

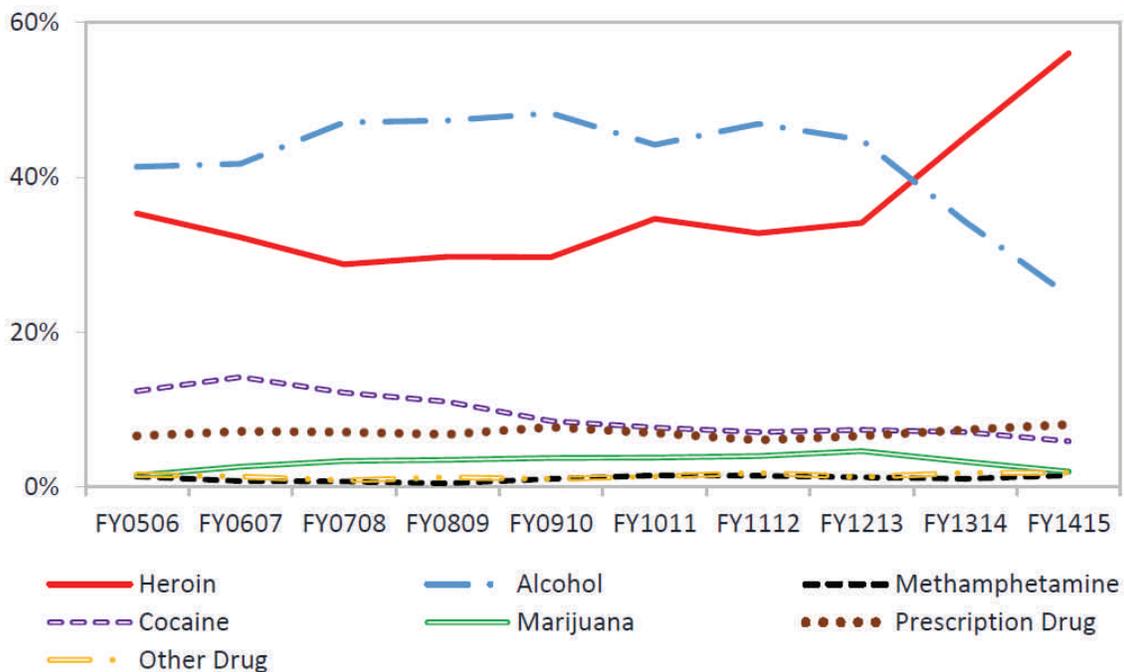
The LACES Brief

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Examining Special Populations: Substance Use Disorder Among Older Adults

Background: Substance use disorders (SUDs) and substance misuse among older adults is associated with social and health problems, including increased risk of hospitalization, nursing home placement, and death¹. Compared to earlier birth cohorts, baby boomers (born from 1946 to 1964) have a higher rate of illicit drug use². The number of noninstitutionalized adults aged 50 or older with SUDs is projected to double by 2020¹. Further, health professionals that treat older adults may erroneously attribute the symptoms of SUDs to other problems that are common among this age group (e.g., depression, dementia, etc.). This population warrants special attention given these findings. In an effort to understand substance use among this special population, LACES reviewed a recent report by the Los Angeles (LA) County Substance Abuse Prevention and Control³. The below chart shows the trends in admissions by primary substance among older adults aged 65 or older in SUD treatment within LA County. Additional findings are summarized below.

Trends in primary substance use problems among older adults in SUD treatment³



Findings: As seen in the chart above, the percentage of older adults in SUD treatment who reported heroin as their primary drug increased from 34% in FY 2012-13 to 54% in FY 2014-15. Heroin also surpassed alcohol as the most common primary drug³. In L.A. County, 37% of all SUD treatment admissions in FY 2014-15 were for heroin problems. However, about half (48%) of these county admissions were among individuals aged 55 or older and 4% were for those aged over 65 (data not shown). Other findings from the SAPC report indicate that 3% of all clients were older adults, up from 1% in FY 2005-06. Nearly two-thirds (62%) of older adults received opioid treatment, whereas 29% received outpatient treatment in FY 2014-15. In addition, 45% were discharged with positive compliance, which is a proportion similar to all SUD treatment admissions in L.A. County (46%)³.

Implications: Older adults appear similar to the general SUD treatment population with regard to primary substance problem, level of care received, and discharge status. Notably, admission for problematic heroin use among older adults has increased. However, identifying SUDs within this population may be challenging for some healthcare providers. In light of the growing population of older adults, policymakers may need to allocate resources and develop prevention and treatment approaches to address future needs of older adults with SUDs¹.

References: (1) Han, B., Gfroerer, J. C., Colliver, J. D., & Penne, M. A. (2009). Substance use disorder among older adults in the United States in 2020. *Addiction*, 104(1), 88-96. (2) Johnson R. A., & Gerstein D. R. (1998). Initiation of use of alcohol, cigarettes, marijuana, cocaine, and other substances in US birth cohorts since 1919. *Am J Public Health*; 88: 27-33. (3) OMDSO. (2016). Annual Review of Clients in Publicly Funded SUD Treatment Programs in L.A. County, 2014-15 Fiscal Year.

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