ADDRESSING CHRONIC DISEASES

Health-Management Strategies for Use with Behavioral Health Clients

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SCOPE AND SEQUENCE

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Introduction to Addressing Chronic Diseases

The goal of Addressing Chronic Diseases is to help health professionals and their clients learn about and address chronic health conditions that commonly occur in people who have mental health and substance use disorders (or addiction). Helping clients learn about their physical health and effective prevention and treatment options for chronic diseases is an important part of shared decision-making in the management of their physical health along with treatment for mental health and/or substance use disorders.

About the Authors

The authors of Addressing Chronic Diseases are clinicians and researchers who have worked extensively with people who have mental health, substance use, and chronic medical conditions in multiple types of treatment settings.

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What Topics Are Covered?

Each chapter of Addressing Chronic Diseases focuses on one chronic health condition. For each health condition, it covers what the condition is, what causes it, how to screen for it, and what to do if it is present. Providers can read these chapters for education and guidelines on the chronic diseases that commonly occur in their clients. Each chapter also includes a reproducible Fact Sheet that a provider can use to educate clients on each chronic illness, and an Action Plan that can be used as a shared decision-making tool to help the client choose and commit to proven self-management strategies. Also included is a Quick Start Guide to Facilitating a Health Management Session, which provides step-by-step instructions on how to prepare and conduct a session with clients. See Appendix A for a sample Fact Sheet. See Appendix B for a sample Action Plan. See Appendix C to view the Quick Start Guide.
The primary chapters of *Addressing Chronic Diseases* are:

Chapter 1: High Blood Pressure (Hypertension)
Chapter 2: Heart and Blood Vessel Disease (Cardiovascular Disease)
Chapter 3: Overweight and Obesity
Chapter 4: Smoking and Tobacco Use Disorder
Chapter 5: Diabetes (Diabetes Mellitus)
Chapter 6: Chronic Lung Diseases (Asthma and COPD)
Chapter 7: Sexual Health, Family Planning, and Sexually Transmitted Diseases
Chapter 8: Common Chronic Pain Conditions
Chapter 9: Cancer
Chapter 10: Thyroid Disease (Hypothyroidism and Hyperthyroidism)
Chapter 11: Digestive Disorders (Gastrointestinal Disorders)
Chapter 12: Wellness and Self-Management

**Why Address Chronic Diseases in Treatment of Addiction or Mental Health Disorders?**

About half of Americans have chronic physical health conditions. More than 35 percent of Americans were obese in 2013. Almost 20 percent of Americans smoked cigarettes. Both mental health disorders and addiction are associated with higher rates of chronic health conditions, which lead to poor quality of life, disability, and early mortality. These diseases are largely preventable, and when they occur, they are treatable. As people with mental health and addiction problems get into recovery, they will become interested in expanding their recovery to include their physical health. Addiction and mental health treatment professionals can help clients avoid acquiring chronic conditions such as heart disease and diabetes—or to better manage them if they are present—through screening, supporting treatment, and helping them engage in a healthy lifestyle.

Additionally, chronic conditions can exacerbate mental health and addiction problems; and the reverse can also be true. Having a better understanding of the whole person, what chronic health conditions are, and how they interact with mental health and addiction will help providers steer clients to a more effective path to whole health recovery.
Who Can Use Addressing Chronic Diseases?

Addressing Chronic Diseases is designed to be easily understood by both medical and nonmedical professionals as well as by laypeople. It can be used in any setting where healthcare providers are working to improve the lives of people with substance use and/or mental health disorders, including addiction treatment or mental health treatment settings (inpatient, outpatient, or residential). Health management sessions can be facilitated by a clinician, counselor, coach, or peer support member. Both clients seeking recovery from substance use and/or mental health disorders and their families will find this information useful.

Why Should You Purchase and Use Addressing Chronic Diseases?

You can use Addressing Chronic Diseases to guide your clients toward a more effective path to whole health recovery with increased resiliency, wellness, and higher quality of life. You can help to avoid client treatment failures due to worsening of chronic physical health conditions.

Many of our clients enter treatment with one or more physical chronic diseases to manage. Even if they do not currently have a chronic disease, they are at high risk for acquiring one or more of the common chronic diseases found in people with a mental health and/or substance use disorder. We know that chronic physical diseases can exacerbate mental health and addiction problems; and the reverse can also be true. Treating the whole person is the best way to ensure optimal short- and long-term treatment outcomes.

Addressing Chronic Diseases is a great addition to your practice because it is:

- **Essential:** We know most of our clients enter treatment with one or more physical chronic diseases to manage and all are at a higher risk of acquiring physical chronic diseases.

- **Comprehensive:** It covers the most common chronic physical diseases our clients face.

- **Effective:** Help your clients avoid acquiring chronic conditions such as heart disease and diabetes—or to better manage diseases that are present—through screening, supporting treatment, and helping them engage in a healthy lifestyle.

- **Easy to Use:** Includes simple, step-by-step instructions (in the form of a Quick Start Guide) on how to prepare and conduct a health management session with clients.
• **Actionable:** Includes an Action Plan that a provider can use as a shared decision-making tool to help the client choose and commit to proven self-management strategies.

**Learning Objectives for Clients**

After you conduct a health management session with clients, they will be able to:

• Identify the common physical chronic diseases that occur in people with a mental health and/or substance use disorder.

• Understand how chronic physical diseases can exacerbate mental health and addiction problems, and how the reverse can also be true.

• Create an action plan with self-management strategies focused on whole health recovery.

• Set goals for increased resiliency, wellness, and higher quality of life.

• Understand how to practice prevention to avoid common chronic physical health conditions.

• Understand how to manage existing chronic physical health conditions.
**Diabetes (Diabetes Mellitus)**

**What Is Diabetes?**

*Diabetes mellitus* is a disease that causes sugar, or glucose, in the blood to stay at higher levels than normal. About 8 percent of the U.S. population—more than 28 million people—have this serious disease. Although many people have no symptoms when they develop diabetes, people may notice increased hunger, thirst, and urination, as well as weight loss, fatigue, and blurry vision.

High blood sugar, called hyperglycemia, is harmful to the body. Over time, hyperglycemia damages the blood vessels, which increases the risk for kidney failure, blindness, foot ulcers that can lead to amputation, heart attacks, and strokes. Diabetes has no cure, but it can be controlled with diet, medications, and exercise, in addition to careful self-monitoring. Good control of diabetes can prevent the serious complications of the illness.

**How Common Is Diabetes?**

About eight in every one hundred people in the United States have this condition. At-risk groups include: people who are over age forty-five, overweight, prediabetic, sedentary, and African, Latino, American Indian, Asian, or Pacific Islander; people who are taking certain medications that increase the risk for diabetes; people who have hypertension, dyslipidemia (high cholesterol), or cardiovascular disease; women who had gestational diabetes in the past; and people who have a family member with diabetes. If you have any of these risk factors, you should be checked for diabetes at least every three years. If you are taking antipsychotic medications, or have a greater than 5 percent weight gain while on medications, you should be checked for diabetes much more often, at least annually.

**What Causes Diabetes?**

After you eat, sugars from the food pass through the wall of your small intestine into the bloodstream. From the blood, sugar is immediately transferred into the cells where it is used to make energy. Insulin is the hormone that pushes the sugar from the blood into the cells. In diabetes, there is either too little insulin, or the body doesn’t react to insulin normally so the sugars stay in the blood instead of going into the cells.

These factors can lead to diabetes type 2:

- being overweight or having obesity
- eating a diet with too many calories
- low physical activity
- high stress
- genetics: some people inherit a high chance of getting diabetes from their parents
- a history of diabetes during pregnancy
- women with polycystic ovary syndrome
- impaired fasting glucose (prediabetes)
- using cigarettes, alcohol, cocaine, and other drugs

**What Can I Do about Diabetes?**

You can do many things to prevent or treat diabetes:

- Know your numbers! Know your ABCs and discuss ways to keep these numbers low with your medical providers.
  - A = A1C measurements to maintain healthy blood sugar levels (under 7 percent or under 8 percent, depending on your diagnosis)
  - B = blood pressure levels under 130/90
  - C = cholesterol levels with LDL under 100
- Check your finger sticks as many times as recommended by your medical providers; record the numbers carefully and show your doctor.
• Take your prescribed medication, including insulin if prescribed to you, every day.
• Quit smoking.
• Cut down on the amount of alcohol you drink or stop drinking alcohol. Avoid other drugs.
• Maintain a healthy weight.
• Lose weight if you are overweight.
• Get 30 to 60 minutes of vigorous exercise daily, such as brisk walking.
• Learn and practice relaxation strategies, such as mindful breathing, meditation, and yoga.

People with diabetes need to take an active role in managing their illness. Using medications, eating healthy foods, exercising regularly, avoiding alcohol and other drugs, and quitting tobacco will dramatically improve your quality of life and health.

Where Can I Learn More?
The ADA website includes a lot of helpful information, including the “Create Your Plate” program materials that can help you maintain a healthy diet.
Appendix B: Sample Action Plan

Overweight and Obesity

1. My weight is _____ pounds.

2. My BMI is _____.
   
   BMI 18.5–24.9 = normal
   BMI 25–29.9 = overweight
   BMI 30–35 = obesity
   BMI ≥ 36 = severe obesity

3. My waist circumference is _____ inches.
   
   More than 35 inches in women or 40 inches in men increases health risks.

4. I have obesity.
   
   ___ I will make an appointment with my physician to talk about my weight.
   
   ___ I will talk to my physician about my diet, exercise, and any other risk factors for obesity I might have.

5. I will also take the following steps:
   
   a. I will change my diet by
      
      □ using smaller plates for smaller portions.
      
      □ eating fewer of these high-sugar foods (including sodas and desserts): __________________________
         __________________________
      
      □ eating fewer of these fried and other high-fat foods: __________________________
         __________________________
      
      □ eating more of these fruits and vegetables: __________________________
         __________________________
b. I will exercise more. My plan:

- Get permission from my physician to increase my exercise.
- Increase my amount of exercise by ___ minutes a day, doing ____________________________.
- Other step(s): ____________________________.

C. I will reduce stress in my life. My plan:

- Be mindful of my eating, and avoid eating in response to stress.
- Use these strategies to deal with stress: ____________________________.
- Other step(s): ____________________________.
Appendix C: Quick Start Guide

Quick Start Guide to Facilitating a Health Management Session

Use these steps to conduct a health management session on one of the topics below. Sessions may be conducted with groups or individual clients. Each session can be delivered in approximately 50 minutes.

Chronic Disease Topics:

- Chapter 1: High Blood Pressure (Hypertension)
- Chapter 2: Heart and Blood Vessel Disease (Cardiovascular Disease)
- Chapter 3: Overweight and Obesity
- Chapter 4: Smoking and Tobacco Use Disorder
- Chapter 5: Diabetes (Diabetes Mellitus)
- Chapter 6: Chronic Lung Diseases (Asthma and COPD)
- Chapter 7: Sexual Health, Family Planning, and Sexually Transmitted Diseases
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- Chapter 9: Cancer
- Chapter 10: Thyroid Disease (Hypothyroidism and Hyperthyroidism)
- Chapter 11: Digestive Disorders (Gastrointestinal Disorders)
- Chapter 12: Wellness and Self-Management

We recommend that you cover Chapter 12: Wellness and Self-Management with all clients before moving on to the specific chronic disease topics.

Facilitator Preparation:

- Choose one of the chronic disease topics (listed above) to present to the client(s).
- Read the background information, as well as the Fact Sheet, to become familiar with the chosen topic.
- Photocopy or print the Fact Sheet and Action Plan for the client(s).
- Gather pens or pencils for the client(s) to use to fill out the Action Plan.
Step 1: Overview
Welcome the clients and explain the purpose of the health management session and what they will learn.

SAY: This health management session will teach you about a chronic disease common among Americans, and even more common in people with mental health or substance use problems. A chronic disease is a long-term condition that can't be cured, but can be managed to help people have the best quality of life possible. For example, diabetes is a common chronic disease that requires ongoing management. People with diabetes live better when they monitor their blood sugar, take medications to lower their blood sugar, adjust their diet, and increase their exercise.

If you do not have the disease covered in this session, you will learn about the disease and how to reduce your chance of getting it. If you do have the disease, you will learn how to manage the disease, and you will be encouraged to create an action plan to guide your efforts.

Taking an active role to improve your health and wellness is an important part of daily living. No matter what your current health status, you can take steps every day to manage hunger, fatigue, discomfort, and emotions and improve your health and well-being.

Step 2: Facilitate the Session
1. Hand out a copy of the Fact Sheet on the chosen topic to each client.
2. Invite the client to take turns reading paragraphs with you. For clients who have trouble reading, you can read aloud the entire Fact Sheet. In a group, you may ask clients to take turns reading aloud. Make sure they know they can pass if they are not comfortable reading.
3. Pause to invite questions and provide clarification after each paragraph. Taking time to process the information will improve people's comprehension and help them stay engaged with the session.
4. Hand out a copy of the Action Plan for the chosen topic to each client. Clients who are ready may fill out the Action Plan in group. Or, they may fill it out in a later, private session.
5. Encourage clients to take the Fact Sheet with them and use the web resources section to learn more about the chronic disease.

Step 3: Summarize the Session
Encourage clients to talk about what they learned in the session and share any concerns they have about managing their health.