

Dual Diagnosis

Mental Illness and Substance Misuse

When someone with a mental health condition also misuses drugs, they are said to have a 'dual diagnosis'. People with a dual diagnosis often have poorer treatment outcomes than people who have a mental health condition but who do not misuse substances and they may need additional support.



KEY POINTS

- Dual diagnosis is a where someone has a combination of mental health problems and alcohol or drug problems ('substance misuse')
- The reason why someone may develop these problems together depends on the individual, but in many cases people use drugs or alcohol to 'self-medicate' in order to make symptoms of mental illness and side-effects of medication easier to handle
- Substance misuse occurs when use of alcohol or other drugs has a negative impact on someone's functioning on a long-term basis
- It's important that mental health and substance misuse services work together to make sure people with a dual diagnosis get adequate treatment and support.
- When someone has substance misuse problems on top of a mental health problem there can be increased risks, such as involvement with the criminal justice system
- In some circumstances, assertive outreach services should be considered for someone with a dual diagnosis. Assertive outreach services take a more proactive approach to treatment and support in the community.

This factsheet covers:

1. [What is dual diagnosis?](#)
2. [What is 'substance misuse' and what are the signs?](#)
3. [What are the possible effects of substance misuse?](#)
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1. What is dual diagnosis?

The term 'dual diagnosis' is used to describe the situation where a person has been diagnosed with both a mental health condition and a problem with drugs (alcohol is considered to be a drug). A person is still said to have a dual diagnosis even if they have multiple mental health conditions or problems with multiple drugs. The term includes people who are addicted to drugs and those who misuse drugs but are not addicted.¹

It is estimated that up to half of people diagnosed with a mental health condition also misuse substances.² People with a dual diagnosis are likely to have problems with their physical health, social functioning, money management, housing and are more likely to be in contact with the criminal justice system.³ The severity of a person's mental health condition as well as the extent of their drug misuse will determine how complex their needs are.⁴

How does someone find out that they have a dual diagnosis?

The diagnosis of a mental health condition is made by a doctor. It is important that during an assessment the doctor considers the potential effect of substance misuse on a patient's condition.⁵ Drugs can have effects that are similar to the symptoms of mental illness, and so it can be difficult for a doctor to distinguish which problems are due to the condition and which are due to substance misuse. Full assessment is therefore important to ensure that a patient is not misdiagnosed.⁶

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2. What is 'substance misuse' and what are the signs?

Substance misuse is defined as intoxication by, or regular excessive consumption of and/or dependence on substances that have an effect on the brain, which leads to social, psychological, physical or legal problems.⁷ The most commonly misused drug is alcohol.⁸

*Signs of substance misuse can include:*⁹

- Needing to increase the amount taken to get the same effect
- Feelings of dependency or fear of stopping
- Withdrawal symptoms if someone stops taking the drug for a short time.
- Sudden mood changes
- Negative or changed outlook on life
- Loss of motivation
- Poor performance in work or education

- Problems with relationships
- Borrowing or stealing money from friends and family
- Being secretive.

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3. What are the possible effects of substance misuse?

Substances can be divided into broad groups with a range of effects.¹⁰

Stimulants (uppers) generally stimulate and speed up the central nervous system and cause people to feel more alert and awake. Stimulants include:

Cocaine, amphetamines and ecstasy.

Depressants (downers) slow the central nervous system. They might make someone sleepy, reduce heart rate, and reduce pain. Depressants include:

Alcohol and cannabis. Cannabis can also cause hallucinations.

Sedative-Hypnotics ('anxiolytic', or anti-anxiety, drugs) are available medically on prescription but can be abused by people for their relaxing and calming effect. Addiction, withdrawal and overdose can occur. Sedative hypnotics include:

Benzodiazepines like diazepam (valium) and temazepam.

Opiates and opioids can cause euphoria and provide relief from pain. There is high risk of dependence and withdrawal symptoms. Opiates include:

Heroin and morphine.

Volatile Substances can act as stimulants, but they are generally depressants. They include:

Solvents like glue, aerosols and lighter gas fuel.

Hallucinogens can cause intensified sensations, paranoia, delusions, hallucinations and impaired judgement and reasoning. They include:

Ecstasy and LSD.

Generally speaking, drug misuse can be detrimental to people for three main reasons:

- Someone could become addicted
- The drug could cause someone physical or psychological harm
- Drug misuse can have a negative impact on someone's quality of life¹¹

4. How does dual diagnosis develop?

The relationship between mental health and substance misuse is complex and varies from individual to individual. The Department of Health has described four possible relationships¹²:

- A mental illness can lead to substance misuse. For example, a person may use alcohol or drugs to 'self-medicate' and relieve their symptoms, or their illness may make them more likely to engage in risky behaviour such as taking excessive amounts of drugs.
- The use of alcohol or drugs can make a mental health condition worse or alter its course. For example, using substances may make people more likely to take part in risky behaviour or have worse psychotic symptoms.
- Use of drugs or alcohol leading to psychological symptoms.
- Substance misuse or withdrawal may trigger mental health problems. For example there is some evidence that cannabis use increases the risk of developing a psychotic illness¹³.

It is likely that a range of factors make some people more vulnerable to mental health and/or substance misuse problems. This might include genetic factors, the impact of the environment someone grows up in or difficult or traumatic life events such as bereavement or abuse.

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5. How can dual diagnosis be treated?

The treatment plan for dual diagnosis will vary depending on the mental health diagnosis and the substances that are being misused. When dual diagnosis is treated, it is important that the care someone gets looks at both the mental health and substance misuse problems together. The effect of substances on medication should be considered before a prescription is made.

Guidance¹⁴ published by Turning Point, a charity for people with complex needs, says:

- There should be a local strategy for helping people with dual diagnosis
- Assessments of people with dual diagnosis should take into account all of their needs and be carried out by a number of people working in different fields and employed by different agencies
- Assessment should include a full history of someone's mental health and substance use
- A risk assessment should be carried out to see whether someone is a danger to themselves or to others
- Treatment should be focused on engaging with a person, trying to motivate them to change their habits, preventing relapse and providing access to a range of treatments and helpful agencies.

The full guidance can be found at <http://www.turning-point.co.uk/inthenews/Documents/DualDiagnosisGoodPracticeHandbook.pdf>

If you are worried about someone's health and you want to try to get them help, the Rethink Mental Illness factsheet 'Are you worried about someone's mental health?' looks at ways you can try. This is available to download at www.rethink.org/factsheets. You can also get a copy by contacting the Rethink Advice & Information Service directly (contact details are at the end of this factsheet).

Problems with the treatment of dual diagnosis

Despite it being common for people to have a combination of mental health and alcohol or drug problems, services for people with a dual diagnosis aren't always adequate. Currently there aren't many services specifically for people with dual diagnosis. This can result in people being passed between mental health and substance misuse services without getting proper treatment from either. For example a substance misuse service may say they are not trained to help people with mental health problems and mental health services might say they will not treat someone whilst they are using drugs or alcohol.

Department of Health guidance is clear that staff from mental health services should be equipped to treat and support clients with a dual diagnosis¹⁵. The Care Programme Approach (CPA) is the framework coordinating the care of people with complex mental health problems, including those with dual diagnosis, who are under secondary mental health services. Guidance says that when a person's care plan is drawn up detailing how their needs will be met, a risk management plan in relation to substance misuse should also be included and help with substance misuse should be put in place by the person's care co-ordinator.¹⁶ The Department of Health regards people with dual diagnosis to be a key group of people who should receive help under the CPA,¹⁷ providing their overall needs are high enough to meet the criteria.

Treatment of people with dual diagnosis can be difficult because their needs are complex and often long-term. Assertive outreach can be important because a lack of insight or awareness that there is a mental health problem and/or acceptance that there is a problem with alcohol or drugs can mean someone easily loses contact with services.

Further information on CPA and assertive outreach can be found in our factsheets '[Care Programme Approach \(CPA\)](#)' and '[Assertive Outreach](#)', which are available to download for free from www.rethink.org/factsheets or by contacting the Rethink Advice & Information Service directly. Our contact details are at the end of this factsheet.

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Turning Point is a social care organisation working with individuals and their communities across England and Wales in the areas of drug and alcohol misuse, mental health and learning disabilities. They have particular expertise in working with people with dual diagnosis.

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21 Mansell Street
London
E1 8AA

Tel: 020 7481 7600

Email: info@turning-point.co.uk

Web: www.turning-point.co.uk

Addaction is a drug and alcohol treatment agency. They have services in England and Scotland which deal primarily with drug and alcohol problems including support for families.

67-69 Cowcross Street
London
EC1M 6PU

Tel: 020 7251 5860

Web: www.addaction.org.uk

Adfam is a national charity for families and friends of drug users. It offers confidential support and information.

25 Corsham Street
London
N1 6DR

Tel: 020 7553 7640

Email: admin@adfam.org.uk

Web: www.adfam.org.uk

Al-Anon Family Groups is a service for families and friends of alcoholics. Al-Anon family groups provide understanding, strength and hope to anyone whose life is, or has been, affected by someone else's drinking.

Al-Anon Family Groups
61 Dover Street
London
SE1 4YF

Tel: 020 7403 0888

Open 10am-10pm, 365 days a year

Web: www.al-anonuk.org.uk

Alcohol Concern is the national agency on alcohol misuse. They work to reduce the incidence and costs of alcohol-related harm and to increase the range and quality of services available to people with alcohol-related problems.

64 Leman Street
London
E1 8EU

Tel: 020 7264 0510

Email: contact@alcoholconcern.org.uk Web: www.alcoholconcern.org.uk

Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism. They can provide a comprehensive list of private clinics around the country for drug, alcohol and other addictions on request.

PO Box 1
10 Toft Green
York
YO1 7NJ

Tel: 0845 769 7555

Web: www.alcoholics-anonymous.org.uk

Cocaine Anonymous is a fellowship of men and women who use the 12 step, self-help programme to stop cocaine and all other mind-altering substances.

CAUK
PO Box 46920
London
E2 9WF

Helpline: 0800 612 0225 10am – 10pm daily

Email: info@cauk.org.uk

Web: www.cauk.org.uk

Drinkline is the national alcohol helpline. They provide information and self-help materials for help callers worried about their own drinking, and to support the family and friends of people who are drinking. They are confidential, you do not have to give your name and they can provide advice on where to get help.

Tel: 0800 917 8282

DrugScope provides information and publications on a wide range of drug related topics.

Prince Consort House
Suite 204 (2nd floor)
109/111 Farringdon Road
London
EC1R 3BW

Tel: 020 7520 7550

Email: info@drugscope.org.uk

Web: www.drugscope.org.uk

Frank (formerly National Drugs Helpline) is a campaign from the Department of Health and the Home Office which provides information and advice on drugs to anyone concerned about drugs and solvent misuse, including drug misusers, their families, friends and carers.

Tel: 0800 77 66 00 Open 24 hours a day
www.talktofrank.com

Web:

Narcotics Anonymous is a fellowship of men and women for who drugs has become a major problem. They have meetings all over the country.

Helpline 0300 999 1212 Open 24 hours a day.
Web: www.ukna.org

Release is a national 24-hour helpline offering advice and information on drug-related problems. They also have expertise in legal matters surrounding drugs.

388 Old street
London
EC1V 9LT

Helpline: 0845 4500 215 Email: ask@release.org.uk
Web: www.release.org.uk

TASHA (tranquilisers, anxiety, stress help association) provides confidential information, support, training and counselling to individuals affected by mental health difficulties and problematic benzodiazepine use.

Alexandra House
241 High Street Brentford
Middlesex
TW8 ONE

Tel: 0208 569 9933 Helpline (6pm – 9pm Mon-Wed): 0208 560 6601
Email: enquiries@tasha-foundation.org.uk Web: <http://www.tasha-foundation.org.uk>

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¹ Department of Health (2002) *Mental Health Policy Implementation Guide: Dual Diagnosis Good Practice* Guide at para 1.1.4

² As note 1, at para 1.3.1

³ As note 1, at para 1.5.1

⁴ As note 1, pg 8

⁵ As note 1, at para 1.5.2

⁶ As note 1, at para 3.1.1

⁷ Institute for Health and Clinical Excellence (2008) Drug misuse: Psychosocial Interventions. CG51. London: National Institute for Health and Clinical Excellence. (Page 23)

⁸ As note 1, at para 1.3.1

⁹ NHS Choices, *Drug Misuse: getting help for drug misuse* retrieved on 14/07/11 from <http://www.nhs.uk/Conditions/Drug-misuse/Pages/Getting-help.aspx>

¹⁰ Rethink and Turning Point (2004) *'Dual diagnosis toolkit: Mental health and substance misuse'* Appendix 1

¹¹ NHS Direct Wales. Encyclopaedia: Drug Misuse. <http://www.nhsdirect.wales.nhs.uk/encyclopaedia/d/article/drugmisuse/> (Accessed on 14/07/11)

¹² As note 1, at para 1.2.1

¹³ Moore, T.H. et al. (2007). Cannabis use and risk of psychotic or affective mental health outcomes: a systematic review. *The Lancet*, 370, 319-328

¹⁴ Turning Point (2007) *Dual Diagnosis Good Practice Handbook*, Turning Point London pg 6-7

¹⁵ As note 1

¹⁶ Department of Health (2008) *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*

¹⁷ As note 16, at pg 14

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Monday to Friday, 10am to 1pm

Email advice@rethink.org

The Rethink Advice & Information Service welcomes your feedback on whether this information was helpful to you. You can provide feedback in the following ways:

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By post:

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Rethink Mental Illness
89 Albert Embankment
London SE1 7TP

By telephone: 0300 5000 927



Leading the way to a better
quality of life for everyone
affected by severe mental illness.

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