

# NATIONAL CLINICAL GUIDELINE FOR THE ASSESSMENT AND TREATMENT OF CONCOMITANT ALCOHOL DEPENDENCE AND MENTAL DISORDER

## Quick guide

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V	It is good practice to systematically identify mental disorder in connection with the assessment and treatment of alcohol dependence.
V	It is good practice to systematically identify alcohol dependence in connection with assessment and treatment of mental disorder.
Integra	ted/coordinated treatment
<b>V</b>	It is good practice to offer Integrated/coordinated treatment to persons with concomitant alcohol dependence and mental disorder.
Outpat	ient and inpatient treatment
V	It is good practice to combine outpatient and inpatient treatment in treatment courses for persons with concomitant alcohol dependence and mental disorder who have difficulties attending outpatient treatment at times.
Dialect	ical behavioural therapy (DBT) and dual focus schema therapy
<u> </u>	Consider offering DBT to persons with concomitant alcohol dependence and borderline personality disorder ( $\oplus \bigcirc \bigcirc \bigcirc$ ).
	disorder (0 0 0 0).
<b>^</b>	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and personality disorder ( $\oplus \bigcirc \bigcirc \bigcirc$ ).
<u>↑</u>	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and
↑ Family/	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and
↑ Family/	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and personality disorder ( $\oplus$ OOO).
Family/	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and personality disorder (⊕○○○).  'network-oriented treatment  Consider offering family/network-oriented treatment to persons with concomitant alcohol dependence.
Family∕ ↑	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and personality disorder ( $\oplus \bigcirc \bigcirc \bigcirc$ ).  Consider offering family/network-oriented treatment to persons with concomitant alcohol dependence and psychotic disorders ( $\oplus \bigcirc \bigcirc \bigcirc$ ).  It is good practice to offer family/network-oriented treatment to persons with concomitant alcohol
<b>↑</b>	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and personality disorder (⊕○○○).  It is good practice to offer family/network-oriented treatment to persons with concomitant alcohol dependence and other mental disorders.
√	Consider offering dual focus schema therapy to persons with concomitant alcohol dependence and personality disorder ( $\oplus \bigcirc \bigcirc \bigcirc$ ).  Consider offering family/network-oriented treatment to persons with concomitant alcohol dependence and psychotic disorders ( $\oplus \bigcirc \bigcirc \bigcirc$ ).  It is good practice to offer family/network-oriented treatment to persons with concomitant alcohol



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$\uparrow$	Consider offering aftercare/follow-up to persons with concomitant alcohol dependence and affective disorder, anxiety disorder and/or behavioural disorder ( $\oplus \bigcirc \bigcirc \bigcirc$ ).
<b>V</b>	It is good practice to offer after-treatment/follow-up to persons with concomitant alcohol dependence and other mental disorders.
A came	proceed and nattroyone
Acamp	prosate and naltrexone
Acam <sub>l</sub>	Consider offering acamprosate or naltrexone as an add-on to psychotherapy to persons with concomitan alcohol dependence and affective disorder, anxiety disorder or psychotic disorder ( $\oplus$ OOO).



### About the quick guide

This quick guide contains the key recommendations from the national clinical guideline for the assessment and treatment of concomitant alcohol dependence and mental disorder. The guideline was prepared by the DHA.

The national clinical guideline focuses on the assessment and treatment of adults over the age of 18 with concomitant alcohol dependence and mental disorder.

Thus, the guideline contains recommendations for selected parts of the field only and therefore must be seen alongside the other guidelines etc. in this field.

The recommendations are preceded by the following indications of their strength:

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↑↑ = a strong recommendation for

↓↓ = a strong recommendation against

↑ = a weak/conditional recommendation for

↓= a weak/conditional recommendation against
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The symbol ( $\sqrt{}$ ) stands for good practice. This symbol is used in case of lack of evidence, when the working group wants to emphasise particular aspects of the established clinical practice.

The recommendations are followed by the following symbols which indicate the strength of the underlying evidence – from high to very low:

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(\bigoplus \bigoplus \bigoplus) = high

(\bigoplus \bigoplus \bigcirc) = moderate

(\bigoplus \bigcirc \bigcirc) = low

(\bigoplus \bigcirc \bigcirc) = very low
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In case of lack of evidence, a recommendation is not followed by a symbol. This applies to the good practice recommendations.

#### Further information at sundhedsstyrelsen.dk

At sundhedsstyrelsen.dk, a full-length version of the national clinical guideline is available, including a detailed review of the underlying evidence for the recommendations.

### About the national clinical guidelines

The national clinical guideline is one of the 47 national clinical guidelines to be prepared by the DHA during the period 2013-2016.

Further information about the choice of subjects, method and process is available at sundhedsstyrelsen.dk.