Substance-Related and Addictive Disorders

Substance Use Disorders

Substance-related disorders are broken up into two larger subtypes. The first are “substance use disorders.” Substance use disorder is the use of one or more substances that leads to significant impairments or distress in a person’s life. There are at least nine types of substances that may cause such impairments: alcohol; cannabis (e.g., marijuana); hallucinogens; inhalants; opioids (e.g., heroin); sedatives, hypnotics, or anxiolytics (e.g., valium, “Quaaludes”); stimulants (e.g., cocaine, methamphetamine); tobacco; and other substances such as anabolic steroids. Regardless of the type of substance, the signs/criteria for the conditions are the same, and they are all measured on a continuum from mild to severe.

The second subtype of substance-related disorders is “substance-induced disorders”. These are physical symptoms or mental disorders that are caused by/induced by substance use, and include, but are not limited to: intoxication, withdrawal, psychotic disorder, bipolar disorder, depressive disorder, anxiety disorder, obsessive-compulsive disorder, sleep disorders, sexual dysfunctions, delirium, and neurocognitive disorders. It is important to note that while substance use can induce certain psychological disorders it can also be caused by/a symptom of psychological disorders as well; substance abuse is a common form of self-harm or self-medication. This is particularly true for PTSD, depression, anxiety disorders, personality disorders, and schizophrenia.

Signs of Substance Use Disorder

Impaired Control:
- Using more of the substance, or for a longer period of time, than intended.
- Having wanted to/tried to cut down or stop using but couldn’t.
- Spending significant or recurring time using, obtaining, or recovering from use.
- Having cravings so intense that it is difficult to think about anything else.

Social Impairment:
- Continuing use despite interfering with or causing problem in school, work, taking care of the home or family.
- Continuing use despite causing trouble with friends or family.
- Giving up or cutting back on activities that were important, interesting or enjoyable in order to use.

The CCRI worked with the Bazelon Center for Mental Health Law to produce this Fact Sheet in 2017. Please note that this document only offers an overview and simply serves as a starting point in considering the impacts of a particular condition on an individual. This Fact Sheet does not provide the level of detail, citations, medical terminology, or full diagnostic criteria that an expert or medical professional would need to make a diagnosis or that a lawyer would need to have to advocate most effectively on behalf of her client.
Risky Use:
- During or after use, behaving in ways that increase the chances of injury (e.g., driving, swimming, walking in dangerous areas, having unsafe sex).
- Continuing use despite causing or worsening other health or emotional problems.

Tolerance and Withdrawal:
- Tolerance: Needing to use more of the substance, or to use it more often, than previously necessary to obtain the desired effect.
- Withdrawal: Experiencing unpleasant physical symptoms when the effects of use begin to wear off.

Recent Developments

The fifth edition of the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders (DSM-5) removed distinctions in past editions between “abuse” and “addiction” and now uses one broader category, substance use disorder, measured on a spectrum from mild to severe. Poly-substance abuse syndrome, the addiction to getting high with little or no preference for which drug to use to achieve the desired effect, is now considered a type of substance use disorder, because the new broader definition includes the use of “one or more” substances.

In the DSM-5, drug cravings were added to the list of symptoms that an individual having a substance use disorder may exhibit. The DSM-5 also increased the number of symptoms necessary to be considered to have a substance use disorder, making it more difficult to qualify as having a mild substance use disorder than it had previously been. Problems with law enforcement was removed in the new DSM from the list of symptoms of substance use disorders, but it was only done so because of cultural differences that made it difficult to apply the criteria internationally.

Addictive Disorders / Non-Substance-Related Disorders

Addictive disorders or non-substance-related disorders are described as behavioral addictions. Gambling is currently the only addictive disorder listed in this section. Gambling problems had previously been included under impulse control disorders but research has now shown that gambling has a very similar impact on the brain as do substances commonly thought to be addictive; it causes an intense activation of the rewards center of the brain that can lead to a disregard of normal or healthy activities. Understanding that gambling is just as much an addiction as alcoholism or drug use is significant in the understanding and treatment of those who have the disorder.

How Substance-Related and Addictive Disorders Might Impact Behavior

Those with a substance-related or addictive disorder may exhibit:
- Bloodshot eyes or abnormal pupil size.
- Sudden weight gain or loss.
- Changes in sleep patterns.
- Unusual body odor.
• Impaired coordination or tremors.
• Slurred speech.
• Sudden change in friends or hobbies.
• Legal problems.
• Financial problems.
• Relationship problems.
• Appear fearful, anxious or paranoid.
• Unusual hyperactivity or agitation.
• Lack of motivation.
• Sudden mood swings or aggressive outbursts.
• Drop in attendance or performance at school or work.
• Frequently getting into fights or accidents.

Because addictive substances (or behaviors) cause such an intense activation of the rewards system of the brain, they may lead to participation in unhealthy, risky, or even criminal behaviors, in order to obtain or continue using the substance. It is important to understand how intense the drive to continue drug use (or addictive behavior) can be. Persons experiencing addiction may become consumed by the need to use, and may neglect their professional or personal obligations, hygiene, nutrition, economic security, their own safety, or the safety of others. Some people with such conditions have committed armed robbery, prostituted themselves, or even committed murder, as a means of financing their addiction.

In addition to the crimes that are committed as a means of obtaining the addictive substance (or continuing addictive behaviors), crimes are also committed under the influence of substances. Drugs may decrease inhibitions; inhibit reasoning abilities; distort thought processes; cause intense aggression, depression, or anxiety; create paranoia; cause feelings of invisibility; or induce hallucinations. While under the influence, many individuals cannot understand, or be concerned with, the consequences of their actions. Substance use may lead to driving under the influence (DUI), domestic abuse, murder, and sexual assault.

Resources for Additional Information

• MentalHealth.gov: https://www.mentalhealth.gov/what-to-look-for/substance-abuse/
• Alcoholics Anonymous (not just for alcohol use disorder, but all substance-related and addictive disorders): http://www.aa.org/
• For Family and Friends: http://al-anon.org/home
• Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), American Psychiatric Association, “Substance Related and Addictive Disorders,” p. 481