

Giving up cigarettes linked with recovery from illicit substance use disorders

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Smokers in recovery from illicit drug use disorders are at greater risk of relapsing three years later compared with those who do not smoke cigarettes. Results of the study by researchers at Columbia University's Mailman School of Public Health and the City University of New York appear online in *The Journal of Clinical Psychiatry*.

Most adults who have illicit drug use disorders also smoke cigarettes. Yet while treatments for substance use disorders traditionally include and require concurrent treatment for addiction to all substances—including treatment for and required abstinence from alcohol and any other illicit substance use—treatment for nicotine dependence has not routinely been part of treatment for illicit substance use problems.

"The thinking in clinical settings has been that asking patients to quit cigarette smoking while they try to stop using drugs is "too difficult," or that smoking may be helpful in remaining abstinent from alcohol and drugs, but it is not related whether or not one remains abstinent from illicit drug use over the long term," said Renee Goodwin, PhD, of the Department of Epidemiology, Mailman School of Public Health, who led the research.

The researchers studied data from 34,653 adults enrolled in the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) who were assessed at two time points, three years apart, on substance use, substance use disorders, and related physical and mental disorders. Only those with a history of illicit substance use disorders according to DSM-IV criteria were included in the final sample. Daily smokers and nondaily smokers had approximately twice the odds of relapsing to drug use at the end of the three-year period compared with nonsmokers. The relationships held even after controlling for demographics and other factors including mood, anxiety, alcohol use disorders, and nicotine

dependence.

Specifically, among those with remitted substance use disorders who were smokers at the beginning of the study, more than one in ten (11 percent) who continued smoking three years later relapsed to illicit substance use three years later, while only 8 percent of those who had quit smoking and 6.5 percent of never smokers relapsed to substance use three years later. Among those who were non-smokers, smoking three years later was associated with significantly greater odds of substance use disorders relapse compared to those who remained non-smokers.

"Quitting smoking will improve anyone's health," says lead author Andrea Weinberger, PhD, an assistant professor in the Department of Epidemiology and Population Health, Albert Einstein College of Medicine. "But our study shows that giving up cigarettes may be even more important for adults in recovery from illicit substance use disorders since it may help them stay sober."

"If research continues to show a relationship between smoking and relapse to substance use among those in recovery, making tobacco treatment a standard part of treatment for illicit substance use disorders may be a critical service to provide to adults toward improving substance treatment outcomes over the long term," suggested Dr. Goodwin.

Provided by Columbia University's Mailman School of Public Health



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