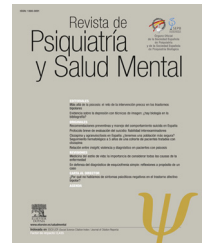




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ORIGINAL ARTICLE

Cocaine abuse or dependency and other psychiatric disorders. Madrid study on dual pathology[☆]

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KEYWORDS

Cocaine abuse;
Cocaine dependence;
Dual diagnosis;
Personality disorder

Abstract

Objectives: The main objective of this study was to analyse the cocaine addict subgroup from the Madrid study of prevalence of dual disorders in community mental health and substance misuse services.

Methods: The sample consisted of 837 outpatients from Madrid, Spain. We compared 488 subjects who had a lifetime diagnosis of cocaine abuse or dependence, and 222 subjects who did not have a cocaine substance use disorder. We used the Mini International Neuropsychiatric Interview to evaluate Axis I mental disorders, and the Personality Disorder Questionnaire to evaluate personality disorders.

Results: Almost three-quarters (73.4%) of cocaine addicts had a current dual disorder. Most prevalent were mood and anxiety disorders. Almost half (49.6%) had a personality disorder. Most of them (94.9%) had other substance use disorders. Cocaine addicts did not have higher prevalence rates of dual pathology than addicts with no cocaine abuse or dependence. Cocaine addicts were associated to a diagnosis of antisocial personality disorder, agoraphobia, and post-traumatic stress disorder, and they had an early age of onset of alcohol and cannabis use.

Conclusions: Dual pathology is not higher in cocaine addicts in treatment than in addicts who do not use cocaine, however cocaine addicts started other drugs earlier, and were associated with specific mental disorders.

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PALABRAS CLAVE

Abuso de cocaína;
Dependencia
de cocaína;
Diagnóstico dual;
Trastornos de
personalidad

Abuso o dependencia a la cocaína y otros trastornos psiquiátricos. Estudio Madrid sobre la prevalencia de la patología dual

Resumen

Objetivos: El objetivo de este estudio es analizar el subgrupo de adictos (criterios de abuso o dependencia) a la cocaína procedentes del estudio Madrid sobre prevalencia de diagnóstico dual en varios dispositivos asistenciales.

Material y métodos: La muestra está constituida por 837 sujetos en tratamiento en la red de salud mental o en la red de drogas de la Comunidad de Madrid, de los cuáles 488 tenían un diagnóstico de abuso o dependencia de cocaína a lo largo de la vida y 222 tenían otros trastornos por uso de sustancias distintos de la cocaína. Se usó la entrevista MINI (Mini Internacional Neuropsychiatric Interview) para el diagnóstico de los trastornos mentales del eje I y el cuestionario PDQ (Personality Disorder Questionnaire) para la valoración de los trastornos de personalidad. **Resultados:** Se consideró que un 73.4% de los adictos a la cocaína tenían un diagnóstico dual en el momento actual, destacando la prevalencia de los trastornos del estado de ánimo y de ansiedad. El 49.6% de los adictos a la cocaína tenían un diagnóstico de trastorno de la personalidad. Un 94.9% de estos adictos a la cocaína tenían otros diagnósticos asociados de trastornos por uso de sustancias. El subgrupo de adictos a la cocaína no tenía mayor prevalencia de diagnóstico dual que el resto de los adictos. El subgrupo de adictos con abuso o dependencia de cocaína tenían mayor prevalencia de trastorno antisocial de la personalidad, agorafobia y trastorno por estrés posttraumático que los adictos no consumidores de cocaína y habían iniciado de forma más precoz el consumo de alcohol y cannabis.

Conclusiones: La presencia de diagnóstico dual no es más elevada en adictos a la cocaína en tratamiento que en otros adictos, aunque han iniciado más precozmente otros consumos y se asocia más que el resto de adictos a ciertos trastornos mentales específicos.

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Introduction

Dual diagnosis is defined as the presence of a substance use disorder (SUD) and a mental disorder in an individual, within a specific period.¹ Such comorbidity is normal, as indicated in important epidemiological studies in the general population,^{2,3} and likewise in clinical samples.⁴ Comorbidity is associated with greater use of health services, distinct phenotypes, increased severity of the condition, greater functional disability and worse progression.^{4,5}

We have little data on the prevalence of dual diagnosis in a Spanish population and on its distribution among the 2 main healthcare networks that provide aid, the drug network and that of mental health. Knowledge about the distribution of dual diagnosis and the characteristics of these subjects can help to optimise health resources.

Cocaine use is associated with a wide variety of mental disorders. Multiple studies in the general and clinical populations indicate this.^{3,4,6–17} The most prevalent mental disorders are depressive, anxiety and personality disorders.^{11,16,17}

In a pilot study on the prevalence of dual diagnosis carried out by the Spanish Society of Dual Pathology (SEPD in Spanish), an association was seen between alcohol dependence and the presence of other Axis I mental disorders, especially with mood disorders, and between cocaine dependence and personality disorders.¹⁸ This pilot study served to design the study on the prevalence of dual diagnosis with a wider sample. The main objective was to quantify the prevalence of the various types of affectations included within the “dual diagnosis” complex (mental disorder and substance use disorder) in the 2 networks involved in Madrid. The design

and some overall results of the study have been published before.¹⁹ In this article we present the data concerning patients with criteria of abuse or dependence on cocaine.

Materials and methods**Sample**

The patients were selected consecutively by their own therapists in the drug treatment centres (CAID and CAD in Spanish: drug dependency care centres run by the Autonomous Community of Madrid and by the Madrid City Council, respectively) and in the mental health centres (MHC) in the Comunidad of Madrid. Consequently, we were able to include both first-time patients and follow-up patients. There were interviewers (psychiatrists, psychologists or general practitioners having extensive experience with addiction) at 64 drug treatment centres run by the Community of Madrid and at 17 MHC. All the interviewers received training in the administration of the structured interview. The participants signed an informed consent. The study was approved by the Committee for Ethical Research at the Hospital Gregorio Marañón in Madrid. The percentage of participation was 87.2%.

Methods

A data collection notebook was prepared to record the data from the pilot study mentioned previously on the most informative variables and those of greatest clinical interest for analysis. To establish the presence of mental disorders, the structured Mini International Neuropsychiatric Interview

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