

Enforced abstinence from tobacco during in-patient dual-diagnosis treatment improves substance abuse treatment outcomes in smokers.

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Abstract

BACKGROUND AND OBJECTIVES:

Although the prevalence of tobacco use in those in substance abuse treatment is known to be quite high, most treatment programs do not address tobacco. The purpose of this study was to determine substance abuse recovery rates a year after treatment in a fully integrated, 90-day inpatient, dual diagnosis treatment program where patients are required to quit tobacco use in addition to drug and alcohol use for the duration of their 3 month stay. Tobacco is treated in the same way as other drugs and alcohol.

METHODS:

One hundred fifty-four patients enrolled in a yearlong follow-up after treatment study consisting of monthly phone contact to assess recovery from substance abuse.

RESULTS:

One hundred forty (n=140) patients completed the year follow-up. At the time of entry into the program 120 (86%) were using tobacco daily. At the end of the year this decreased to 102 (73%). Patients who were using tobacco were more likely to relapse to other drugs or alcohol ($p = .01$). Patients who actively attempted to abstain from tobacco after treatment were significantly more likely to remain continuously abstinent throughout the year ($p = .03$).

CONCLUSIONS:

This study demonstrates that tobacco use is correlated with relapse and addressing tobacco in treatment as seriously as and in the same fashion as other drugs, improves outcomes.

SCIENTIFIC SIGNIFICANCE:

When provided with a tobacco free treatment environment for 90 days, patients with substance abuse and mental illness can and do make the decision to quit tobacco and stay quit, aiding their ability to remain sober. (*Am J Addict* 2014;XX:1-6).

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