



## UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

### New England (VISN 1) MIRECC on Dual Diagnosis

#### **Theme: Improve care for veterans with mental illness and substance dependence (dual diagnosis).**

The New England MIRECC focuses on veterans with combined mental illness and drug or alcohol dependence (dual diagnosis). Veterans with dual diagnosis have special needs because having two types of illnesses makes it more difficult to recover from either one. This combination is a major part of VA practice, affecting nearly half of VA psychiatric inpatients. The aim of our MIRECC is to improve the treatment of dually diagnosed veterans by developing innovative new treatments, devising more effective ways to deliver existing treatments, and creating better programs to train VA treatment providers in therapies with proven efficacy. These goals will be achieved through an ambitious multifaceted, multidisciplinary research program and through efforts to educate VA treatment providers about newly available treatments.

#### **Clinical Interventions and Evaluations:**

- Computer-Based Cognitive Behavioral Therapy for Drug Abuse: Added to treatment as usual, this user-friendly computer-based training program helps prevent relapse in individuals with cocaine, marijuana, and alcohol abuse.
- Contingency Management to Enhance Job Acquisition in Vocational Rehabilitation: Most veterans with mental illness who seek VA vocational rehabilitation do not succeed in landing a job. By providing incentives for completing the steps to employment, this program increases the chances of getting hired in the community.
- Modafinil and Contingency Management for Cocaine and Opioid Dependence: To prevent relapse to addictions, combining medications and behavioral treatment yields better results than either alone. This study combines a medicine that helps people think faster with a psychotherapy that provides incentives for abstinence to prevent relapse in individuals who abuse cocaine.
- Money Management for Substance Abusing Individuals with Severe Mental Illness (SMI): Substance abuse often undermines recovery in veterans with severe mental illness because they spend their paychecks on drugs. This project provides a new approach to money management to help dually diagnosed veterans spend their money more wisely.
- Monitoring Side Effects of Second Generation Antipsychotic Medicines in Dually Diagnosed Veterans: There are major trade-offs between traditional and newer medications that combat hallucinations and delusions. Older medicines cause more neurological problems, but newer ones lead to weight gain and diabetes risk. This project helps VHA clinicians to monitor diabetes risk in individuals on newer medicines.
- Motivational Enhancement for Entry and Outcome Related to Supported Employment (SE): This study looks at the effect of a 6-session motivational interviewing intervention for veterans with serious mental illness and their significant others on VHA SE utilization, SE participation, and employment outcomes as well as the factors related to these outcomes according to the health belief model.
- Prazosin for Veterans with Posttraumatic Stress Disorder (PTSD) and Alcoholism: Prazosin reduces the nightmares associated with PTSD and improves recovery. This is the first study to test prazosin for veterans with both PTSD and alcohol abuse.

#### **Selected Research Projects:**

- Finding the Genes that Increase Risk for Drug Abuse and Mental Illness: This research scans the entire collection of genes to find those that make veterans vulnerable to dual diagnosis. Finding these genes can help researchers develop medicines and gene therapies that reverse the risk.

#### **Selected Training and Education Programs:**

- Training of Peer Support Providers: Recovering veterans with dual diagnosis can help their peers who are struggling with recovery. The New England MIRECC Peer Education Center provides introductory and continuing education training offerings for paid and volunteer peer support providers working in the VISN 1 VA system. We also provide support for the National Vet-to-Vet Program's website (<http://www.veteranrecovery.org>) and monthly teleconferences.
- Stepped Training in Motivational Interviewing (MI): MI promotes recovery from addictions through helping veterans recognize their own anti-addiction goals and desires. This project attempts to tailor MI training to meet the skill levels of addiction counselors.
- In-Home Messaging to Prevent Alcohol Relapse: Many veterans with alcoholism relapse shortly after completing alcohol detoxification. This program uses an in-home telephone messaging device to help veterans maintain sobriety in the weeks following completion of an alcohol detoxification program.

**Selected Publications:**

- Carroll, K.M., Ball, S.A., Martino, S., Nich, C., Babuscio, T. A., & Rounsaville, B.J. (2009). Enduring effects of a computer-assisted training program for cognitive behavioral therapy: A six-month follow-up of CBT4CBT. *Drug and Alcohol Dependence*, 100, 178-181.
- Desai, R.A., Harpaz-Rotem, I., Najavits, L.M., & Rosenheck, R.A. (2008). Impact of the seeking safety program on clinical outcomes among homeless female veterans with psychiatric disorders. *Psychiatric Services*, 59(9), 996-1004.
- Drebing, C.E., Van Ormer, E.A., Mueller, L., Hebert M., Penk, W., Petry, N.M, Rosenheck, R., Rounsaville, B. (2007). Adding a contingency management intervention to vocational rehabilitation: Outcomes for dually diagnosed veterans. *Journal of Rehabilitation Research and Development*, 44(6), 851-866.
- Glynn, S., Drebing, C.E., & Penk, W.E. (2009). Psychosocial rehabilitation. In E.B. Foa, T.M. Keane, M.J. Friedman, & J.A. Cohen (Eds.), *Effective treatments for PTSD: Practice guidelines from the International Society for Traumatic Stress Studies* (2<sup>nd</sup> ed.) (pp. 388-426). New York: Guilford Press.
- Harpaz-Rotem, I. & Rosenheck, R.A. (2009). Tracing the flow of knowledge: Geographic variability in the diffusion of prazosin use for treatment of posttraumatic stress disorder nationally in the Department of Veterans Affairs. *Archives of General Psychiatry*, 66(4), 417-421.
- Martino, S., Canning-Ball, M., Carroll, K.M. & Rounsaville, B.J. (2011). A criterion-based stepwise approach for training counselors in motivational interviewing. *Journal of Substance Abuse Treatment*, 40(4), 357-365.
- Mohamed, S., Neale, M., & Rosenheck, R.A. (2009). VA intensive mental health case management in urban and rural areas: Veteran characteristics and service delivery. *Psychiatric Services*, 60, 914-921.
- Rosen, M.I., Carroll, K.M., Stefanovics, E.A., & Rosenheck, R.A. (2009). A randomized controlled trial of a money management-based substance use intervention. *Psychiatric Services*, 60, 498-504.
- Rosen, M.I., Rounsaville, B.J., Ablondi, K., Black, A.C., Rosenheck, R.A. (2010). Advisor-Teller Money Manager (ATM) therapy for substance abuse. *Psychiatric Services*, 61, 707-713.
- Rosenheck, R.A., Krystal, J.H., Lew, R., Barnett, P.G., Fiore, L., Valley, D., Thwin, S.S., Vertrees, J.E., Liang, M.H., & CSP555 Research Group. (2011). Long-acting risperidone and oral antipsychotics in unstable schizophrenia. *New England Journal of Medicine*, 364(9), 842-851.
- Sofuoglu M, Waters AJ, Poling J, Carroll KM (2011). Galantamine improves sustained attention in chronic cocaine users. *Experimental and clinical psychopharmacology* 19(1): 11-19.
- Tsai, J., Mares, A.S., & Rosenheck, R.A. (2010). A multi-site comparison of supported housing for chronically homeless adults: "Housing first" versus "residential treatment first." *Psychological Services*, 7(4), 219-232.

**Leadership:**

Acting Director: Mehmet Sofuoglu, M.D., Ph.D.  
Co-Director for Clinical Research: Charles E. Drebing, Ph.D., CPRP  
Co-Director for Clinical Research: Marc I. Rosen, M.D.  
Co-Director for Clinical Services: Ismene Petrakis, M.D.  
Senior Scientist in Health Services: Robert Rosenheck, M.D.  
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**New England MIRECC Website:**

Further information about projects and publications can be found on our website: <http://www.mirecc.va.gov/visn1>.