

Belmont Behavioral Health treats Drug and Alcohol Addiction

One day, one patient at a time

Those who care for patients with drug and alcohol issues at the Belmont Center for Comprehensive Treatment utilize some tried-and-true strategies, such as detoxification, medication management, a 12-step recovery model, and individual and group therapy. They also utilize some new and innovative treatment ideas.

In Belmont's Addictions Programs, some former patients who are in long-term recovery are also part of the trained care team in both inpatient and outpatient services. According to Belmont psychiatrist Thomas Richardson, DO, this role model-based, peer-to-peer association has been valuable. "Patients in recovery feel they have a lot to offer patients who are in treatment, and patients appreciate help from someone who has walked in their shoes," he says. "It's also their way of giving back. We've found that their participation adds greatly to the overall program." And the program starts, of course, with a first step.

Access and evaluation – the first step

Patients seeking treatment for drug and alcohol addictions come to Belmont through a number of avenues, including community-based physician referrals, transfers from crisis centers like the one Belmont maintains at Germantown Community Health Services, and evaluations in their own access center. Regardless of where patients start their journeys toward recovery, though, all admissions are screened for drug and alcohol abuse, as well as for co-morbid psychiatric illnesses.

For Dr. Richardson, working with referring physicians is especially rewarding, because he feels that part of his mission is to encourage healthcare providers to ask their patients more questions if they suspect a patient has a problem with an addiction or other substance abuse issue. "Addiction is often overlooked or not addressed adequately," explains Dr. Richardson. "I encourage healthcare providers to contact us with questions so that we can help co-manage their patients, whether through evaluation, consultation or with an admission for treatment."

Inpatients get intensive care

Belmont offers intensive inpatient skilled care for medical treatment and surveillance during detoxification, especially when patients detox from addictions to some of the more serious and life-threatening substances, such as alcohol and sedative drugs. Dr. Richardson uses a benzodiazepine taper for patients dependent on those two classes of drugs. For detox from opiates, a clonidine taper and palliative medications are used as needed. "We currently do not use methadone or buprenorphine for detox, but we can maintain someone who is already on either," explains Dr. Richardson. "We try to keep a patient as comfortable as possible, but detox and recovery are never easy."

The benefits in total care

Another benefit of referring patients to Belmont relates to the nature of the center and its variety of psychiatric services. As a free-standing facility with medical staff and specialty units such as geriatric, child and adolescent, eating disorder, and affective disorders, patients can move seamlessly from one service to another as needed. “With so many psychiatric specialty units, we are able to offer a very ‘fluid’ treatment setting and a collegial atmosphere where it is easy to get a consult from another psychiatric specialist,” says Dr. Richardson. “Patients being treated for substance abuse will often have co-occurring psychiatric diagnoses, such as depression, bipolar disorder, anxiety, schizophrenia, or eating disorders.”

Although electroconvulsive therapy (ECT) does not address the addiction itself, it can be used to treat an underlying mood disorder that often accompanies substance abuse and provides an important adjunct to substance abuse treatment.

New federal program identifies potential abuse problems

For potential clients who may not have apparent substance abuse problems but are clearly headed toward trouble, a new program offers screening through the Einstein Emergency Department, plus brief interventions and referral to Belmont. Funded by a federal Substance Abuse and Mental Health Services Administration grant, the SBIRT program (Screening, Brief Intervention, Referral and Treatment) aims at decreasing the frequency and severity of drug and alcohol use. The grant, won by the Einstein Department of Emergency Medicine, offers biomarker screening and data collection from patient reports as well as screening tools, such as the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST).

“Significant numbers of people being treated in ERs nationwide also have alcohol and drug abuse issues, and this program will be one way to help identify them and provide help,” explains Vincent Wright, MS, director of the outpatient program at Woodside Hall at Belmont. “The brief interventions are educational and motivational in nature and aimed at providing outpatients with increased insight and motivation toward change.” Interventions can involve multiple (up to 26) sessions or consist of just a single session.

The counseling sessions are aimed at reducing alcohol use for people who do not fall under categories of dependency or abuse. Screening will indicate the degree to which intervention is called for and provide, if appropriate, immediate referrals to Woodside Hall.

Noting that it is often the family physician or the Emergency Department physician who suspects a patient may have a substance abuse problem not otherwise readily apparent, Wright emphasizes that by contacting Belmont, physicians can quickly have a patient screened. “Physicians are encouraged to call us when they want to have a patient screened or admitted to the appropriate level of care, whether inpatient, intensive

outpatient or outpatient,” he says. “We have full-time staff who provide intake services at 215-581-3700.”

12-step model still useful

Dr. Richardson explains that one of the psychosocial foundations for addiction treatment – the 12-step approach of Alcoholics Anonymous and Narcotics Anonymous that has helped so many for so long – is also available. “Our on-campus 12-step program is a spiritually based, nondenominational program,” explains Dr. Richardson. “We are respectful of individual beliefs. The higher power invoked as central to a 12-step program is that higher power as identified by the patient.”

Inpatient to outpatient

Programs such as traditional 28-day inpatient rehabs are disappearing in an era of managed care; many insurance companies are not paying for them, and many patients cannot afford to pay for them. Because of this, outpatient programs must be more numerous and more intensive.

“We have a 24-bed inpatient unit and there is no limit to the number of outpatients we treat at any given time,” explains Dr. Richardson, who focuses on treating the whole patient, including family members, and with attention paid to complicating medical conditions. In addition, Belmont case managers take an active role in placing patients who will be discharged to halfway houses or shelters. “We make sure that everyone has somewhere to go,” says Dr. Richardson.

Belmont Behavioral Health is one of the largest, most comprehensive behavioral health systems in Philadelphia. For 70 years, Belmont has provided compassionate, quality behavioral health care to people of all ages. To learn more about our services and locations, call 215-877-2000.