



Physical Health and People with a Severe Mental Illness

Substance and Alcohol Misuse

Using this slide set

This slide set is one of four, designed to be a teaching aid in the management of the physical health of people with a severe mental illness. The slide set should be used with the accompanying fact sheet on alcohol and substance misuse disease.

The slide set is based on a consultation with Amir, an imaginary patient. Each slide set poses a separate set of clinical issues for the Family Doctor and their team. However, there is a chronology to the slide sets, and this slide set represents the fourth of four consultations with Amir.

This slide set can be used in a small group setting, to prompt discussion on the care of people with a severe mental illness. The audience might be a primary care team of health care professionals, a joint meeting between mental health and primary care doctors, or a postgraduate educational meeting.

The Context

- 46% of people with a severe mental illness have a Non Communicable Disease (NCD)
- They die 15 – 20 years earlier than they would have done if they had not had a severe mental illness
- Causes of this premature mortality include:
 - Genetics
 - Deprivation
 - Medication
 - Lifestyle
 - Health professionals attitudes

Learning Objectives

Clinical

- Harmful alcohol use is more common and is associated with increased mortality
- Substance misuse is more common
- People with SMI are at greater risk from blood borne viral (BBV) diseases

Organizational

- Communication with the mental health team is essential
- Sharing clinical information is essential
- Primary care team members are essential – nursing, care coordination, dietitian, community care worker (when available)

Amir



Clinical Background:

- Amir is a 38 year old man
- PMH:
 - Schizophrenia diagnosed 22 years ago
 - Diabetes
 - Raised cardiovascular risk score (QRISK2 27%)
- Family History: Both parents have diabetes
- Smoking History: recently stopped smoking
- Social History: no record of employment status

Amir

Issues for the Clinician

- Is Amir using alcohol or street drugs?
- Has he been using them in the past – and if so have they had any lasting effects?
- What is Amir's view on whether further investigation is appropriate?

Fact Sheet

- Alcohol misuse and BBV diseases are more common
- Treatment interventions are effective

Amir



The reason for the consultation:

- Amir was recently discharged following a five month admission for schizophrenia. During this admission his medication was changed to clozapine
- Following discharge he developed diabetes
- He stopped smoking, and developed clozapine toxicity as the dose of the medication had not been reduced
- He is visiting the nurse as part of his diabetic review

Amir



During the consultation:

- Amir apologizes to the nurse for his previous disruptive behaviour prior to his admission
- He explains that he was drinking much more alcohol than usual
- The nurse asks about his previous use of alcohol, and if he had in the past, used street drugs.

Amir

Issues for the Clinician

- Does he need advice about alcohol consumption, and if appropriate, treatment?
- Does he need (and does he want) to be screened for BBV diseases?

Fact Sheet

- Alcohol misuse is associated with increased mortality in this group, and a predictor of hospital admission
- BBV diseases are more common
- Treatment with an antipsychotic medication is not a contraindication for treatment for a BBV disease

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Quality Improvement:

Can you identify

- How many patients with a severe mental illness are in your practice population?
- How many have had an assessment of alcohol use in the last 12 months?
- How many have been offered screening for BBVs in the last 12 months?