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Psychiatric Morbidities among Patients with Substance Use Disorders Receiving Residential Rehabilitation Treatment

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Introduction

Residential drug treatment and rehabilitation centres (DTRCs) serve as a major treatment modality for substance abuse in Hong Kong. However, axis I psychiatric co-occurring disorders (CODs) can hinder the treatment progress in DTRC programmes. Little is known about the prevalence of axis I CODs and their associated factors in this setting.

Objectives

The primary objective was to determine the prevalence of axis I CODs in adult substance abusers under treatment in DTRCs. The secondary objectives included evaluation of the pattern of substance-use disorders (SUDs), and study of factors associated with axis I CODs.

Methodology

A cross-sectional study design was used. The study population included adult substance abusers who resided in eleven DTRCs of four NGOs from July 2014 to June 2015. Axis I CODs, substance-use and alcohol-use disorders were ascertained by a semi-structured interview: the CB-SCID-I/P. Independent associated factors for axis I CODs were determined by univariate and multivariate analyses.

Result

Results: A total of 115 subjects were recruited. 27.0% and 69.6% had current and lifetime axis I CODs, respectively. Ketamine was the most common substance of dependency (71.3%). Alcohol-use disorders were also common (68.7%). Benzodiazepine dependence and first-time residential treatment were independently

associated with a higher rate of current axis I CODs, whereas history of psychiatric service use and higher drug involvement were independently associated with a higher rate of lifetime axis I CODs.

Conclusion: Axis I CODs are common in adult substance abusers receiving treatment in DTRCs. An unmet need for psychiatric support is a possible problem in this population. Axis I CODs are associated with a number of factors; some of these factors might help NGO staff screen for underlying psychiatric problems. A prospective study is indicated to validate the above findings and study the long-term outcomes of substance abusers with CODs.