Dual diagnosis is the term used to describe someone who is using substances harmfully and has a mental health problem such as anxiety, depression or psychosis. Both conditions are routinely not diagnosed in this patient group.

Over recent years, this area has received increasing attention as policymakers, clinicians, researchers and commissioners try to improve access and treatment options for people with a dual diagnosis.

Many nurses lack confidence or feel they do not have the necessary skills to help such patients, but all the techniques that are discussed in this article can be used by nurses in a variety of settings.

Perception and thinking, people using them can be more likely to have accidents. So, although a person may come into contact with a nurse because of a cut or fracture, it could be that it is the result of their behaviour while under the influence of the substance.

There are specific risks to patients’ physical health from individual drugs or the route by which they are used.

As cannabis is mainly smoked with tobacco, there are the same associated risks to health as with tobacco, such as heart disease, cancer and respiratory problems.

However, when cannabis resin is inhaled with tobacco, the risks increase, particularly to the respiratory system. As the resin has a higher combustion temperature and most people do not use a filter, three times the amount of tar is inhaled. This increases the risk of bronchitis, emphysema and other respiratory problems (Taylor et al, 2000).

The Department of Health’s Talk to Frank website (www.talktofrank.com) is a useful source on the individual physical risks of each substance.

**Dual Diagnosis**

Up to 85% of patients in drug and alcohol treatment have a coexisting mental health problem (Department of Health, 2007).

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**Fig 1. Cycle of Change**

- **Pre-Contemplation:** See no reason to change
- **Contemplation:** Part of the person wants to change
- **Decision:** Deciding to change
- **Active Change:** Changing behaviour
- **Maintenance:** Consiously keeping change going
- **Relapse:** Returning to pre-change behaviour
- **Change fully adopted**

Source: Prochaska and DiClemente (1983)