prescription Drug Take Back Days.
- Share SAMHSA resources with your community.
- Educate members of your community about how to talk to their doctors or other prescribers about medications.

Additional SAMHSA Resources



Additional SAMHSA Resources (continued)

SAMHSA Opioid Overdose Prevention TOOLKIT

Opioid Use Disorder Facts
Five Essential Steps for First Responders
Information for Prescribers
Safety Advice for Patients & Family Members
Recovering From Opioid Overdose



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Rx Pain Medications

KNOW THE OPTIONS • GET THE FACTS

What Are the Risks of Opioid Pain Medications?

Side Effects and Interactions

Opioids can cause unpleasant side effects such as drowsiness, constipation, and slowed breathing. Some of these effects may be increased by:

- Taking them in combination with alcohol, sedatives, or other medications;
- Taking them in high doses or more often than prescribed; or
- Taking them in a different manner than directed, like crushing pills to snort or inject.¹

In 2015, an estimated 2 million people ages 12 or older had an opioid use disorder.²

Opioid Use Disorders and Overdose

After taking certain opioids regularly for a short time, some individuals could become physically dependent and experience uncomfortable withdrawal symptoms when stopping the medication. Misusing these medications increases the risk of:

- Substance use disorders, including addiction;
- Overdose; and
- Death.^{1,3}

PROTECT YOURSELF

Talk to your health care provider

ALWAYS:

1. Tell your health care provider about all other medications you are taking, including over-the-counter medications.
2. Ask if there are nonpharmacologic treatments that may be effective, like physical therapy or non-opioid medications.
3. Avoid alcohol and illicit drugs when taking prescription pain relievers.
4. Store your medication in a safe place and dispose of unused amounts appropriately.
5. Talk to your health care provider about how to stop taking opioids safely as soon as your treatment is over, and what to do if the medication is not adequately treating your pain.
6. Use opioids only as directed by your health care provider.
7. Refrain from sharing prescriptions with friends or family—it is dangerous and illegal.
8. Talk to your health care provider about what to expect from your medications—such as whether pain will be completely eliminated or decreased.

ADDITIONAL INFORMATION

For more information about overdose from opioids, visit www.cdc.gov/drugoverdose or <https://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/SMA16-4742>.

¹ National Institute on Drug Abuse. (2014). DrugFacts: Prescription and over-the-counter medications. Retrieved from <http://www.drugabuse.gov/publications/drugfacts/prescription-over-the-counter-medications>

² Center for Behavioral Health Statistics and Quality. (2016). Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health (NHIS Publication No. SMA-16-486, NSDUH Series 1-51). Retrieved from <http://www.samhsa.gov/data/2k16/nhs-drug-use-and-health-2015>

³ Substance Abuse and Mental Health Services Administration. (2014). Opioids. Retrieved from <http://www.samhsa.gov/overdoses>

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Additional SAMHSA Resources (continued)



Rx Pain Medications

KNOW THE OPTIONS • GET THE FACTS

Dangerous Drug Interactions

Please consult your health care provider before using prescription pain medications with other substances.

Did you know...

According to the CDC, about one-half of deaths from prescription pain medications involve the use of at least one other drug.¹




Mixing opioids with other substances can cause dangerous side effects, including breathing trouble, coma, and even permanent brain damage or death.^{1,2}

If you are taking prescription pain medications, do NOT take the following without first talking to your health care provider:

- Alcohol (including beer, wine, and liquor)
- Antihistamines (including allergy medications such as Benadryl[®])
- Cough medicine/cough syrup
- Barbiturates and benzodiazepines (often used as sleeping pills and sedatives, such as Ambien[®], Xanax[®], and Valium[®])
- General anesthetics (often used for surgery)



To find more information on safer, more effective pain management in the CDC Guideline for Prescribing Opioids for Chronic Pain, visit <http://www.cdc.gov/drugoverdose/prescribing/guideline.html>.

IN CASE OF EMERGENCY
 Call 9-1-1 or the National Poison Help number at 1-800-222-1222.





1. Centers for Disease Control and Prevention. (2015). Drugs most frequently involved in drug overdose deaths: United States, 2010-2014. National vital statistics report #61(1).

2. National Institute on Drug Abuse. (2014). Misuse of prescription drugs is a risk to use opioid drugs with other medications? Retrieved from <http://www.drugabuse.gov/publications/research-reports/prescription-drug-misuse/risks-to-use-opioid-drugs-with-other-medications>

3. National Institute on Drug Abuse. (2017). Drug Use: Prescription pain medications (Opioids). NIDA for Teens. Retrieved from <http://teens.drugabuse.gov/factsheets/pain-relief-what-you-should-know>

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Rx Pain Medications

KNOW THE OPTIONS • GET THE FACTS

Medications

me _____

Provider's Name _____

Provider's Phone _____

ications and supplements may be dangerous or even fatal when combined with opioid pain
 s. To prevent any dangerous side effects, it is important to keep a detailed list of all medications or
 s you are taking and to share this information with your health care provider.

ication	How much?	How often?	Reason?	Prescribed by:

NEED HELP?

1-800-662-HELP (4357) for 24-hour free and confidential treatment referral and information about mental and/or
 substance use disorders, prevention, and recovery in English and Spanish, or visit www.samhsa.gov/find-help.

For more information on safe pain management here: <http://www.cdc.gov/drugoverdose/prescribingpatients.html>

Additional SAMHSA Resources (continued)



<https://findtreatment.samhsa.gov/>



<https://suicidepreventionlifeline.org/>



<https://www.samhsa.gov/find-help/national-helpline>

Questions



SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

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www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD)