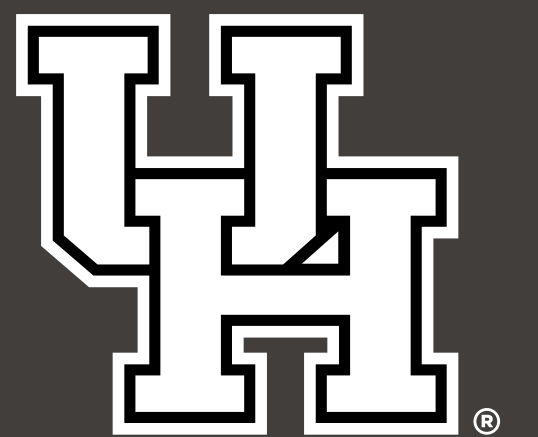


# Characterizing the Prevalence and Nature of Cannabis Use Disorder and Comorbidities in Older Veterans



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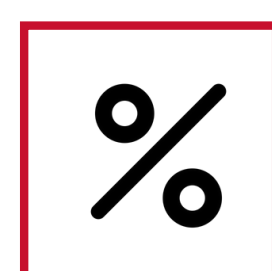
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## BACKGROUND

Cannabis use disorder (CUD) is defined by the DSM-5 as the continued use of cannabis despite clinical problems like withdrawal and tolerance.



CUD **negatively affects physical and mental health**, resulting in chronic bronchitis, short-term memory loss, psychosis, and suicidality.<sup>5</sup>



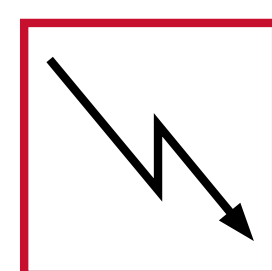
In 2019-2020, **more than 10% of Veterans reported past six-month use**, indicating that many Veterans may develop CUD.<sup>6</sup>



Veterans with CUD are more likely to have or develop lifetime PTSD, anxiety, mood disorders, nicotine addiction, alcohol dependence, and suicidal thoughts.<sup>7</sup>



Veterans may rely on cannabis to **cope with symptoms** of mental health disorders **despite the lack of evidence** to support the therapeutic use of cannabis.<sup>2</sup>



Cannabis use **may worsen symptoms of mental health disorders**.<sup>1,9</sup>

While cannabis use is higher among young Veterans who have served in Operations Enduring Freedom, Iraqi Freedom, and New Dawn (OEF/OIF/OND)<sup>6</sup>, older Veterans are more likely to use medicinal cannabis.<sup>4</sup> Younger Veterans who served in recent conflicts (OEF/OIF/OND) have high rates of comorbidities<sup>10</sup>, but **little is known about comorbidities in older Veterans**.

## PURPOSE

This research attempts to address the following:

- The **relationship** between mental health disorders, cannabis use, and CUD is **complex and unclear**.
- Existing research focuses on CUD in young Veterans.
- The nature and prevalence of **CUD in older Veterans are not well-understood**.

This research aims to characterize CUD and co-occurring disorders among older Veterans.

## METHODS



Data on mental and physical health of Veterans' Health Administration (VHA) patients obtained from the Corporate Data Warehouse



CUD diagnosis identified using International Classification of Diseases - Ninth Edition - Clinician's Modification (ICD-9-CM) and ICD - Tenth Edition (ICD-10)

**RESULTED IN 127,860 TOTAL IDENTIFIED PATIENTS**



Co-occurring mental health disorder and SUD diagnoses identified using ICD-9-CM and ICD-10

Conducted descriptive analyses and determined odds ratios for comorbidities using SPSS Version 28

## RESULTS

Of the 127,860 Veterans aged 40 years and younger and 65 years and older with CUD:

- there are **more Veterans** in the **65 and older** age group than in the 40 and younger age group
- a **large percentage** of Veterans are **male** in both age groups
- the majority are **White**
- **more than 1/3** of Veterans aged 65 years and older are **African American/Black**
- most Veterans identify as **"never married"**

Mean Age (in Years) and Demographic Frequencies (%) by Age Category

Demographic	40 and younger N = 51,001	65 and older N = 76,859
Mean Age (in Years)	35.26 (3.22*)	70.20 (4.01*)
Gender		
Female	10.5	2.7
Male	89.5	97.3
Race		
American Indian	1.3	1.0
Asian	1.0	0.2
African American/Black	21.3	35.0
Native Hawaiian	0.9	0.9
Unknown	6.5	6.0
Caucasian/White	69.0	56.9
Marital Status		
Divorced	19.6	0.4
Married	25.3	0.0
Never Married	44.5	42.6
Separated	8.3	28.7
Single	0.4	14.9
Unknown	1.1	7.6
Widow/		
Widower	0.0	0.1
Widowed	0.2	0.5

\*Standard Deviation

	40 and younger N = 51,001	65 and older N = 76,859	OR (95% CI)*
PTSD	60.5%	37.9%	0.40 (0.39, 0.41)
Generalized Anxiety Disorder	12.0%	6.6%	0.52 (0.50, 0.54)
Depression	67.4%	61.5%	0.77 (0.75, 0.79)
Persistent Depression	5.7%	8.5%	1.52 (1.45, 1.59)
Panic Disorder	6.7%	2.6%	0.37 (0.35, 0.39)
Adjustment Disorder	23.9%	14.5%	0.54 (0.52, 0.55)
Bipolar	12.7%	7.7%	0.57 (0.55, 0.60)
Schizophrenia	5.9%	7.5%	1.31 (1.25, 1.37)
Specific Phobia	0.2%	0.2%	0.99 (0.77, 1.28)
Social Anxiety	1.5%	0.5%	0.32 (0.28, 0.36)
Agoraphobia	0.3%	0.1%	0.53 (0.41, 0.68)
Acute Stress	0.6%	0.3%	0.44 (0.37, 0.53)
Insomnia	21.7%	15.5%	0.66 (0.64, 0.68)
Alcohol Use Disorder	55.4%	55.6%	1.01 (0.99, 1.03)
Opioid Use Disorder	16.5%	12.1%	0.70 (0.68, 0.72)
Amphetamine Use Disorder	9.2%	4.4%	0.45 (0.43, 0.48)
Cocaine Use Disorder	13.0%	27.8%	2.56 (2.49, 2.64)
Tobacco Use Disorder	45.6%	58.8%	1.71 (1.67, 1.75)

PTSD = posttraumatic stress disorder, \* = odds ratio (95 percentage confidence interval)

Odds Ratio > 1

Comorbidities more common in older Veterans

## CONCLUSIONS

- **CUD often co-occurs with other SUDs** - this is especially true for older Veterans with alcohol use disorder, cocaine use disorder, and tobacco use disorder.
- Although younger Veterans are more likely to have CUD and other comorbidities, **older Veterans have very high rates of comorbidities** including depression and PTSD.
- Further **investigating CUD in older Veterans** with comorbidities and encouraging their recovery from CUD **may significantly impact their overall health**.

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