Addiction Medicine Update

Commentary

Addiction as Disease Model

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How to Deliver a More Persuasive Message Regarding Addiction as a Medical Disorder

Commentary, Keith Humphreys, PhD Journal of Addiction Medicine

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How to Deliver a More Persuasive Message Regarding Addiction as a Medical Disorder

Keith Humphreys, PhD

Many members of our field are frustrated that the public does not see addiction as a legitimate medical disorder which should be compassionately addressed as a health problem rather than a criminal justice problem. Although some attribute the disconnect to the public’s lack of scientific knowledge or attachment to outdated moral views regarding substance use, this commentary suggests that the problem may well be our own messaging. We would be more persuasive if we acknowledged that addiction is different from most medical disorders because of its high negative externalities, and that this understandably makes the public more scared of and angry about addiction than they are about conditions like asthma, type II diabetes, and hypertension. Relatedly, because of the amount of violence and other crimes associated with addiction, we should acknowledge that the public’s belief that law enforcement has an important role to play in addressing addiction has an important basis.

and what we say about the status of addiction as a health problem turns many people off, because it is incomplete in some respects and perhaps even inappropriately scolding in others. I write as someone who believes that addiction is best understood as a legitimate medical disorder, but who also believes that we need better messaging to persuade people outside of our bubble of wisdom of that view.

The case for seeing addiction as a chronic medical illness is sound in many respects. The most widely cited articulation of this view noted that addiction shares many features with medical disorders such as asthma, type II diabetes, and hypertension (McLellan et al., 2000). All come about in part due to voluntary behavior, but are difficult to manage behaviorally once they are established. All may be caused in part by genetic factors and all respond to treatment that is provided on an ongoing basis. All require at least some
The Problem

- Humphries acknowledges that he has had many failures trying to persuade audiences that addiction should be viewed as a legitimate medical disorder.
The Problem

• *We* know that addiction is an illness

• The best solutions, therefore, as medical solutions, *not* criminal justice solutions

• But...the public does not always agree. They are often unpersuaded by our reasoned, scientific approach
Neurobiology
Addiction Medicine Field

• Addiction as a disease
  – Definition of addiction, brain disease, relapsing chronic illness
• Chronic illness model: asthma, HTN, DM, etc...
  – Have genetic component
  – Influenced by behaviors
  – Responsive to treatment
  – Treatment for some may be lifelong
• All compelling reasons that insurance should cover treatment
• And to be compassionate, not moralistic
What’s wrong with this model?

• Fails to address, or even sometimes acknowledge, the differences b/w addiction and other chronic illnesses

• Humphries poses these hypotheticals:
• If you had a financial manager who has access to all your accounts and personal information, would you consider that person developing a heroin addiction of any more consequence than him/her developing type 2 diabetes?

• If you were enrolling your child in a preschool, would you react in the same way if informed that the teacher was prone to methamphetamine binges as you would to learning that the teacher was prone to asthma attacks?
• Not addressing the fact that there are differences, is to deny the experience of many in the public.

• Given the number of individuals who have been victimized by people with addictions, intense negative feelings regarding these individuals should be expected.

• As we lecture the public about how people with addictions cannot fully control their brains, we should consider that this is also true for the rest of humanity as well.
• Our mantra: “addiction is a health problem, not a criminal justice problem”

• True: we cannot incarcerate our way out of the problem. Incarceration is neither an effective deterrent, nor a form of treatment.

• Not true: there is obviously a role for law enforcement

• If we pretend otherwise, our message gets lost
A better analogy?

• Infectious Disease model
• We accept that people with certain infectious dx’s can pose a risk to the public, and therefore, some fear is rational.
• We encouraged the public to take precautions: safe sex, etc...
• We accept a law enforcement role in some cases: quarantines, directly observed therapy
A better analogy?

- The infectious disease model still allows for all the elements of the chronic disease model

- But also has the unique advantage of better matching the public’s experience of the disorder
Humphries notes that after many failures trying to persuade audiences that addiction should be viewed as a legitimate medical disorder, he now starts by

- acknowledging the pain addiction causes to those who do not have it,
- expressing compassion for those victims,
- stating that he is not minimizing or excusing what happened to them when he says that addiction is a health problem warranting compassionate care.