

Thematic issue: Substance use and ageing

Nordic Studies on Alcohol and Drugs

2017, Vol. 34(1) 3–5

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DOI: 10.1177/1455072517693249

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In 2009, *Nordisk alkohol- & narkotikatidsskrift* (NAT: Sandelin & Wrede-Jäntti, 2009) published a thematic issue on alcohol and the elderly. The following year, the owner and former publisher of the journal, The Nordic Welfare Centre, followed up with a report on the same theme (Mørk & Simic, 2010). Both publications focused on the increased use of alcohol among the elderly. This increase was shown to stem from both a cohort effect (a more “wet” generation getting older) and genuine changes in alcohol attitudes and behaviour among the elderly. Combined with the demographic changes toward an ageing population, this led to concern about a future increase in alcohol-related problems among the elderly and increased pressure on the treatment service system.

Since 2009, the focus on the consequences of an ageing population on all aspects of society has become increasingly stronger. The combined effects of increases in the elderly population and in alcohol consumption by the elderly have become a topic of national health and social service authority reports and white

papers (see, e.g., Svenska Socialstyrelsen Lägesrapport, 2015; and the Norwegian Government, Ot. prop. 15, 2015–16). On the other hand, as shown in many of the articles in the NAT 2009 special issue, there is also a strong interest in presenting a more nuanced picture of alcohol and drug use among the elderly and the consequences that might be expected. As the life expectancy has increased and even reaching an age of over 100 years has become more frequent, the category “the elderly” contains more than two generations. Given the knowledge that differences in personal characteristics and chosen lifestyles often amplify with age, this means that the elderly population will be more diverse than ever before in terms of socioeconomic status, health, attitudes, and behaviour.

It remains an open question as to how ageing affects the use of alcohol and other drugs. This is discussed in different ways in this thematic issue of NAD. Bye and Rossow (2017) show that alcohol use in the 60+ general population age group decreases with age, although to a much smaller extent than one would expect;

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however, this trend was not found in the patient population studied by Johannessen et al. (2017). The articles by Næss and Nesvåg (2017) and Bergström (2017) demonstrate the wide spectrum of problems related to the use of alcohol, from the many health problems that can be only partially attributed to alcohol, to severe and long-term alcohol addiction problems. All too often, this variation in the type of problems is overlooked when we talk about “alcohol problems”.

The articles by Bye and Rossow, and Johannessen et al. show how the use of alcohol can be related to the use of other drugs which, among the elderly, is dominated by the use of psychotropic drugs. The use of such drugs clearly increases with age and often leads to health and social problems or to multiplying negative effects when combined with drinking.

The articles by Nyhagen and Waal (2017) and Gaulen, Alpers, Carlsen, and Nesvaag, (2017) show how, among an increasing number of people with a history of opiate addiction (now in substitution treatment), the ageing process becomes an important factor at a much younger age in terms of developing health and social problems. These articles show how ageing effects can be observed in people in their 50s and even 40s.

Four articles in this thematic issue deal with how alcohol (and other drug-use) problems among the elderly should be dealt with in the treatment and service system. Emiliussen, Andersen, and Nielsen (2017) show how difficult it is to make specialised alcohol treatment relevant for elderly people, even when they have severe alcohol problems. They describe how the elderly person’s relationships with his/her spouse and children are just as important in treating the elderly as in treating alcohol and drug problems among adolescents and adults.

The specialised treatment services have an obligation to develop their knowledge of the role of ageing in substance-use problems and to adapt their services to the needs of elderly people with such problems. It is known that

older people may benefit even more from treatment than do younger people (Moy, Crome, Crome, & Fisher, 2011). However, providing treatment for elderly patients is not an easy task. Gunnarsson and Karlsson (2017) show how service providers have the same challenges as family members in motivating elderly people with severe alcohol problems to seek professional help. Whereas Gunnarsson and Karlsson’s solution to this challenge is to develop services and treatment specifically directed at older people, both Næss and Nesvåg (2017) and Woldstad (2017) report how the general health services and social services have been and can be developed to deal better with these problems. They argue that these services are already in contact with a large proportion of the elderly population and that this contact can be developed to provide the most relevant services for both identifying and intervening against alcohol- and other drug-related health and social problems among the elderly. They argue that this will be the best strategy for broadening the scope of what should be regarded and identified as substance-use-related problems and by reducing the stigma so often related to addiction and specialised addiction treatment.

The important challenge is to recognise and deal with the wide spectrum of alcohol- and other drug-related problems in the elderly population. The belief that change is possible must be encouraged among healthcare professionals, patients, and family members, and it must be ensured that both general and specialised health and social care systems are ready to deal with these problems.

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