# Psychiatric Correlates of Alcohol and Tobacco Use Disorders in U.S. Adults Aged 65 Years and Older: Results From the 2001–2002 National Epidemiologic Survey of Alcohol and Related Conditions

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Objective: To examine associations of alcohol and tobacco use disorders and psychiatric conditions among older U.S. adults. Methods: Sample was individuals aged at least 65 years (N = 8,205) who participated in the 2001–2002 National Epidemiologic Survey on Alcohol and Related Conditions. Measurements included lifetime and past 12-month Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition alcohol use disorders (AUDs), tobacco use disorders (TUDs), and psychiatric conditions. Results: Among older adults, prevalence of lifetime and past 12-month AUDs were 16.1% and 1.5% and lifetime and past 12-month TUDs were 8.7% and 4.0%, respectively. Lifetime TUD was associated with increased odds of both lifetime (odds ratio [OR]: 4.17; 95% confidence interval [CI]: 3.30-5.26) and past 12-month (OR: 2.52; 95% CI: 1.50-4.24) AUDs, and lifetime AUD was associated with increased odds of both lifetime (OR: 4.13; 95% CI: 3.28–5.210 and past 12-month (OR: 3.51; 95% CI: 2.47-4.96) TUDs. Any lifetime mood, anxiety, or personality disorder among older adults was associated with increased odds of lifetime AUD and TUD, any lifetime mood disorder was associated with increased odds of past 12-month AUD and TUD, and any personality disorder was associated with past 12-month TUD. Conclusion: There is a strong association between AUD and TUD among older U.S. adults as well as associations between AUD and TUD with mood, anxiety, and personality disorders. Understanding the psychiatric conditions associated with AUDs and TUDs, especially past 12-month use disorders involving alcohol or tobacco, will enable healthcare providers to target screening and be more aware of symptoms and signs of potential AUDs and TUDs among those at higher risk. (Am J Geriatr Psychiatry 2013; ■:■-■)

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### Alcohol and Tobacco Use Disorders in Older U.S. Adults

**Key Words:** Alcohol use disorders, tobacco use disorders, psychiatric correlates, older adults

### INTRODUCTION

Older adults are a rapidly growing segment of the U.S. population and are projected to increase from 12.4% to 19.6% of the population by 2030. Older adults have lower rates of both substance use and substance use disorders compared with younger adults.<sup>2–6</sup> However, this discrepancy may partly be explained by the increased mortality among individuals who have substance use disorders compared with those without such disorders, 7,8 and by underreporting or under-detection of substance use disorders among older adults compared with the general adult population. 9–11 Also, substance use disorders may be associated with greater health risks among older adults because of such factors as age-related physiologic changes, increased brain sensitivity to alcohol and drugs, more comorbid medical conditions, and increased use of medications that might adversely interact with substance use.3,12-14 When considering both amount of alcohol use and existing comorbidities in determining at-risk drinking, Moore et al.<sup>13</sup> found that approximately 10% of older adults could be classified as at-risk drinkers and such drinking was associated with increased risk for mortality. Moreover, the higher rates of substance use among the Baby Boomer cohort (individuals born between 1946 and 1964) raises concern for a potential rise in the number of substance use disorders among older adults in the near future. 15-17

Alcohol use disorders (AUDs) and tobacco use disorders (TUDs) co-occur in both the general and the older adult population. This combination may be especially harmful because the combined health risks of concurrent AUDs and TUDs have been found to be greater than the sum of the independent risks. Studies have found that having an AUD was associated with both lifetime and past year tobacco use, and alcohol dependence increased risk of nicotine dependence by more than 11 times in men and 16 times in women. Compared with adults aged 50 years and older who used alcohol, those with an AUD had increased odds of also having nicotine dependence. Tobacco use in alcohol-dependent

younger adults has been associated with greater severity of alcohol dependence, and smokers consumed more alcohol and had higher risks for AUD compared with never-smokers. Adult smokers who engaged in frequent binge drinking (five or more drinks per occasion) reduced their odds of success in smoking cessation by 42%, and the negative effect of AUD on the likelihood of successful smoking cessation appeared to increase with age. 22

In the general population, AUDs and TUDs are also associated with other substance use disorders and psychiatric conditions. Alcohol abuse and dependence are strongly associated with drug use, nicotine dependence, and multiple psychiatric disorders. Studies have found that adults with major depressive disorder were more likely to have both alcohol and drug dependence, and a history of prior *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition* (DSM-IV) alcohol dependence increased the odds of having past 12-month depression by more than four times. This association with alcohol dependence and major depression has also been observed in adults aged 50 years and older.

To better understand the prevalence and psychiatric correlates of lifetime and past 12-month AUDs and TUDs among adults 65 years and older, this study examined data among older adults in the 2001–2002 National Institute on Alcohol Abuse and Alcoholism National Epidemiologic Survey on Alcohol and Related Conditions (NESARC).<sup>29</sup> The objective of this study is to advance prior research by conducting focused analyses of the psychiatric correlates of AUDs and TUDs in older adults and to conduct these analyses by gender and age using a national survey that is representative of the U.S. older adult population.

### **METHODS**

### **Study Sample**

The sample included 8,205 individuals aged 65 years and older from the National Institute on Alcohol Abuse and Alcoholism—sponsored

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