

A New Approach to TBI Recovery

Brain Injury Rehabilitation and Substance Misuse Treatment

Contributed by Centre for Neuro Skills

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Increasingly, when workers experience a traumatic brain injury (TBI) on the job, an underlying malady that exacerbated the accident may be revealed – substance misuse. Too often, drugs and alcohol are involved in that fall from a ladder or jackknife of a tractor-trailer. Insurers and employers face complex challenges in settling such claims, especially with the rise of opioid and benzodiazepine misuse among employees.

Traditionally, treating brain injury and addiction simultaneously involved two rehabilitation efforts, one for TBI and another for substance misuse. TBI care is often the priority, but what about the employee's chemical dependency? If untreated, employers risk repeated accidents caused by impairment. However, a model of rehabilitation is emerging that treats both TBI and addiction, helping patients achieve and maintain sobriety as they recover from work accidents.

The need for dual diagnosis care is evident. Workers under the influence can create legal, physical, and financial harm. Causing injury or death to others is serious enough, but these individuals also face criminal charges, civil suits, unemployment, and damaged personal relationships. Serious consequences also affect worker's compensation insurers and the companies they serve, as two complicated health issues are involved in the claim. Thus, for the worker's compensation adjuster, treating TBI and addiction under one roof is cost effective.

Data on TBI and substance misuse illustrate the magnitude of injury and addiction (Corrigan, 1995; Bombardier, et al., 2003):

- Over 50 percent of persons who sustain a second TBI are under the influence at the time of injury.
- · An estimated two-thirds of persons who sustain a TBI

are intoxicated (BAC > 0.08) at the time of injury.

 People who misused alcohol or other drugs before a TBI are 10 times more likely to resume substance misuse after the injury (the first six months after injury may be a critical window for intervention).

The traditional approach has been to isolate the two conditions and treat them separately in a linear fashion rather than in a comprehensive holistic way. In the dual treatment model, patients still participate in deficit reduction therapies that address TBI issues. But they're also given counseling, education, and post-treatment tools to support sobriety. A multidisciplinary team thus addresses both conditions simultaneously, focusing on cognitive, physical, and behavioral improvement while introducing new methods of living drug free.

As powerful as this is, people in recovery can still revert to bad habits and drift into old haunts. The good news for insurers and employers is the treatment model's emphasis on relapse prevention. Lifestyle change is a core component, including an introduction to community-based support programs; nutrition, sleep, and physical health education; and establishing healthy daily routines. This departure from the cookie-cutter approach is becoming a path of rebuilding and healing the whole person.

Within the all-encompassing rehabilitation approach, the Transtheoretical, or Stage Change Model (Prochaska & DeClemente, 2005) is an established clinical approach being utilized by rehabilitation professionals who treat substance misuse in TBI patients. For many, the traditional or 12-step approach may not work, as the patient may not realize he or she has "hit bottom" despite a catastrophic work accident. Thus, the model provides a structured methodology that evaluates the readiness to change and helps patients work through that process. Without a foundation that sets up success, many people won't succeed.

Evaluate Readiness to Change



In tandem with intensive TBI therapy focused on independence, the model maximizes patient progress and achieves dual recovery. Adjusters and insurers also benefit, as they interface with the same treatment team and facility, from admission to discharge.



- When a patient's injury involves drugs or alcohol, consider a provider that can treat TBI and addiction in one facility.
 Simultaneous treatment of both issues maximizes the time and money spent on rehabilitation.
- Ensure that the facility offers community-based treatment, which focuses on reintegration with family and society while connecting patients with resources to maintain sobriety.
- The Transtheoretical or Stage Change Model provides a structured approach to substance misuse rehabilitation by assessing the readiness to change while helping patients work through that process.
- If untreated, employers risk repeated accidents caused by impaired workers.





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CNS now has six programs, located in Bakersfield, Los Angeles, San Francisco, Dallas, Fort Worth, and Houston. To make a referral, please call 800.922.4994 or visit neuroskills.com.

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