

# The prevalence and correlates of Substance Use Disorders comorbid with Mood Disorders and Anxiety Disorders: A national perspective.



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## BACKGROUND

Substance Use Disorders (SUDs) are common and are associated with a range of psychosocial harms. They also have a major impact on the wellbeing of individuals, families and communities<sup>1</sup>.

SUDs are strongly related to mood and anxiety disorders<sup>2</sup>. This comorbidity commonly results in increased impairment, poorer functioning, greater use of health services, and a worse prognosis than individuals diagnosed with a SUD alone<sup>3</sup>.

Strikingly, epidemiological research has shown that among those with a 12-month SUD, over 20% had a mood disorder, and 31% had an anxiety disorder<sup>4</sup>.

While we know that there are high rates of comorbidity between SUD and discrete disorder classes (i.e. mood *or* anxiety disorders) in Australia, **what is less well understood are the patterns of comorbidity and the correlates of these patterns in people with SUDs.**

The National Survey of Mental Health Wellbeing (NSMHWB) provides a unique opportunity to gain a better understanding of the complex patterns of comorbidity among people with substance use disorders.

The results of this study will help to inform the identification and management of those people with SUDs who are at greatest risk of experiencing disability, suicidality, and poorer general wellbeing.

## AIMS

The aims of the present study were to:

- 1) Report the most recent Australian data on the 12-month prevalence of comorbid mood and/or anxiety disorders in individuals with a SUD.
- 2) Investigate the differences in demographic, physical health, disability, suicidality, and social wellbeing correlates between individuals with a **pure SUD** and individuals with a:
  - ii) SUD and mood disorder **or** anxiety disorder
  - iii) SUD and mood disorder **and** anxiety disorder

## METHOD & DESIGN

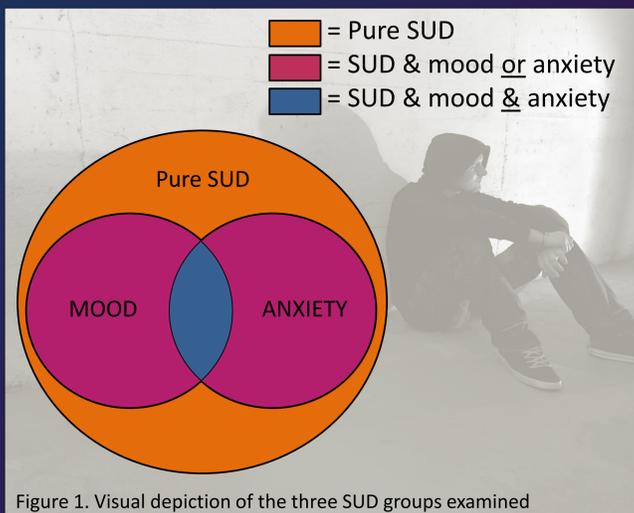
The present study was an epidemiological investigation of the prevalence and correlates of SUDs, mood and anxiety disorders in the Australian population.

Data was collected as part of the 2007 Australian National Survey of Mental Health and Wellbeing.

The NSMHWB was a nationally representative face-to-face household survey of 8841 Australian adults aged between 16 and 85 years. The survey assessed participants for symptoms of the most prevalent DSM-IV mental health disorders.

### Statistical analyses:

Weighted means, frequencies and cross-tabulations were computed. Odds ratios (adjusted by demographic variables) were derived from multiple logistic regression analyses.



Orange = Pure SUD  
Pink = SUD & mood *or* anxiety  
Blue = SUD & mood *&* anxiety

## RESULTS

### Sample characteristics:

Of 8,841 participants, 418 (5.1%) were diagnosed with a SUD in the past 12 months, representing approximately **817,000 Australians.**

The mean age of participants with a SUD was 31.9 years ( $SE = 0.87$ , range 16 and 82 years), with 68% being male, 21% married, 76% employed, 47% having completed secondary school, and 85% born in Australia.

Of participants with a SUD, 18% met the criteria for a mood *or* anxiety disorder in the past 12 months.

A further 16% of people with a SUD in the past 12 months had **both** an anxiety and a mood disorder.

Table 1. Weighted prevalence (%) of mental health disorders in the past year among adults with substance use disorders

Disorders in people with a SUD	12-month Comorbidity		
	%	SE	n
MOOD <i>or</i> ANXIETY	18.78	0.23	80
MOOD <i>&amp;</i> ANXIETY	16.25	0.25	68

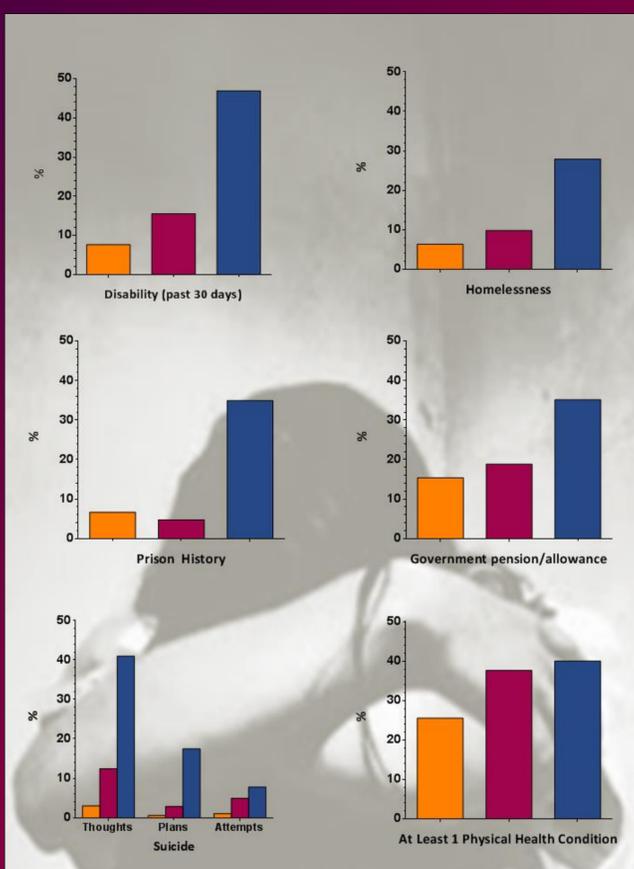


Figure 2. The percentage of disability and debilitation experienced as the number of classes of mental health disorders is increased

Table 2. Odds ratios of pure SUDs compared to the comorbid groups, by disability & wellbeing correlates

	Pure SUD (n = 270)	SUD & MOOD <i>or</i> ANX (n = 80)	SUD & MOOD <i>&amp;</i> ANX (n = 68)
	OR	OR (95% CI)	OR (95% CI)
≥1 physical condition	[Ref]	2.63* (1.26, 5.49)	1.19 (0.42, 3.34)
Homeless	[Ref]	1.04 (0.24, 4.55)	5.14* (1.30, 20.27)
Prison	[Ref]	0.70 (0.11, 4.33)	6.65* (1.65, 26.83)
Gov't allowance	[Ref]	0.45 (0.15, 1.32)	1.09 (0.14, 8.29)
>7 days out of role	[Ref]	1.92 (0.75, 4.89)	12.06* (3.30, 43.99)
Suicidal thoughts	[Ref]	3.73 (1.00, 13.94)	18.49* (6.42, 53.29)

\*Significant at  $p = .05$

There were no significant differences between those with a pure SUD and those with a SUD and comorbid mental health disorders in age, marital status, employment, education, or country of birth ( $p < .05$ ).

### Adjusted Odds Ratios:

Compared to those with a pure SUD, those with a **SUD and a mood *or* anxiety disorder** were:

- Over 2 times more likely to be female ( $SE 0.76$ ), and
- 3 times more likely to have one or more physical health condition

Individuals with **all three classes of disorder** were:

- 5 times more likely to have been homeless
- Nearly 7 times more likely to have been in prison
- Over 10 times more likely to have experienced disability (i.e., more than 7 days out of role), and
- 22 times more likely to have had suicidal thoughts

## CONCLUSION / IMPLICATIONS

The current study highlights the negative impact of comorbidity on the lives of people affected by SUDs.

It demonstrates that both anxiety and depressive disorders should be assessed in those with a SUD.

The findings further indicate that the development and provision of interventions targeting comorbidity in substance users are particularly warranted in individuals with increased classes of comorbid mental health disorders.

## REFERENCES

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