



TEXAS
Health and Human
Services

**Texas Department of State
Health Services**

Mental Health in Patients with TB

Case Presentation

Shannon F. Brown, RN, BSN, MHA, CCM

Case #2

- 61-Year-Old Adult Male from Houston, TX
- Homeless upon admission
- Lack of Financial Income and uninsured
- Food Insecurities
- TB Diagnosis: Bilateral Pulmonary Cavitory TB.
- Multiple medical comorbidities (untreated HEP C, Aortic root aneurysm, pulmonary TB, pulmonary embolism, severe hypoglycemia, COPD, severe malnourishment, Oxygen-dependent, smoker).
- History of Opioid Use Disorder (IV Heroin) on Methadone Maintenance
- Missing all forms of Identification
- History of multiple incarcerations
- Started on 4 drug therapy on 3/17/22

Admission and Course of Treatment

- Admitted on 4/12/2022
- Anxious and uncooperative, debilitated
- Bedbound, hypoxia (O2 dependent), severe malnutrition (6'1" 105#)
- In pain crisis and disoriented
- Continued RIPE
- Continued Methadone maintenance
- Treatment of malnutrition led to PEG placement with complications
- Decubitus ulcers of heels and Sacrum
- Completed treatment 7/13/2023 (144#)

Stages of Change & Motivational Interviewing

Sergio Orozco, PhD

Stages of Change Model

- **Pre-contemplation**: Not seeing a problem behavior or not considering change.
- **Contemplation**: Acknowledging that there is a problem but struggling with ambivalence, weighing pros and cons, benefits, and barriers to change.
- **Preparation/Determination**: Taking steps and getting ready to initiate.
- **Action/Willpower**: Making the change and living the new behaviors, which can be all-consuming activity.
- **Maintenance**: Maintaining the behavior change that is now integrated into person's lifestyle.

Prochaska, J., & Norcross, J. (2001). Stages of change. Psychotherapy: Theory, Research, Practice, Training, 38(4), 443.

Principles of Practicing Motivational Interviewing

- **Express Empathy**: Seeing the world through clients' eyes which allows the client to feel heard, understood, and more honestly share their experiences.
- **Develop Discrepancy**: Illustrating and developing a perceived mismatch between where someone is and where they want to be by examining the discrepancies between current circumstances/behaviors and their values and future goals.
- **Roll with Resistance or Dancing with Discord**: Avoiding eliciting resistance by not confronting the client when resistance occurs instead working to avoid a negative interaction and helping the client to identify their own solutions.
- **Support Self-Efficacy**: A strength-based approach that believes clients have within them the capabilities to change successfully. Supporting self-efficacy involves focusing on previous successes and highlighting skills and strengths that the client already has.

Miller, W.R., & Rollnick, S. (2023). Motivational Interviewing: Helping people change and grow (4th ed.). Guilford Press

Four Tasks of Motivational Interviewing

- **Engaging**: The process of establishing a helpful connection and working relationship.
- **Focusing**: The process by which we develop and maintain a specific direction in the conversation about change.
- **Evoking**: Eliciting the client's own motivations about change.
- **Planning**: Developing a commitment to change and formulating a concrete plan of action.

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Motivational Interviewing Skills and Techniques

- **Open-Ended Questions:** Questions that cannot be easily answered with a yes or no that invite elaboration, seek understanding, and elicit change talk.
- **Affirmations:** Statement that recognizes strengths and efforts.
- **Reflections:** Reflecting back the patient's own words and seeking to express empathy by demonstrating an understanding of client's perspective. Guiding them towards resolving ambivalence by eliciting, pointing out discrepancies, and reinforcing change talk.
- **Summarization:** Recapping what has occurred in conversation, part of conversation, or entire counseling session. Summaries communicate interest, understanding, and call attention to important elements of discussion.

Miller, W.R., & Rollnick, S. (2023). Motivational Interviewing: Helping people change and grow (4th ed.). Guilford Press

Substance Use & Harm Reduction

Anthony Palomo, MS, LCDC, LPC

Substance Use Impact On Body

- Illicit drug users are at higher risk for TB infection and disease (Deiss, et al., 2009).
- Substance Use affects cells responsible for immune response (Deiss, et al., 2009).
 - *Increases susceptibility* to opportunistic infection
 - *Decreases immune response* even after treatment has started
- Substance Use may hide symptoms, which impacts early detection and treatment (Deiss, et al., 2009).

Substance Use Impact On Treatment

- **Frequently associated with several epidemiological factors:**
 - Tobacco use (co-abuse)
 - Homelessness
 - Alcohol abuse (co-abuse)
 - Incarceration
- **More complex course of treatment:**
 - More infectious
 - Take longer to achieve negative culture
 - Increased risk for mortality

Treatment Options

- **Groups**
 - Support Groups
 - Educational Groups
 - Therapy Groups
- **Individual Counseling**
 - Motivational Interviewing
 - Cognitive-Behavioral Therapy
 - Contingency Management
 - Family Behavior Therapy
- **Medication-Assisted Treatment**
 - Manage withdrawal
 - Stay in treatment
 - Prevent relapse
 - Risk-Reduction

Principles of Substance Abuse Treatment

- Addiction is complex but treatable
- No single treatment fits all
- Treatment needs to be readily available
- Effective treatment is individualized
- Remaining in treatment is critical
- Counseling and other behavioral therapies are also critical components.
- Treatment plans must be assessed and modified continually to meet challenging needs
- Medications are an important element
- Co-existing disorders should be treated in an integrated way
- Treatment does not need to be voluntary to be effective
- Possible drug use relapse during treatment must be monitored continuously
- Treatment programs should assess for HIV/AIDS, Hepatitis B & C, TB, and other infectious diseases and help client modify at-risk behaviors

Harm Reduction

Harm reduction is defined by the National Harm Reduction Coalition as, “**a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use.**”

National Harm Reduction Coalition (2023)

Harm Reduction and Goal Setting

This is an Evidenced Based Approach

The goal is not cessation but reduction of harm to the patient and community

Resources for Training:

<https://www.samhsa.gov/find-help/harm-reduction>

<https://txoti.org/>

The goal is to complete treatment

Thank you!