



**WADD**

World Association  
on Dual Disorders

## WORLD ASSOCIATION ON DUAL DISORDERS AND COVID-19

Dear colleagues and friends,

**We are living very complex and stressful times. The lives of many people around the world are affected by coronavirus pandemic. This situation also impacts each person in different ways. We therefore hope the best for you and your families, free of coronaviruses and psychologically strong to endure the long period of quarantine that awaits us.**

As mental health professionals and experts in **Dual Disorders**, it is our duty to collaborate to the maximum, with the rest of health professionals, in the fight against the current pandemic generated by **COVID-19**.

Naturally, we must strictly follow the guidelines of the health authorities regarding the preventive, diagnostic and therapeutic actions to be followed and strive so that our patients and their families fully understand and comply with them.

However, it must be recognized that patients with **Dual Disorders** have psychopathological and behavioral peculiarities that deserve our special attention.

For that reason, we want to share with all of you the following considerations to help us in our daily clinical practice:

1. Due to quarantine, many countries implemented a strict police controls to enforce it, this situation could affect the availability of illegal and legal psychotropic substances. Consequently, people with **Dual Disorders** will be affected.
2. Patients with Dual Disorders may face difficulties in acquiring psychotropic substances that could trigger clinical complications such as withdrawal symptoms and may also exacerbate other psychopathology.
3. The desperation to consume may precipitate impulsive, aggressive and antisocial behaviors.
4. In some patients the lack of psychoactive substances can exacerbate symptoms of other concurrent psychiatric disorders, such as: symptoms of anxiety, depression, psychosis, and self-harm or suicidal behaviors.



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5. Poor dispensing of medications due to difficulties in the prescription, production and distribution such as methadone, buprenorphine, naltrexone, naloxone, disulfiram, stimulants, etc., could lead to relapses, compulsive use of psychotropic substances and the exacerbation of the psychiatric symptomatology.
6. Patients with **Dual Disorders** also attend at harm reduction centers that will surely be limited by quarantine, which can increase their organic vulnerability to COVID-19 infection.
7. Many patients with Dual Disorders live in a situation of marginality, and the restrictions and strict health policies of the quarantine could represent a hard situation to cope.
8. Due to the critical situation of the healthcare system in many countries, detoxification units, clinics, therapeutic communities and other specific resources are blocking admissions as a measure to prevent the spread of COVID-19 and, at the same time, protect patients already admitted, which increases the vulnerability situation of patients with **Dual Disorders**.
9. Stressful situations increase the risk of relapse in patients with Dual Disorders for that reason the health systems should consider the fragility and vulnerability of these patients to prevent and treat crisis and avoid the risk of infection.
10. Patients with dual disorders are more likely to smoke than the general public, possibly placing them at higher risk for more severe morbidity and mortality but also to the risk that nicotine withdrawal will worsen their psychopathological disorders.
11. Based on current scientific evidence, it is necessary promote and facilitate the access to treatment at patients with Dual Disorders who need specialized medical or psychiatric care, with the objective to reduce the impact of the crisis and avoid the social stigma associated with their clinical characteristics.
12. It is advisable to share information about online care programs such as: telephone numbers, web pages, chats, video consultations, etc. to patients and families. Also, for condensed cases, distance care was not enough, helpline telephones and treatment centers that will be available to receive patients with dual disorders.
13. Patients should be reminded that in case of requiring an admission due to COVID-19 infection, they must identify themselves as patients with Dual Disorders and their needs of specific medications in addition to anti-infection procedures.
14. As health care professionals in the area of dual disorders, we have a unique role in reducing the risk not just of viral infection in our patients, but the risk that as their psychopathological disorders worsen, they may be discriminated, blamed and abandoned.



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