

*Meds, Moods and
Comorbidities
Management Considerations*

▶ *for Stimulant Use Disorder*

Jared Bonis NP & Dr. Tara Leary

Jared Bonis

- Nothing to disclose

Dr. Tara Leary

- No disclosures

Disclosures

- Discuss patient centered approaches and considerations for the management of Stimulant use disorder

Learning
objective

Mr. Mill Lions

Presents to Addiction Clinic as a self referral

No MRP (recently retired) - no routine PC in 3 yrs

5 year history of Cocaine use via nasal route

.5 g every wk or so year 1-2 “with friends, for a party”

Increased to 1-2 g every week year three “able to so why not”

Last year or so “as much as I can get whenever there is access” (7-10g a week)

- Reason for referral
- Near death experience.
 - “ I had to buy from a different guy because of Covid, my cocaine was laced with something and the next thing I know I am in the ER”
- Tried to quit after this but was not able to
 - “Life was just dull and I was so depressed stuck in my house with this Virus
 - My mood is 10x worse
 - Bought 5 g of cocaine and “couldn’t stop , just used everything in 2 days”

Goal for treatment: to take a break for a few months but would be nice to be able to still enjoy with friends sometimes once this is under control

Past medical

- High blood pressure
- History of depression and anxiety - tried a few SSRIs in the past,
- Medications:
 - Norvasc
 - ? Cipralelex - pt notes he has it but takes it infrequently

Building a plan for *Mr. Lions*

- Medications
- Case management needs
- Community supports to engage
- Contingency Management?

CLINICAL PEARLS?

And

Conversation