

Perspective

Research shows drug, alcohol treatment

By Philip F. Belleville

Should group homes be located in South Bay neighborhoods? Without focusing on any one situation, any thoughtful response to that question must consider the qualifications of the personnel overseeing the homes as well as whether their methods of treating alcohol and other drug abuse have been effective.

To understand why treatment by qualified professionals using accepted methods is effective, one must first note the scientific research into alcohol and other drug addiction, which has greatly improved our understanding of these disorders.

Addiction, defined by Dr. Alan Leshner, director of the National Institute on Drug Abuse (NIDA), is a chronic brain disorder that alters a person's brain cell physiology. In his words, "The addicted brain is distinctly different from the nonaddicted brain, as manifested by changes in brain metabolic activity, receptor availability, gene expression and responsiveness to environmental cues. . . . Addiction is tied to changes in brain structure and function. . . ."

Prolonged use of drugs brings about the symptoms of persistent drug and alcohol seeking and use, even if that search and use causes other detrimental health and social consequences. Like chronic disease therapy, treatment for alcoholism and drug addiction can be most properly compared to treatments for diseases like hypertension, diabetes and asthma. Much like treatments for diabetes and hypertension, addiction treatment requires compliance with a treatment protocol that includes major behavioral and lifestyle changes, and often, medication.

In the past 30 years, the effectiveness of treatment, when provided by certified and licensed professional counselors, has been proved by scientific re-

search and clinical studies.

A General Accounting Office study released in March offers a very strong analysis of treatment's effectiveness. The GAO's review states that even conservative estimates of treatment effectiveness, substantiated by urine tests, prove that 71.3 percent of cocaine/crack users and 83.3 percent of opiate users in a treatment test sample had not used drugs in the month prior to the follow up screening.

As the study states, "Consistent evidence shows drug treatment is beneficial."

NIDA's release this year of the Drug Abuse Treatment Outcome Study strongly corroborates findings that treatment is effective. Methadone treatment reduced heroin use by 70 percent by the conclusion of the three-year study. Treatment also resulted in 50 percent reductions in weekly or more frequent cocaine use at a one-year follow-up interview.

Last year's National Treatment Improvement Evaluation Study (NTIES) found that patients' use of their primary drug declined by 48.2 percent. NTIES also found that treatment reduced crack use by 50.8 percent and cocaine use by 54.9 percent. In addition, treatment reduced marijuana use by 42 percent to 57 percent, depending upon the other drugs of abuse for which the patient was also being treated.

NIDA's 1988 study, The Effectiveness of Drug Abuse Treatment, found that, five years after beginning methadone treatment, the number of former opiate abusers who were no longer using had grown to 92 percent of the original test group. The study also found that the number of daily opiate users in therapeutic community treatment was reduced from 52 percent to 29 percent after 90 days in treatment.

Of 10,000 treatment admissions in the Treatment Outcome Prospective Study (TOPS), in 10 cities in

1979, 1980, 1981, abstinence rates for drugs other than marijuana ranged from 40 percent to 50 percent. On alcoholism, the TOPS study concluded:

■ During treatment, the proportion of clients reporting alcohol problems decreased by 46 percent, particularly among residential clients.

■ More than 50 percent of the clients showed substantial reductions in alcohol use during treatment compared to use prior to treatment.

The National Institute of Health's Drug Abuse Reporting Program (DARP), conducted from 1968 to 1989, included 44,000 clients entering 50 treatment programs nationwide. Subjects of the original test group were studied six and 12 years after their initial interviews. The study found that:

■ Daily drug and alcohol use dropped 63 percent in the first year of treatment and continued to decline throughout the rest of the testing years. (Testing years included years 1, 2, 3, 6 and 12.)

■ The treatment needed for substance relapse dropped as low as 31 percent by the 12th year.

■ Treatment reduced the importance of "sensational seeking," one of the main reasons for drug use, from 87 percent to 20 percent.

Treatment also causes positive trends in many other aspects of the lives of the patients as well as the community at large. Both DARP and TOPS concluded that treatment reduced the chances of relapse, reduced criminal activity and, according to TOPS, improved productivity.

The NTIES study found treatment brought about the following improvements among treatment clients:

■ A decrease in the crime rate from 64 percent to 14 percent.

■ A 50 percent drop in risky sexual behaviors.

■ A 53 percent reduction in physical and mental health hospital visits.

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Treatment is also cost-effective, reducing other medical care utilization and health costs as well as federal government expenditures on the public health/entitlement system. One study, Socioeconomic Evaluations of Addictions Treatment, conducted by Rutgers University, found that:

- On the average, untreated alcoholics incur general health-care costs at least 100 percent higher than those of non-alcoholics.

- After addiction treatment, days lost to illness, sickness claims and hospitalization dropped by half.

Another study carried out by the California Department of Alcohol and Drug Programs, The California Drug and Alcohol Treatment Assessment (CALDATA), reported that treatment brought about:

- A 17 percent increase in health status and significant decreases in health-care use after treatment.

- Overdose hospitalization reductions (50 percent).

- Emergency room visit reductions of 38 percent.

Alcoholism and drug addiction are, undeniably, treatable diseases. True, successful addiction recovery requires the client to be accountable and comply with a treatment protocol. Relapse is sometimes a part of the recovery process.

In fact, treatment of alcoholism and drug addiction compares favorably with that of other chronic recurring diseases. Fewer than 50 percent of sufferers from insulin-dependent diabetes are compliant with their medication regimen and only 30 percent are compliant with diet and foot care.

At most, only 30 percent of people with medication-dependent hypertension or adult asthma are compliant with their treatment protocols. By comparison, alcoholism and drug addiction treatment patients have compliance rates of at least 40 percent.

Philip F. Belleville is a South Bay resident and regional vice president of the National Association of Alcoholism