



Which patients are most at risk of leaving addiction treatment early?

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OVERVIEW

- This study sought to identify factors that predict which patients are most at risk of not completing addiction treatment.
- Researchers found those with high severity of drug use and psychiatric symptoms (depression, anxiety and trauma) were at most risk of leaving treatment early.
- These findings can help us identify those who are at risk of not completing treatment and approaches that may help with retention.

WHAT IS THIS RESEARCH ABOUT?

For many people with addictions, inpatient treatment can be a critical step in the process of recovery; however, not all people complete treatment.

Leaving treatment too early can be problematic and result in poorer recovery outcomes. The goal of this study was to identify potential risk factors and profiles of patients who tended not to complete an inpatient addiction treatment program.

WHAT DID THE RESEARCHERS DO?

Researchers analyzed intake data from 1082 patients admitted between October 2015 and April 2017 to the Addiction Medicine Service, an inpatient treatment program at Homewood Health Centre (Guelph, ON). Data were collected as part of standard clinical practice and included

measures of substance use severity and psychiatric symptoms (depression, anxiety and trauma). Analyses were conducted to determine which factors predicted whether or not patients completed treatment. In addition, analyses were conducted to identify profiles of patients who were more likely to leave treatment early.

WHAT DID THE RESEARCHERS FIND?

Patients who reported high severity of drug use or trauma symptoms were at more risk of leaving treatment early. Those who reported high severity of alcohol use or were employed/looking for a job were at less risk.

In addition, four distinct patient profiles were identified based on severity of substance use and psychiatric symptoms. Among those profiles, patients with high drug use and psychiatric symptoms (depression, anxiety and trauma), but low alcohol use, were at highest risk of leaving treatment early. Meanwhile, patients with high alcohol use, but low drug use and psychiatric symptoms, were at lowest risk for leaving treatment early.

WHY IS THIS IMPORTANT?

These findings highlight the need to identify and treat concurrent psychiatric symptoms during inpatient addiction treatment so to improve treatment retention. More specifically, clinicians and service providers may look for ways to

RESEARCH SNAPSHOT

identify “high risk” patients during intake and develop care paths that address co-occurring symptoms of depression, anxiety or trauma. Doing so may help retain patients in treatment longer and improve longer-term recovery outcomes.

VIEW THE FULL ARTICLE

Syan, S.K., Minhas, M., Oshri, A., Costello, J., Sousa, S., Samokhvalov, A.V., Rush, B., MacKillop, J. (2020). Predictors of premature treatment termination in a large residential addiction medicine program. *Journal of Substance Abuse Treatment*. <https://doi.org/10.1016/j.jsat.2020.108077>

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KEYWORDS

Drop-out; Substance use disorders; Relapse; Treatment; Recovery

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