Adolescent Substance Use and Psychiatric Comorbidity: What Factors Predict First Use and PTSD?

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INTRODUCTION & HYPOTHESIS

Adolescents begin experimenting with illegal substances at earlier ages than ever before, and prepubescent exposure to illegal substances has been linked to greater psychosocial impairment, suicide, and legal problems in adolescence. Research investigations are exploring pre-existing mental health conditions that can lead to early substance use and eventual substance use disorders (SUDs), such as posttraumatic stress disorder (PTSD). However, prior work has been limited by non-clinical samples, samples with insufficient number of substance dependent girls, and non-representative samples selected for clinical trial investigations. Using the largest sample to date of a clinical population of substance dependent youth with equal gender proportions, we hypothesized the following:

1) Youth who used illicit substances before age 13 are more likely to develop a SUD with greater impairment across clinical variables.

2) Substance dependent adolescents with PTSD are more likely than ever before, and prepubescent exposure to illegal substances during school-aged years were more likely to have begun using before age 13, with the majority of youth demonstrating PTSD symptoms before first use.

RESULTS

Substance dependent youth with comorbid PTSD were significantly more likely to have begun using before age 13, with the majority of youth demonstrating PTSD symptoms before first use.

PTSD symptomatology predating first use significantly correlated with history of sexual abuse ($X^2 = 5.88, p<0.05$) and self-harm ($X^2 = 3.5, p<0.05$).

Youths who began experimenting with illicit substances during school-aged years were more likely to enter treatment at a younger age with hallucinogen dependency, tranquilizer dependency, and comorbid PTSD.

Sixty percent of youths with comorbid PTSD first experienced PTSD symptoms before they began experimenting with substance(s).

CONCLUSIONS

Our data presents the following pattern: those with PTSD were more likely to have begun using before age 13 before becoming substance dependent.

Pre-existing PTSD symptoms before illicit substance use was significantly associated with a history of sexual abuse and self-harm.

Early recognition and intervention in youth with psychiatric diagnoses could prevent early first use and eventual substance dependency.

Recognition of psychiatric risk among youth could prove valuable indicators of increased risk for PTSD which preceded first use in the majority of cases in this substance dependent youth population. Our findings support the need to evaluate youth with SUDs for comorbid psychiatric illnesses.

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