

Book Review

Substance Use and Misuse in Older Adults: A Need for Research and Intervention

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Robert Youdin. (2019). *Old and High: A Guide to Understanding the Neuroscience and Psychotherapeutic Treatment of Baby-Boom Adults' Substance Use, Abuse, and Misuse*. Oxford University Press, New York, NY, 296 pp., \$55.00 (hardcover).

According to estimates from the 2007–2014 National Surveys on Drug Use and Health, nearly 16.2 million U.S. adults aged ≥ 65 years drank alcohol in the past month, with 3.4 million reporting binge alcohol use and 772,000 reporting heavy alcohol use (Mattson, Lipari, Hays, & Van Horn, 2017). Nearly 469,000 older adults aged ≥ 65 years used illicit drugs or misused prescription medications in the past month. On an average day during the past month, 132,000 older adults aged ≥ 65 years used marijuana and 4,300 used cocaine (Mattson et al., 2017).

Opioid misuse is clearly a concern among older adults, affecting them both physically and financially (National Council on Aging, 2019). An analysis of the data available on admissions through the U.S. Treatment Episode Data Set revealed significant increases in the proportion of older adults seeking treatment for opioid use disorder during 2004–2015 (Huhn, Strain, Tompkins, & Dunn, 2018). The proportion of older adults seeking treatment for heroin use increased 110% between 2012 and 2015 (Huhn et al., 2018). The U.S. Centers for Disease Control and Prevention reported that, of all age groups, the greatest percentage change in drug overdose death rates occurred among adults aged 55–64, increasing from 4.2 per 100,000 in 1999 to 28.0 per 100,000 in 2017 (Hedegaard, Miniño, & Warner, 2018).

The new book by Robert Youdin, *Old and High: A Guide to Understanding the Neuroscience and Psychotherapeutic Treatment of Baby-Boom Adults' Substance Use, Abuse, and Misuse*, is timely given this opioid crisis affecting older adults. The book includes three parts that are organized into ten chapters.

Part 1 defines older and younger Baby Boom adults, substance use, and substance use disorders, and includes epidemiological data on substance use and misuse. Limitations in the diagnoses of substance use disorders among older adults using the Diagnostic and Statistical Manual of Mental Disorders-Fifth Edition (DSM-5) are described. Basic anatomical and psychophysiological concepts needed to understand Baby Boom adults' substance use and use disorders are reviewed, as well as guidance for assessing the symptoms and problems associated with substance misuse or use disorders among older adults. The consequences and correlates of substance misuse are discussed, including psychiatric comorbidities, medical polypharmacy, and high-risk sexual behaviors.

Part 2 of the book describes commonly used and misused substances among Baby Boom adults, including alcohol, benzodiazepines and sleep medications, cannabis, opioids, psychostimulants, and tobacco. For each substance group, the pharmacokinetics and pharmacodynamics of the substance used are discussed, as well as treatment and/or management strategies for the substance use disorder or withdrawal syndrome. Medical cannabis and its history also are covered. The section for opioids discusses polysubstance use and medical comorbidities among opioid misusers.

Part 3 of the book is focused on psychotherapy theories, techniques, and harm reduction interventions for preventing or reducing Baby Boom adults' substance misuse or use disorders. The neurocircuitry of addiction is used as a framework to help understand drug use, targets of harm reduction interventions, and recovery from drug use. This section

includes discussions of interventions such as cognitive behavioral therapy, rational emotive behavior therapy, motivational interviewing, dialectical behavior therapy, and mindfulness-based cognitive therapy.

Overall, the content of this book is focused more on clinical assessments, interventions, and management for older adults with alcohol and/or drug use problems than on research issues and directions for addiction research. This book is particularly useful for health care professionals working with older adults with alcohol or drug use problems, in terms of understanding the unique patterns and consequences of substance use/misuse in the aging population, clinical assessments for and management of co-occurring medical and mental health problems (including withdrawal syndromes from substance misuse), and principles of behavioral therapies for addressing substance misuse.

There are also some areas of substance misuse and interventions that could have been improved or expanded. The book does not discuss the application and limitations of the International Classification of Diseases (ICD) systems for the classification of substance use disorders. As ICD codes are being used in medical settings, it would be useful to include discussions of the ICD system in a future edition. Another important area that can help health care professionals better identify and address substance misuse is the availability of validated screening tools. A future edition could add discussions of validated screening tools for detecting unhealthy substance use and/or use disorders. In addition, multimorbidity is common among adults with substance use problems (Wu, Zhu, & Ghitza, 2018). The chapter on the comorbidity of unhealthy substance use could be enhanced to include additional research data about comorbid psychiatric and medical disorders and to summarize them in a table (Wu & Blazer, 2014).

Another issue of concern in the book is the use of the term “abuse” to describe substance use problems. The language “abuse” was removed from the DSM-5. A future edition should consider using the term “substance use disorder” (such as alcohol use disorder, opioid use disorder) and avoid using the term “abuse.” Additionally, the chapter about opioid use and treatment for opioid use disorder could be enhanced if prescription opioid use disorder versus heroin use disorder could be defined clearly and the terms used consistently. Further, the chapter on tobacco use mentions health benefits associated with nicotine among older adults experiencing cognitive decline, which is not supported by solid data and could be removed. Lastly, the chapter on psychotherapies and behavioral interventions could be expanded further to include more specific examples for each intervention approach. By 2034, there will be an estimated 77.0 million people 65 years and older, compared to 76.5 million under the age of 18 in the United States (U.S. Census Bureau, 2019). Younger Baby Boom adults use more substances than older Baby Boom adults (Wu & Blazer, 2011). As the size of the aging population grows, the need and demand for behavioral interventions to prevent and reduce substance use,

as well as pharmacological treatment to treat and manage substance use disorders, will increase substantially. There is a critical need to promote training for the behavioral health care workforce for older adults, to increase the number of providers to engage in prevention and treatment for the growing aging population (Institute of Medicine, 2012). This book is a useful resource for health care professionals working with individuals with substance misuse problems.

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