City Vision College (Course 414): Help for Alcoholics

Chapter 6: Dual Diagnosis (pages 104 – 158.)

1. True or false. Three fourths of chemically dependent patients have psychiatric diagnoses in addition to chemical dependency.

2. True or false. Dual diagnosis patients need different treatment.

3. Generally, how long does it take to differentiate between a substance-induced disorder and a psychiatric disorder in the patient who is dually diagnosed?

4. What is the difference between a primary and secondary diagnosis?

5. What affective disorders are most commonly seen in alcoholic patients?

6. What is the best way to differentiate substance-induced, transient psychiatric symptoms from psychiatric disorders that warrant independent treatment?
7. What five components should be included in the Mental Health Assessment?

How to Develop the Dual Diagnosis Treatment Plan

8. What do you do once the patient is diagnosed with the secondary problem?

Note:
It is beyond the scope of this book to cover all of the psychopathology you will experience when treating alcohol problems, but we’ll discuss what you will see most often. The NET Training Institute offers in-depth study regarding treating the dually diagnosed patient by offering two 15-hour self study courses called *Addiction and Mental Illness –Parts 1 & 2*. Please contact the NET Training Institute for further information.

*Diagnostic and Statistical Manual of Mental Disorder,*
*Fourth Edition, Text Revision (DSM-IV-TR)*

Diagnosing mental health and substance abuse disorders is both a science and an art. There are 300+ different diagnosable disorders in the DSM so many disorders have signs and symptoms in common with each other. A DSM diagnosis is made based upon the information that you gathered during the biopsychosocial interview and upon your knowledge of mental health and substance abuse disorders. As you become more experienced and more skilled, assigning a diagnostic code will become easier. *Please note that only trained and licensed professional counselors are able to diagnose an individual with a mental health or substance use disorder.*
The Depressed Patient

9. True or false. The most common secondary diagnosis related to chemical dependency is depression.

10. What two psychiatric disorders do most chemically dependent individuals come into treatment with?

11. When will you most likely discover depression in the patient?

12. What is the best way to measure the severity of depression suggested by Perkinson?

13. What is anhedonia?

14. How is depression usually treated?
15. True or false. The biology of depression is centered on a physiological problem in the brain.

16. What are the two most-used psychological treatments for depression?

17. What does behavior therapy for depression center on?

18. What type of activities should the depressed patient increase in his or her life and why?

19. True or false. Depressed people have a difficult time doing anything, and they need encouragement to set goals.

20. What happens when patients try new, fun behaviors?

21. What is the purpose of cognitive therapy?
22. Read the example of a Cognitive Therapy Session on pages 112 through 114 of your text. What is your reaction to this interview? Do you think cognitive therapy would be effective for your patients? Why or why not?

23. What type of thoughts do depressed patients usually have?

24. True or false. As patients bring in their dysfunctional thoughts, you will begin to see patterns in their thinking.

25. What is Interpersonal Therapy for depression?

26. True or false. Patients in an abnormal grief reaction need to work through the grieving process.

27. Generally, how long does it take for normal grief to lift without treatment?
28. Normal bereavement reactions include what states?

29. What must a person do who has unresolved grief?

30. When does treatment begin for patients who are involved in Interpersonal Disputes?

31. What 12-step support group helps the spouse of an alcoholic person?

32. What 12-step support group helps the teenage child of an alcoholic person?

33. What is the average rate of suicide among alcoholics?

34. The incident of suicide is about _________ times higher in drug abusers.

35. The patient who is a suicidal threat moves through what three phases of increasing lethality?
36. What is your job as a therapist with a patient who is suicidal?

37. True or false. Depression is treatable but it is not curable.
38. Patients who have suicidal ideation, an active plan and can carry out any part of the plan should be transported to a ________________.

39. When does the patient’s suicidal ideation subside?

40. True or false. Many alcoholics treat their pain by drinking.
41. What emotion destroys more alcoholics than anything else?

42. True or false. Only a few alcoholics have unresolved anger issues.
43. Generally, where do anger and resentments usually come from?

44. What other emotions generally underlie anger?

45. When does Perkinson state that anger exists?
46. Patients do not have to act _______________ to show that they are angry.

47. What skill should you teach your patients to use instead of aggression?

48. Patients with anger problem must learn how to ________________.

49. What is an anger diary? What do you foresee are the benefits from keeping an anger diary?

50. What is the worst thing you can do as a therapist when dealing with an angry patient?

51. Why does Perkinson state that there is a delicate balance between duty to warn and confidentiality when dealing with a homicidal patient?

52. Personality is composed of what two basic parts?

53. _____________ is the general level of the central nervous system tone.
54. _____________ is what we learn about what to do and how to behave.
55. _____________ is the enduring way a person thinks, feels, and acts.
56. True or false. Personality is stable, well learned, and resistant to change.
57. True or false. A trait is a long-standing tendency to react in a particular way to a set of circumstances.

58. True or false. A trait changes on a continuous basis.

59. True or false. There is a higher incident of antisocial personality disorder among substance abusers.

60. At what age do antisocial patients generally begin to get into trouble with society?

61. Summarize the traits of an antisocial personality disorder person as described on pages 129 through 130 of your text.

62. What should happen when antisocial patients take advantage of someone in treatment? How should you do that?

63. What stage of moral development is the antisocial person usually stuck?

64. Cognitive therapy can be helpful with these patients. What must they do first?

65. True or false. The family of an antisocial patient is usually in chronic distress.

66. Antisocial patients are not used to being __________________.
67. How does the borderline patient generally feel when they sense a supportive relationship with another person?

68. Summarize the traits of a borderline personality disordered person as described on pages 133 through 135 of your text.

69. What are two family issues that may be important with borderline patients?

70. Anxiety is a vague, generalized ________________.

71. Anxious patients are ________________, but they are not sure why.

72. True or false. Many alcoholics have significant social anxiety or social phobia that makes it more uncomfortable for them to attend to recovery groups.

73. When patients attempt to reduce their anxious feelings, what type of drugs do they generally abuse?
74. What are some somatic complaints that accompany anxiety?

75. What type of drug is contraindicated when treating chemically dependent persons for anxiety? Why?

76. The psychological part of anxiety disorders centers around what?

77. What are the four questions you need to know about the anxious patient as listed on page 141 of your text?

78. True or false. Anxiety disorders are character disorders.

79. What type of technique should you teach anxious patients to do? Why?
80. What cognitive distortions do anxious patients often make?

81. True or false. Attention deficit disorder and attention deficit/hyperactive disorders are some of the most common co-occurring disorders in alcoholics.

82. Perkinson suggests that treatment for alcoholic patients with ADHD includes lowering environmental stimulation. Why you think that is so?

83. Read through the Attention Strategies listed on pages 145 and 146 of your text. The strategies will help in the remediation of ADHD symptoms. Which ones were you aware of and which strategies are new for you?

84. What is believed to be at the core of an Impulse Control Disorder?
85. What two Impulse Control Disorders are most commonly seen when treating the alcoholic patient?

86. What are the three minimum things a patient must do when entering treatment for gambling?

87. Psychotic patients mistakenly evaluate reality persistently. Psychosis is characterized by hallucinations and delusions. What are hallucinations? What are delusions?