

## Substance Use Disorders

One in five individuals with a serious mental illness has a co-occurring substance use disorder (20 percent). Similar to persons with SMI, individuals with substance use disorders are at risk for physical health problems such as cardiovascular disease, lung disease, hepatitis, HIV/AIDS, and cancer. The management of chronic disease is often complicated and more challenging in individuals with co-occurring disorders. For example, individuals who have depression, a substance use disorder, and medical comorbidities are less likely to adhere to their treatment plan and medications for type 2 diabetes.<sup>55</sup> To improve the health and functioning of those with co-occurring disorders requires the integration of care across primary care, mental health care, and substance use services. Many of the FDA-approved medications to help patients reduce alcohol or drug use, avoid relapse, and support abstinence (e.g., buprenorphine, naltrexone, and acamprosate) can be used in primary care settings which increases patient choice in being treated in the setting they are most comfortable.<sup>56</sup>

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is an evidence-based practice to identify risky alcohol and other drug use, provide appropriate intervention, and reduce use and other health-related consequences. SBIRT can be implemented in various settings including the primary care office. SBIRT resources can be located on the SAMHSA-HSRA Center for Integrated Health Solutions website at [www.integration.samhsa.gov/clinical-practice/SBIRT](http://www.integration.samhsa.gov/clinical-practice/SBIRT).

