

Philosophy, Ethics and Spirituality of Substance Use Disorders and Treatment



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Objectives

- Understand different models of addiction, including the biological basis of addiction, and different treatment modalities
- Discuss the role spirituality has played in addiction treatment.
- Discuss goals of treatment and harm reduction models

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Disclosures

Neither presenter has any conflict of interest to declare.

Outline

Addiction Primer

Spirituality in Addiction

Goals of Treatment

Moral and ethical conflicts

Case discussions

Questions

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Addiction Primer

- Tolerance
- Dependence
- Addiction

Evolving Models of Addiction

- Moral Failing
- Biopsychosocial model
- Stop-Go model

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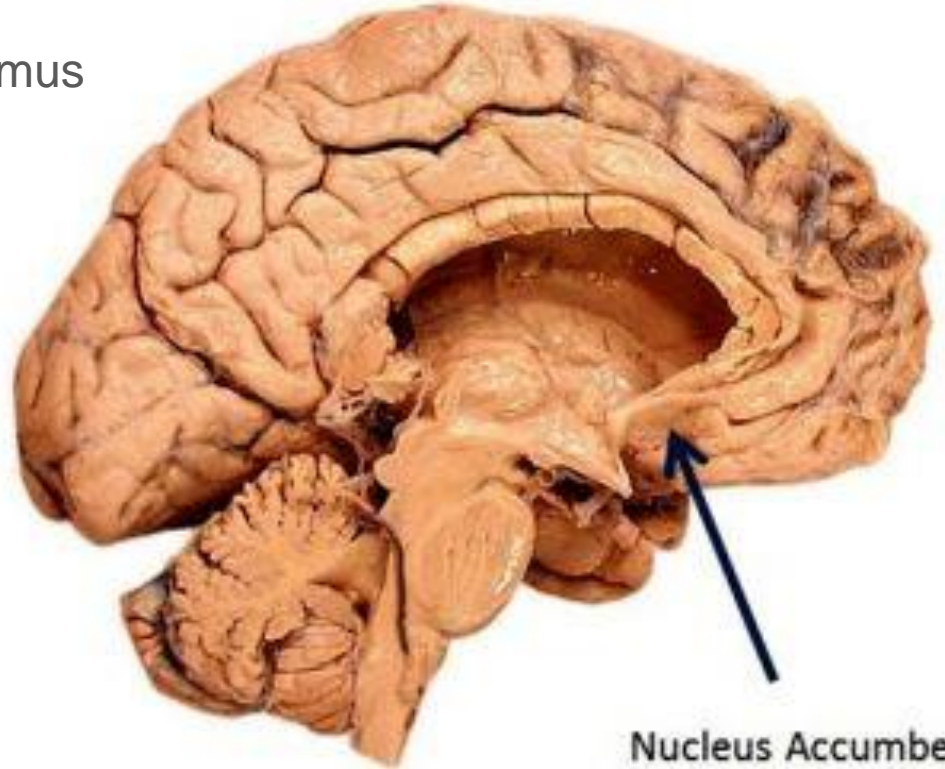
GO

- Nucleus Accumbens – Hypothalamus
- Reward Center
- Dopamine
- Baseline = 1x
- Food = 1.5x
- Sex = 2.0x
- Alcohol = 2.0x
- Morphine = 2.0x
- Nicotine = 2.25x
- Cocaine = 3.25x

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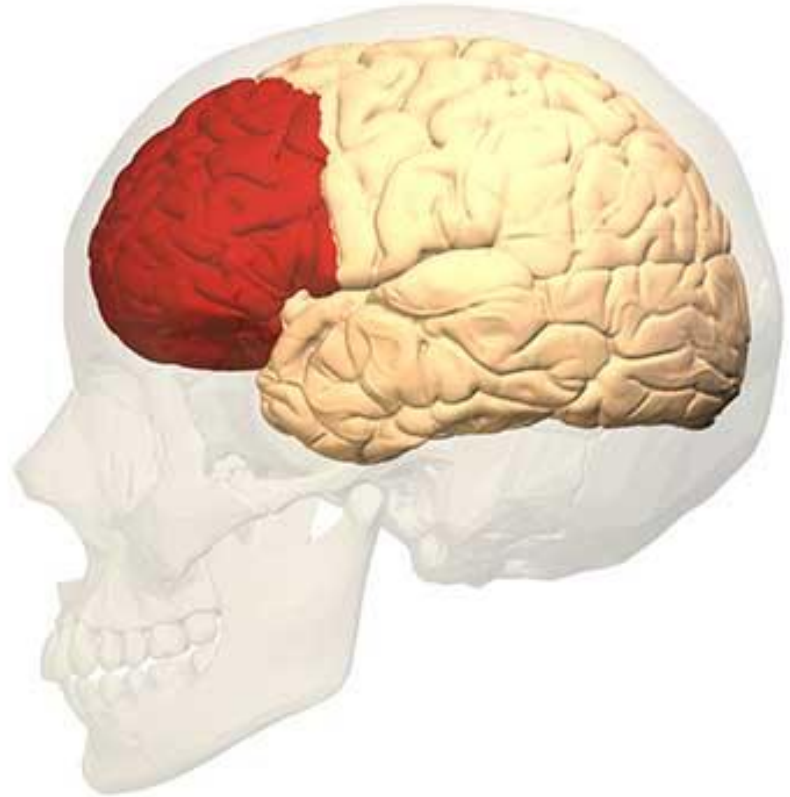
- Manage with Medications
- “Ease up on the gas”



Nucleus Accumbens

STOP

- Prefrontal Cortex
- Thinking/Smart Person Part
- Underdeveloped in Teens
- Build up with Counseling
- “Apply the brake”



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Spirituality and Addiction Treatment

12 Step Recovery Programs (AA, NA)

Cognitive Behavioural Therapy

Mindfulness-based Relapse Prevention

Religion, Buddhism

Meditation, Yoga for Recovery

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Spirituality and Addiction

Medicine : 4 guiding principles in medical ethics

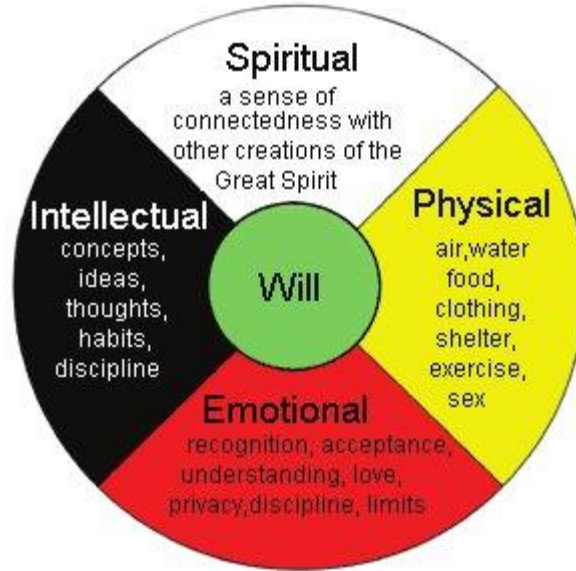
1. Respect for Autonomy
2. Beneficence
3. Non-maleficence
4. Justice

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Goals of Treatment



https://www.researchgate.net/figure/Medicine-Wheel_fig1_238741742

Goals of Treatment

- Reduce withdrawal
- Reduce cravings
- Blunt the effects of opioids

If we achieve these goals then...

- Decrease opioid use
- Decrease overdose deaths
- Decrease infections

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Goals of Treatment

“We do not want people to feel sorry for her because she struggled with addiction and succumbed to it. We do not want the astonishing light that was Maggie to be overshadowed by the darkness of this tragedy. She was not her addiction. She was not her mental illness.”

“It is impossible to capture a person in an obituary, and especially someone whose adult life was largely defined by drug addiction. To some, Maddie was just a junkie — when they saw her addiction, they stopped seeing her. And what a loss for them.”

“Chris's drug addiction may have ended his life, but it did not define it. Chris was a kind and generous soul who loved people. He was happiest when he made others happy.”

Case Study: Death Penalty

Poppy is a 26 year old mother of two, who works part-time at Walmart. She has been stable in treatment for opioid use disorder for 1 year. Since she has no health insurance she has been paying out of pocket for buprenorphine-assisted treatment. The drug possession charges that initially drove her into treatment have finally made it through the courts. She is sentenced to 8 months in jail.

Should she receive her medication while in jail?

Case Study: Death Penalty

Risk of overdose death on release from jail is 40 times more likely to overdose on opioids than the general population.

Treatment with methadone or buprenorphine cuts that number by 61 percent decrease in post-incarceration deaths. 12 percent reduction in overdose deaths in the state's general population

<https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2671411>

<https://ajph.aphapublications.org/doi/10.2105/AJPH.2018.304514>

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Case Study: Is it safe?

Drew and Mark have both struggled with addiction for years, they both live in a local shelter. Drew used his connection to buy heroin today and they decide to use intravenously in Mark's car. Mark has a needle that he has used before and they decide to share. They both nod off and when Drew wakes up Mark is not breathing.

How could this have been prevented?

Is Drew responsible for mark's death?

Case Study: Is it safe?

Needle exchange at MaineGeneral.

Safe Consumption Sites.

FACING MY ADDICTION > Posted September 4, 2018

INCREASE FONT SIZE **A**⁺

If I die from an overdose, please don't prosecute my dealer

Our community views heroin dealers as predators, willingly poisoning and killing others without any regard for human life. But they're not usually the ones closest to those experiencing a fatal overdose, and who often become the targets of criminal charges.

<https://www.mainepublic.org/post/bystanders-fatal-overdoses-increasingly-becoming-criminal-defendants>

<https://www.pressherald.com/2018/09/04/if-i-die-from-an-overdose-please-dont-prosecute-my-dealer/>

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Case Study: Last Call

Allen is a 50 year old man who is chronically homeless. His schizophrenia has never been consistently treated. He drinks to help manage the anxiety from his mental illness as well as from his social situation. He drinks ~ 2L of Coffee Brandy per day (~45 drinks). He is a “frequent flyer” at the emergency room and has spent multiple nights at the police station.

How can we as a community help Allen?

Case Study: Last Call

Detoxification and alcohol abstinence medications.

Housing first programs.

Managed alcohol programs.

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