

Priority Topic: **SUBSTANCE USE**

Key Features:

1. In all patients, and especially in **high-risk groups** (e.g. those with mental health issues, chronic disability), **opportunistically ask about substance use** (tobacco, alcohol, other substances).

What you should study:

- ✓ **Screening for drug use in general medical settings**
- ✓ **Screening for drug use - quick guide**
- ✓ **A Primary Care Approach to Substance Misuse AAFP 2013**

2. For a patient using **alcohol or substances** (**including** those who use them only **occasionally**):

- a) **Discuss the possible impact of their use** on themselves and others (e.g. risk to children, sexual indiscretion).
- b) **Discuss harm-reduction strategies in detail** (e.g. needle exchange, not drinking and driving, immunizations).

What you should study:

- ✓ [Health Impacts Alcohol \(CMOH\) Pages 3 to 18](#)
- ✓ [Canada's Low-Risk Alcohol Drinking Guidelines \[Brochure\]](#)
- ✓ [Canada's Lower-Risk Cannabis Use Guidelines](#)
- ✓ [Harm Reduction: What's in a Name? CCSA 2008](#)
- ✓ [Best Practice Recommendations for Canadian Harm Reduction Programs CATIE](#)
- ✓ [Harm Reduction Guidelines BC CDC](#)

3. For any patient presenting with a [functional decline, confusion, or delirium](#) , [assess for alcohol/substance use and withdrawal](#) , even when other causes may seem more apparent.

What you should study:

- ✓ **See the DSM-5 (via McGill library) for diagnostic criteria of withdrawal and intoxication with multiple substances**
- ✓ From "Treatment of Adolescents with Substance Use Disorders" - Appendix B (these tables are briefer than the DSM and include treatment)
 - [Alcohol](#)
 - [Cannabis](#)
 - [Depressants](#)
 - [Designer Drugs](#)
 - [Hallucinogens](#)
 - [Inhalants](#)
 - [Narcotics](#)
 - [Stimulants](#)

4. Discuss substance use with adolescents and their caregivers when warning signs are present (e.g. school failure, behaviour change).

What you should study:

- ✓ Adolescent Substance Use and Misuse: Recognition and Management AAFP 2019
- ✓ Le cannabis MduQ 2017

5. Consider and look for substance use as a possible factor in problems not responding to appropriate intervention (e.g. alcohol use in patients with hypertriglyceridemia, inhalational drug use in asthmatic patients).

6. For a patient with a medical problem being treated with opioids, stimulants, sedatives, or hypnotics :

- a) Episodically reassess their clinical problem to affirm the ongoing need for the medication.
- b) Discuss tapering and cessation planning when appropriate.
- c) Discuss safety and security of medication (e.g. storing, risk to children, diversion, misuse).

What you should study:

- ✓ Opioid Tapering McMaster University 2017
- ✓ Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain **Appendix B-12: Opioid Tapering**
- ✓ Opioid Tapering: Information for Patients McMaster University
- ✓ Opioid Tapering Template RxFiles

- ✓ Managing Benzodiazepine Use in Older Adults CEP 2019
- ✓ Les benzodiazépine prescrites – primum non nocere MduQ 2017
- ✓ Benzodiazepines: How They Work and How to Withdraw

7. For a patient requesting or requiring a new prescription for opioids, stimulants, or tranquillizers :

a) Assess alcohol and substance use.

b) Explain clearly the benefits and risks, and do not prescribe before the risks of misuse have been assessed and mitigated.

What you should study:

- ✓ Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain **Appendix B-2: Opioid Risk Tool**

8. In patients who use substances or those with a substance use disorder, regularly determine their readiness to change their patterns of use .

What you should study:

- ✓ Addiction 101: Stages of Change CAMH

9. For a patient with an alcohol or substance use disorder, [assess their level of motivation and engage them in the development of an individualized plan](#) for withdrawal and ongoing treatment that involves:

- Appropriate use of [pharmacotherapy](#) (e.g. methadone, acamprosate).
- [Use of community resources and other health professionals](#) .
- [Appropriate follow-up](#) with you.

What you should study:

- ✓ [Substance Use Disorders in the clinic AIM 2016](#)
- ✓ [L'utilisateur des substances psychoactives MduQ 2017](#)

10. In patients with a substance use disorder, take advantage of opportunities to [screen for comorbidities](#) (e.g. poverty, crime, sexually transmitted infections, mental health issues) and [long-term complications](#) (e.g. cirrhosis).

What you should study:

- ✓ [Dépendences et santé mentale MduQ 2015](#)

11. [Offer support to patients and family members affected by substance use disorder.](#) (The user may not be your patient.)

DSM-5 Criteria

There are many other disorders and criteria, although the pattern is the same for all of them. Look up the full DSM-5 on the McGill Library if you want other details.

- [Alcohol Use Disorder](#)
- [Cannabis Use Disorder](#)
- [Opioid Use Disorder](#)