

Innovation and Trends in Behavioral Health September 22, 2021 | 2:00-3:00 p.m. ET

#### **Disclosure**

No planner, presenter or content expert has a conflicting interest affecting the delivery of this continuing education activity. Optum does not receive any commercial advantage nor financial remittance through the provided continuing education activities.

#### Medical disclaimer

Medicine is an ever-changing science. As new research and clinical experience broaden our knowledge, new treatment options and approaches are developed. The authors have checked with sources believed to be reliable in their efforts to provide information that is complete and generally in accord with the standards accepted at time of publication.

However, in view of the possibility of human error or changes in medical sciences, neither Optum nor any other party involved in the preparation or publication of this work warrants the information contained herein is in every respect accurate or complete, and are not responsible for errors or omissions or for the results obtained from the use of such information. Readers are encouraged to confirm the information contained herein with other sources.

This educational activity may contain discussion of published and/or investigational uses of agents that are not approved by the Food and Drug Administration (FDA). We do not promote the use of any agent outside of approved labeling. Statements made in this presentation have not been evaluated by the FDA.

#### **Disclaimer**

The display or graphic representation of any product or description of any product or service within this presentation shall not be construed as an endorsement of that product by the presenter or any accrediting body. Rather, from time to time, it may facilitate the learning process to include/use such products or services as a teaching example.

Accreditation of this continuing education activity refers to recognition of the educational activity only and does not imply endorsement or approval of those products and/or services by any accrediting body.

CE credits for this course are administered by the CEU Institute. If you have any issues or questions regarding your credits, please contact rosters@ceuinstitute.net.



#### **Presenters**



Tron Emptage, RPh, MA
Optum
Chief Clinical Officer



Cara Maxwell, PharmD
Optum
Clinical Pharmacist Liaison





#### What is Behavioral Health?

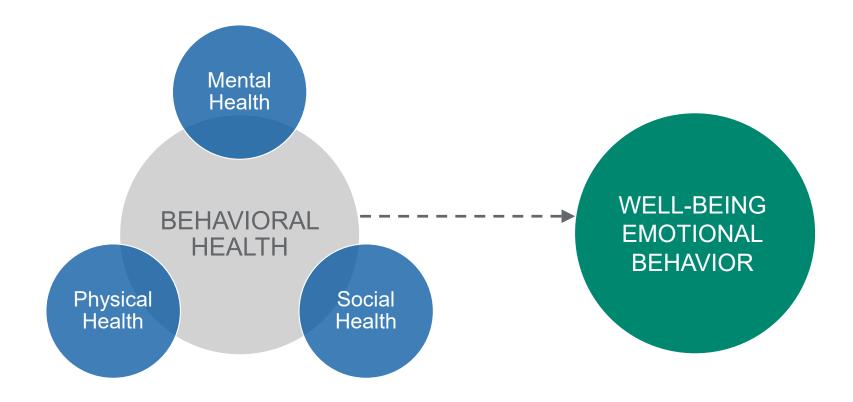
Behavioral health is how one's day-to-day thinking habits affect their overall well-being, emotions, biology, and behavior.

It is often used interchangeably with mental health, but it is a far broader term.

It incorporates not just mental wellness, but the way one's thoughts play out in real life.



#### **Behavioral health**





#### **Examples of Behavioral Health**



**GOOD BEHAVIORAL HEALTH** 

- Exercising
- Eating a healthy diet
- Maintaining a strong support system
- Managing an existing disease or injury



POOR BEHAVIORAL HEALTH

- Disordered eating
- Substance abuse
- Social isolation
- Disengagement



## Frequency of behavioral health issues in healthcare/workers' comp

\$193B per year

Lost earnings due to mental illness<sup>1</sup>.

People with depression have a 40% higher risk

of developing cardiovascular and metabolic diseases than the general population.<sup>1</sup>

- Concern is elevated for workers' compensation and auto no-fault claimants, as injuries can increase
  the risk or symptoms of certain mental health conditions, such as depression, anxiety, and posttraumatic stress disorder (PTSD).
- Additionally, injury-related symptoms, such as chronic pain and insomnia, can further precipitate and prolong symptoms of mental or behavioral health.

https://www.nami.org/mhstats Accessed 9/2021



## Risk factors in injured persons

#### **PRE-INJURY**



#### History of mental illness

Personal or family



#### Individual factors

Low self esteem, difficulty communicating, substance abuse



#### Social and economic factors

Low income and exposure to violence or abuse\*

#### **POST-INJURY**

Factors that can negatively affect underlying behavioral health conditions and symptoms



## Chronic pain and insomnia

Worsening pain, sleep disturbance and depression



#### Medications

For example: Opioid analgesics, benzodiazepines, anticonvulsants or stimulants



#### Drug-drug interactions

Increased sedation, fatigue and risk of overdose

1. Mental Health by the Numbers. National Alliance on Mental Illness. https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers. Accessed 9/19/2018



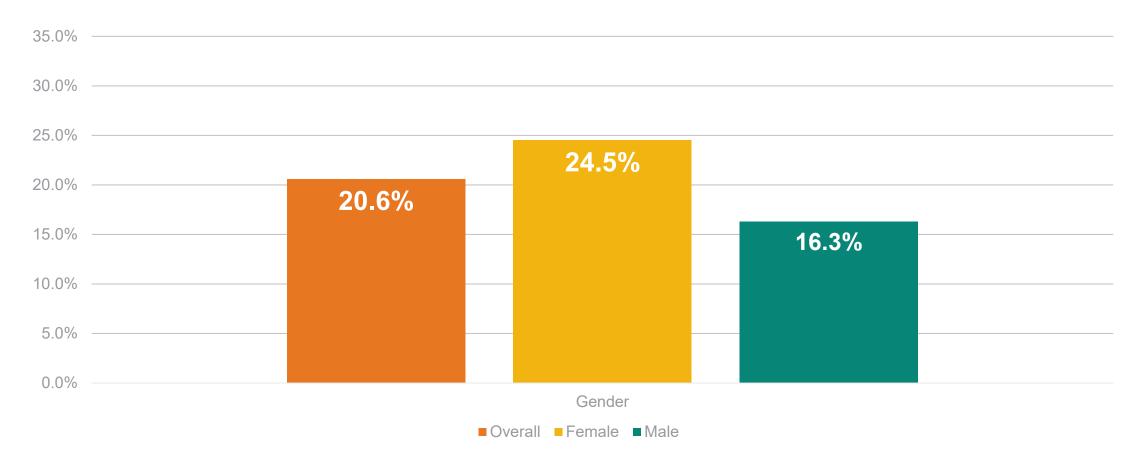
# Influencing outcomes by addressing behavioral health

Addressing the behavioral health concerns of injured persons:

- May increase the benefit or treatments and improve outcomes
- May decrease return to work times
- May help to decrease the use of controlled substances and help avoid misuse



## Past Year Prevalence of any mental illness among U.S Adults (2019) By Gender

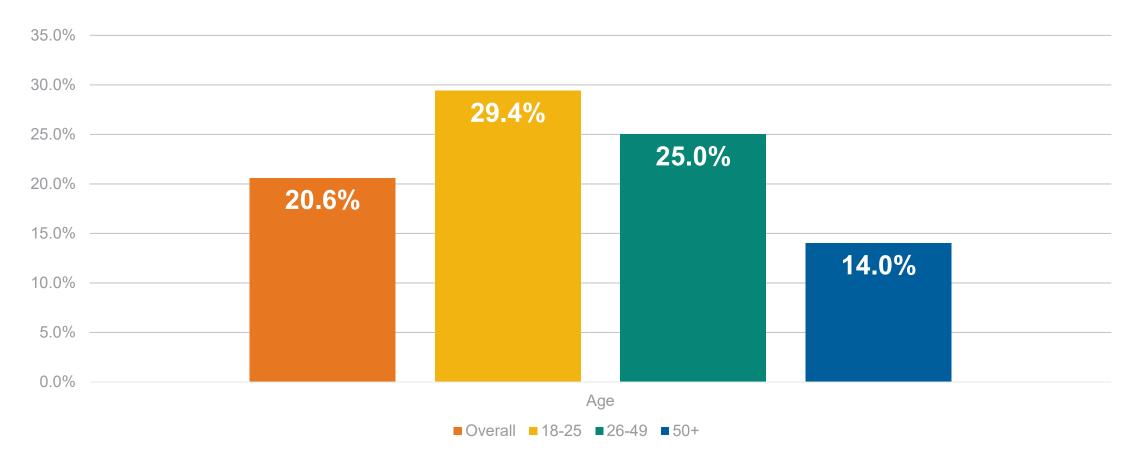


https://www.nimh.nih.gov/health/statistics/mental-illness

Data Courtesy of SAMHSA



## Past Year Prevalence of any mental illness among U.S Adults (2019) By Age

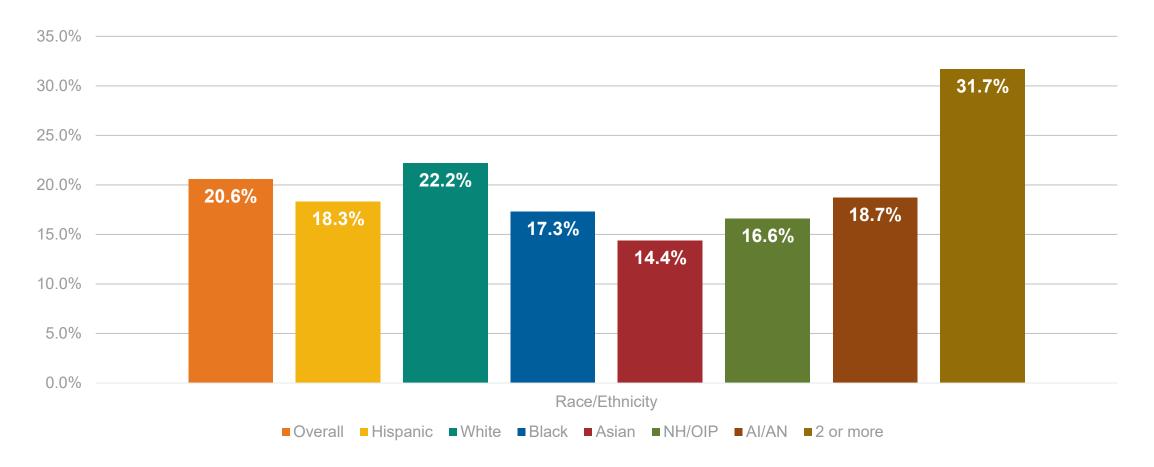


https://www.nimh.nih.gov/health/statistics/mental-illness

Data Courtesy of SAMHSA



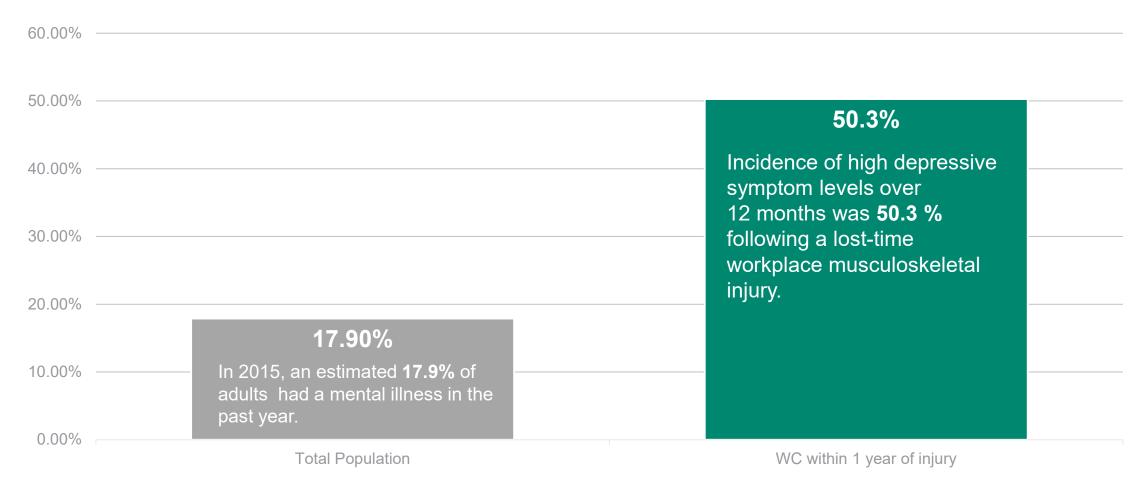
## Past Year Prevalence of any mental illness among U.S Adults (2019) By Race/Ethnicity



https://www.nimh.nih.gov/health/statistics/mental-illness
Data Courtesy of SAMHSA



## A comparison of prevalence



https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2015/NSDUH-FFR1-2015/NSDUH-FFR1-2015.htm#:~:text=Mental%20Health%20Issues%20among%20Adults,all%20U.S.%20adults%20in%202015. Data Courtesy of SAMHSA WC estimate is from https://escholarship.org/content/qt8w6609mg/qt8w6609mg/noSplash\_f1599685a115fbb293cfc52746851676.pdf



#### **Gender difference**



**FEMALE** 

- Higher number of eating disorders, depression, suicidal ideation and attempts
- Increased prevalence of depression and anxiety



MALE

- Younger males experience more anger and high-risk behavior
- Typically commit more suicide
- Higher percentage of substance use disorders and antisocial behaviors



## **Underlying factors in Women and Men**



#### WOMEN

- Genetic and biological factors
- Reproductive health issues
- Low self esteem
- Gender wage gap
- Economic factors / socioeconomic disadvantage



#### MEN

- Unemployment
- Family
- Divorce and romantic breakup
- Economic factors



# Some impacts of the COVID-19 pandemic

- Fear
- Anxiety
- Depression
- Confusion
- Social isolation
- Health





## **Mental Health Conditions**

#### **Mood Disorders definition**

- A condition that severely impacts one's mood and related functions.
- Broad term that includes different types of depression and bipolar disorder.
- Types include:
  - Major Depressive Disorder
  - Seasonal Affective Disorder
  - Bipolar I & II Disorders
  - Cyclothymic Disorders
  - Disruptive Mood Dysregulation Disorder
  - Persistent Depressive Disorder





## **Mood Disorders - depressive symptoms**

- Loss of interest in activities that were once enjoyed
- Appetite disruption
- Sleep disturbance
- Fatigue
- Crying
- Anxiety
- Feelings of isolation, loneliness, sadness, hopelessness and/or worthlessness
- Thoughts of dying and/or suicide



#### Trauma and Stressor-related Disorders definition

- Direct or indirect exposure to a traumatic event with effects on cognition and mood, and including symptoms of intrusion, avoidance, arousal and reactivity.
- Historically grouped with Anxiety Disorders and with different factors and symptoms.
- Types include:
  - Post-Traumatic Stress Disorder (PTSD)
  - Acute Stress Disorder (ASD)
  - Reactive Attachment Disorder
  - Disinhibited Social Engagement Disorder
  - Other Specified Trauma and Stressor-Related Disorder
  - Unspecified Trauma and Stressor-Related Disorder

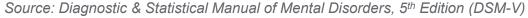
Source: Diagnostic & Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition (DSM-V)





## **Trauma and Stressor-related Disorders symptom clusters**

- 1. Recurrent experiences of the event; i.e., memories, dreams or flashbacks
- 2. Amplified arousal; i.e., sleep disturbances and reckless behavior
- 3. Avoiding thoughts, places and memories about the event
- 4. Negative thoughts, moods, or feelings





## **Trauma and Stressor-related Disorders**

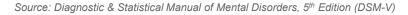
Domain	Select symptom - Potential difficulties	
PHYSICAL	<ul><li>Hypersensitivity to physical contact</li><li>Numbness</li></ul>	<ul><li>Coordination &amp; balance</li><li>Somatization</li></ul>
MEDICAL	<ul><li>Asthma</li><li>Autoimmune disorders</li><li>Psuedoseizures</li></ul>	<ul><li>Sleep disturbances</li><li>Disordered eating</li></ul>
COGNITIVE	<ul><li>Attention</li><li>Executive functioning</li><li>Learning</li></ul>	<ul><li>Processing difficulties</li><li>Language problems</li></ul>
BEHAVIORAL	<ul><li>Impulse control issues</li><li>Aggression</li><li>Self-destructive behavior</li></ul>	<ul><li>Opposition / defiance</li><li>Excessive compliance</li></ul>
EMOTIONAL	<ul><li>Affective dysregulation</li><li>Dissociative symptoms</li><li>Amnesia</li></ul>	<ul><li>Low self-esteem</li><li>Shame or guilt</li></ul>



#### **Substance Use Disorders definition**

- Patterns of symptoms resulting from the use of a substance, where the use of that substance persists despite problems as a result of doing so.
- SUD ≠ "Addiction"







#### **Substance Use Disorders definition**

American Society of Addiction Medicine (ASAM) definition of "addiction":

Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.

Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one's behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.



#### **Substance Use Disorders definition**

- SUDs occur on a spectrum; mild, moderate and severe
- Psychoactive substances grouped into 10 classes
- Classification now includes substance-induced and substance-related disorders as well



#### Substance Use Disorders criteria

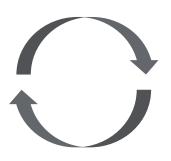
- Hazardous use
- Social or interpersonal problems related to use
- Neglected major roles related to use
- Withdrawal
- Tolerance
- Use larger amounts/longer
- Repeated attempts to quit/control use
- Much time spent using
- Physical or psychological problems related to use
- Activities given up due to use
- Craving



# The impact of behavioral health issues on physical health

## Physical and mental health = a bidirectional relationship

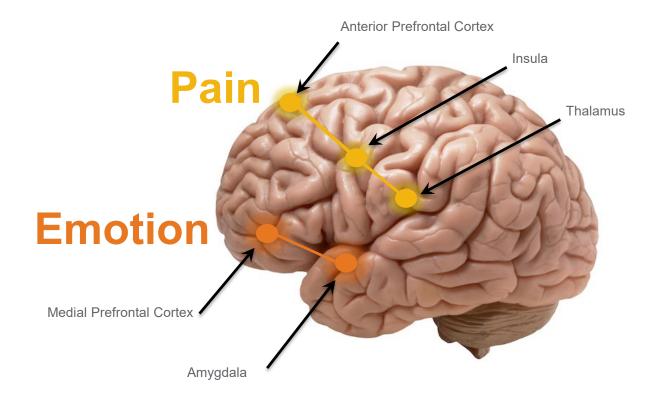








## Chronic pain and the brain

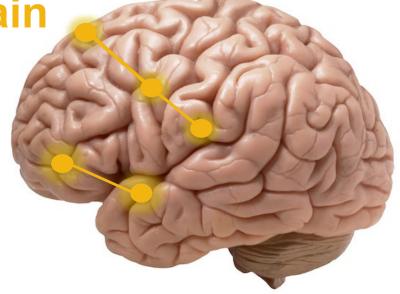




## Chronic pain and the brain

**Chronic Pain** 

PAIN activates areas of brain regulating EMOTION.

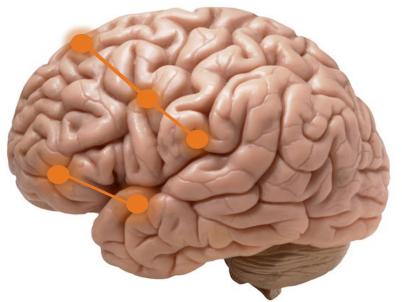




## Chronic pain and the brain

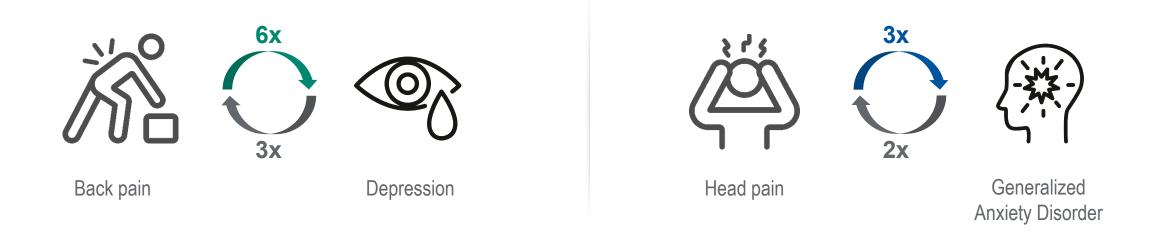
Depression & Anxiety

EMOTION activates areas of brain regulating PAIN.





## Physical and mental health a vicious cycle







## **Mental Health Medications**

## **Antidepressants**

- Antidepressants are medications commonly used to treat depression.
- Antidepressants are also used for other health conditions, such as anxiety, pain and insomnia.
- Some people may not feel better with the first medicine they try and may need to try several medicines to find the one that works for them. Others may find that a medicine helped for a while, but their symptoms came back
- The most popular types of antidepressants are called selective serotonin reuptake inhibitors (SSRIs).

#### **Example SSRIs:**

- Fluoxetine
- Citalopram
- Sertraline
- Paroxetine
- Escitalopram



## **Anti-Anxiety Medications**

- Anti-anxiety medications help reduce the symptoms of anxiety, such as panic attacks, or extreme fear and worry.
- The most common anti-anxiety medications are called benzodiazepines.
- Benzodiazepines can treat generalized anxiety disorder.
- Benzodiazepines are usually second-line treatments, behind SSRIs or other antidepressants.

#### **Example Benzodiazepines:**

- Clonazepam
- Alprozolam
- Lorazepam: Short- term anxiety symptoms

Cons of using anti-anxiety medication

- Increased tolerance
- Addiction



## **Antipsychotics**

Antipsychotic medicines are primarily used to manage psychosis including delusions, hallucinations, paranoia or disordered thought.

#### **Effects:**

- Hallucination
- Delusion
- Agitation

#### **Example Antipsychotics:**

- Chlorpromazine
- Haloperidol
- Perphenazine
- Fluphenazine

- Risperidone
- Olanzapine
- Quetiapine
- Ziprasidone
- Aripiprazole
- Paliperidone
- Lurasidone



### **Mood Stabilizers**

- Mood stabilizers are used primarily to treat bipolar disorder, mood swings associated with other mental disorders, and in some cases, to augment the effect of other medications used to treat depression.
- Lithium is approved for the treatment of mania and the maintenance treatment of bipolar disorder. It use as a long-term treatment.
- Anticonvulsant medications are also used as mood stabilizers.

### **Mood Stabilizer Medications:**

- Carbamazepine
- Lamotrigine
- Oxcarbazepine
- Valproic Acid



## **Medication Assisted Therapy (MAT)**

- Medications used to treat opioid use disorder, as well as prevent overuse and sustain abstinence
  - Reduce relapse
  - Reduce overdose and increase survival
  - Increased patients ability to gain and sustain employment
  - Decreased criminal activity
- Pharmacotherapy along with behavioral counseling is considered to be the standard of care

Medication	Indication
Methadone	Pain, opioid use disorder
Buprenorphine +/- naloxone	Pain, opioid use disorder
Naltrexone	Alcohol and opioid use disorder
Disulfuram	Alcohol use disorder
Acamprosate	Alcohol use disorder

https://www.samhsa.gov/medication-assisted-treatment



## Virtual Reality and Behavioral Health

Virtual reality (VR) is a futuristic robotics transmission interface in which the user is actively engaging in a computer-generated three-dimensional virtual world that incorporates computer sensory input devices used to mimic real-world interactive experiences.





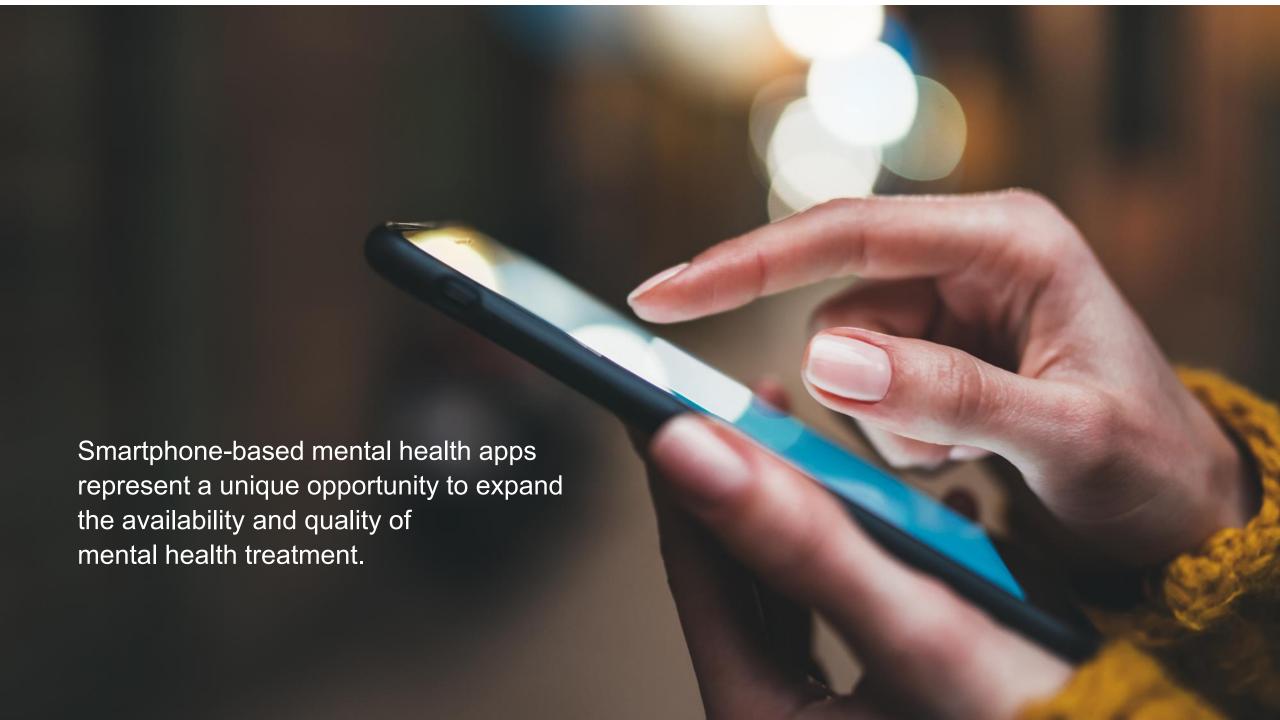
### **Benefits of VR**

- Psychiatric treatment for anxiety disorders
- Phobias
- Post-traumatic stress disorder
- Acute and chronic pain





# **Smartphone-based Applications**



### Effectiveness of apps on...

### **ANXIETY**

- Users experienced reductions in total anxiety
- Greatest reductions in anxiety symptoms when paired with face-to-face or internet-based therapies

#### **DEPRESSION**

- Significantly reduced patients' depressive symptoms compared to control conditions
- Greatest benefits for individuals with mild to moderate, rather than major, depression



### **Summary**

- Behavioral health is the scientific study of the emotions, behaviors and biology relating to a person's mental well-being, their ability to function in everyday life and their concept of self.
- The COVID-19 pandemic has negatively affected many people's mental health and created new barriers for people already suffering from mental illness and substance use disorders.
- Medications can play a role in treating several mental disorders and conditions
- The department of psychology and mental health is now pioneering VR to treat medical conditions such as behavioral health conditions
- Smartphone-based mental health apps represent a unique opportunity to expand the availability and quality of mental health treatment.



## Thank you!

You will receive an email from the CEU Institute on our behalf approximately 24 hours after the webinar. This email will contain a link that you will use to submit for your CE credits.

You must complete this task within 72 hours.

Register for additional Continuing Education opportunities http://www.workcompauto.optum.com/resources/continuing-education



CE credits for this course are administered by the CEU Institute. If you have any issues or questions regarding your credits, please contact rosters@ceuinstitute.net.

### Reference

- 1. Merikangas KR, He JP, Burstein M, Swanson SA, Avenevoli S, Cui L, Benjet C, Georgiades K, Swendsen J. Lifetime prevalence of mental disorders in U.S. adolescents: results from the National Comorbidity Survey Replication--Adolescent Supplement (NCS-A). J Am Acad Child Adolesc Psychiatry. 2010 Oct;49(10):980-9. doi: 10.1016/j.jaac.2010.05.017. Epub 2010 Jul 31. PMID: 20855043; PMCID: PMC2946114.
- 2. Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (HHS Publication No. PEP20-07-01-001). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from https://www.samhsa.gov/data/sites/default/files/reports/rpt29393/2019NSDUHFFRPDFWHTML/2019NSDUHFFR1PDFW090120.pdf.
- 3. Yao, H., Chen, J.-H., & Xu, Y.-F. (2020). Patients with mental health disorders in the COVID-19 epidemic. The Lancet Psychiatry, 7(4), e21. https://doi.org/10.1016/S2215-0366(20)30090-0
- 4. Maples-Keller JL, Yasinski C, Manjin N, Rothbaum BO. Virtual Reality-Enhanced Extinction of Phobias and Post-Traumatic Stress. Neurotherapeutics. 2017 Jul;14(3):554-563. doi: 10.1007/s13311-017-0534-y. PMID: 28512692; PMCID: PMC5509629.
- 5. Heron KE, Smyth JM. Ecological momentary interventions: Incorporating mobile technology into psychosocial and health behaviour treatments. Br J Health Psychol 2010;15:1-39. 10.1348/135910709X466063 [PMC free article] [PubMed] [CrossRef] [Google Scholar]
- 6. Johnston L, Titov N, Andrews G, et al. Comorbidity and Internet-Delivered Transdiagnostic Cognitive Behavioural Therapy for Anxiety Disorders. Cogn Behav Ther 2013;42:180-92. 10.1080/16506073.2012.753108 [PubMed] [CrossRef] [Google Scholar]
- 7. Morris ME, Kathawala Q, Leen TK, et al. Mobile Therapy: Case Study Evaluations of a Cell Phone Application for Emotional Self-Awareness. J Med Internet Res 2010;12:e10. 10.2196/jmir.1371
- 8. Rickard N, Arjmand HA, Bakker D, et al. Development of a Mobile Phone App to Support Self-Monitoring of Emotional Well-Being: A Mental Health Digital Innovation. JMIR Ment Health 2016;3:e49. 10.2196/mental.6202
- 9. https://www.nimh.nih.gov/health/topics/mental-health-medications/





#### About Optum Worker's Comp and Auto No-fault Solutions

Optum Workers' Comp and Auto No-fault Solutions collaborates with clients to lower costs while improving health outcomes for the claimants we serve. Our comprehensive pharmacy, ancillary and managed care services, including settlement solutions, combine data, analytics, and extensive clinical expertise with innovative technology to ensure claimants receive safe, efficacious and cost-effective care throughout the lifecycle of a claim. For more information, email us at expectmore@optum.com.

Optum and its respective marks are trademarks of Optum, Inc. All other brand or product names are trademarks or registered marks of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer.

© 2021 Optum, Inc. All Rights Reserved. CEU-21-805