



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

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Before the Public Health Committee
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Good morning Senator Gerratana, Representative Johnson, and distinguished members of the Public Health Committee. I am Dr. Michael Norko, Director of Forensic Services for the Department of Mental Health and Addiction Services, and I am here this morning to speak on Section 42 of Raised Bill No. 6644 AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES, which relates to definitions of alcohol and substance dependence in Section 17a-680 of the General Statutes. I want to thank the committee for adding this language to the bill before you but want to suggest some changes as the bill moves forward.

First, let me describe some background of the necessity of the changes raised in Sec 42 of Bill 6644. Section 17a-680 defines alcohol and substance dependence for the purpose of various statutes related to addiction services for treatment, procedures for commitment, and evaluations and treatment ordered by criminal courts. Those definitions have used the phrase "as that condition is defined in the most recent edition of the American Psychiatric Association's 'Diagnostic and Statistical Manual of Mental Disorders'" (DSM).

In May 2013, the American Psychiatric Association (APA) will be publishing the fifth edition of the DSM. Based on the best available research, the APA has decided to eliminate the concept of "dependence" from the diagnostic lexicon, and instead employ the idea of a continuum of severity in substance use disorders. Therefore, as of May 2013, there will be no definition of alcohol or substance dependence in the DSM and the existing statutory definition will thus become unusable. Clinicians will instead diagnose mild, moderate or severe Alcohol Use Disorder. What had been Alcohol Dependence will be considered a Moderate or Severe Alcohol Use Disorder in the DSM 5. The same methodology will be employed for the various other substance use disorders.

Sec. 42 of Raised Bill 6644 reflects our first attempt to resolve this problem with new language: "Alcohol-dependent person" means a person who has a psychoactive substance dependence on alcohol [as that condition is defined] that meets the criteria for moderate or severe alcohol use disorder, as described in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders," with parallel language for substance dependence.

However, after further thought on this issue, the wording of a 'dependence that meets the criteria' seems to presume the concept of the dependence, which may turn out to be problematic in testimony to the courts when 'dependence' will no longer exist in the clinical lexicon and clinicians are testifying in probate or superior courts on matters related to these statutes. Clinicians may be

constrained against diagnosing a “dependence...that meets the criteria for moderate or severe [alcohol/substance] use disorder” because “dependence,” per se, will be a discarded clinical concept.

We believe it will be more effective for our work to use a further abbreviated version of this language, such as the following:

"Alcohol-dependent person" means a person who meets criteria for moderate or severe alcohol use disorder, as described in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders";

"Drug-dependent person" means a person who meets criteria for a moderate or severe substance use disorder, as described in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders";

The exact language of the new criteria will not be available until May. There will likely be some period of adjustment to the clinical and legal use of the new criteria, and experience may reveal the need for further refinements in future sessions of the General Assembly. We support the plan to move forward with amendment to these definitions during this session, in order that these laws may continue to be useful after May. We, therefore, also recommend that the effective date be changed to “upon passage” so that we can be in compliance when the DSM 5 will be released in circulation.

Thank you for your time and attention to this matter.