

Addiction Is Addiction

“The natural history of substance dependence characteristically follows the course of a chronic relapsing disorder.” This quote comes from page 363 of the *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition Text Revision (DSM-IV-TR) (American Psychiatric Association 2000). The NE LAP uses the DSM-IV-TR diagnostic criteria for alcohol and drug dependence in its assessment of a health care professional’s use of alcohol or drugs.

The above quote is extremely important to an accurate NE LAP alcohol/drug assessment. Almost every professional will deny a problem with alcohol and drugs. In support of this denial, the professional will emphasize an absence of alcohol/drug-related problems since the last problem occurred (“no more diversion since I got caught.”) They will cite the length of time between problems (“five year periods between each of my DUIs”) The NE LAP obtains extensive information on the health care professional’s use of alcohol or drugs from a personal interview, testing instruments, treatment records, employment history, legal history, involved family, friends or co-workers (collateral contacts) and the State if applicable. This information is accumulated and results in the diagnostic conclusions of the NE LAP alcohol/drug assessment. Necessary treatment recommendations are made for the health care professional to give them the direction they need to resolve any alcohol or drug problems they may have.

The professional’s denial of a problem with alcohol or drugs may surface again after either a period of abstinence or a period where there have been no serious consequences from the use of alcohol or drugs. In these situations, it is important to take a long-term view of the health care professional’s alcohol/drug history. The abuse of substances generally does ebb and flow and there will be periods when no serious consequences are evident. In some cases, this indicates abuse and not dependence. In other cases, there is still ongoing compulsive use but it has not been discovered by an employer, law enforcement or even family members.

The experienced evaluator, such as the NE LAP Coordinator, knows to not be misled by the abusing or dependent health care professional’s story just because there are no periods with identifiable consequences on the assessment radar. Assessment experience plays an even more important role when a professional who has had a prior diagnosis of dependence resumes a denial of a problem with alcohol or drugs. Usually these individuals have relapsed and cite an absence of alcohol or drug-related problems since they began using as justification for the resumption of their use. It is very important that the evaluator, and others involved with the dependent health care professional, not be drawn into their denial.

Addiction is addiction. It is not a temporary illness characterized by periods of illness and wellness. It is an ongoing disorder and “the most important goal of any treatment is abstinence from the abused drug” (DSM-IV-TR p. 368). It is a chronic relapsing disorder and periods of drug use, with or without discoverable consequences, by a dependent health care professional, indicate relapse and appropriate treatment recommendations need to be completed by the professional to break back through the denial and return them to a program of sobriety and recovery.

If you have further questions about the Nebraska Licensee Assistance Program, or feel that you may benefit from assistance from the NE LAP, please contact the NE LAP Coordinator, Judi Leibrock or NE LAP Counselor Tricia Veech, at (800) 851-2336 or (402) 354-8055.