

Stimulant Withdrawal: Monitoring & Treatment

Common Signs and Symptoms of Stimulant Withdrawal/Abstinence Syndrome

PHYSIOLOGICAL	PSYCHOLOGICAL/BEHAVIORAL
<ul style="list-style-type: none"> • Weight gain • Dehydration • Fatigue with lack of mental or physical energy • Psychomotor lethargy and retardation —may be preceded by agitation • Hunger • Chills • Insomnia followed by hypersomnia 	<ul style="list-style-type: none"> • Dysphoric mood that may deepen into clinical depression and suicidal ideation • Persistent and intense drug craving • Anxiety and irritability • Impaired memory • Anhedonia (i.e., loss of interest in pleasurable activities) • Withdrawal from interpersonal relationship • Intense and vivid drug-related dreams

Source: Adapted from SAMHSA TIP 33: Treatment for Stimulant Use Disorders

Critical Management Points for Stimulant Withdrawal

- Assess for possible pregnancy
- Monitor for suicidal thoughts
- Consider simultaneous opioid withdrawal as many stimulant drugs are contaminated with fentanyl and other opioids
- Manage environment for agitation and paranoia: calming, low light, low noise
- Allow individual to opt out of other therapeutic activities for first 24 to 36 hours
- Address any critical medical issues such as wounds, trauma, etc.
- Provide adequate fluids (critical due to decreased secretions associated with stimulant use) and nutritious food

Ongoing Management

- Evaluate for underlying psychiatric illness such as PTSD, depression, anxiety, ADHD
- Manage oral hygiene; provide toothbrush and toothpaste and/or mouth rinse; consider dental evaluation
- Universal testing for HIV and hepatitis testing is recommended

References:

Substance Abuse and Mental Health Services Administration. Treatment for Stimulant Use Disorders. Treatment Improvement Protocol (TIP) Series 33. SAMHSA Publication No. PEP21-02-01-004. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2021.

NIDA. 2021, August 3. Introduction. Retrieved from <https://nida.nih.gov/publications/research-reports/common-comorbidities-substance-use-disorders/introduction> on 2022, November 28