

When someone struggles with both a substance use disorder and a mental health condition, it's known as having **co-occurring disorders**. These are two separate clinical terms: *substance use disorder* is the medical phrase for addiction, and *mental health condition* covers a range of diagnoses like depression or anxiety. This dual challenge creates a complex and sometimes confusing path to recovery.

One common question is whether it's better to start by treating addiction first or the mental health issue—like depression—first. This decision isn't as simple as it sounds because of the close relationship between these conditions and how they affect each other.

In this blog post, we will:

- Explain **co-occurring disorders** and why they happen
- Discuss the **self-medication cycle** and its impact
- Explore why treating one condition alone often fails
- Define **integrated treatment** and why it's considered best practice

Whether you're searching for help on FindATopDoc or consulting with professionals, understanding these concepts can reduce overwhelm and empower you to find the right approach.

What Are Co-Occurring Disorders?

Co-occurring disorders (sometimes called dual diagnosis) happen when someone is diagnosed with both a mental health condition and a substance use disorder at the same time. This is more common than many realize and requires specialized care that addresses both conditions rather than just one.

Example: Sarah has been struggling with major depressive disorder and also uses alcohol heavily to cope with her feelings. The depression and alcohol use feed into each other, making each condition worse.

Why Co-Occurring Disorders Are Challenging

- **Symptoms overlap:** Mental health symptoms and withdrawal or intoxication effects can look quite similar.
- **Self-medication:** People may use substances to manage symptoms, but this often worsens both conditions.
- **Treatment complexity:** Treating only one condition without the other may lead to relapse or incomplete recovery.

The Self-Medication Cycle Explained

The term *self-medication* refers to using drugs or alcohol to relieve the symptoms of untreated mental health issues. It is a common pattern in co-occurring disorders. However, what starts as relief often triggers a harmful cycle:

1. A person experiences symptoms of anxiety, depression, or trauma.
2. They use substances to feel better temporarily.
3. Substance use causes new or worsened mental health symptoms.
4. Those symptoms lead the person to use substances again.

This loop is hard to break because addiction changes brain chemistry, and untreated mental health conditions continue to cause distress.

Why does this matter? Treating only the addiction without addressing underlying mental health means the reasons for substance use remain untreated. Likewise, treating depression alone while the person continues using substances may hinder medication effectiveness or therapy progress.

Why Treating One Condition Alone Can Fail

Many treatment programs historically focused on either addiction or mental health disorders—but not both. This “separate treatment” model can result in:

- **Relapse:** When only addiction is treated, untreated mental illness might trigger a return to substance use.
- **Incomplete recovery:** Symptoms of depression or anxiety might persist even with sobriety, lowering quality of life.
- **Dropout from treatment:** If patients feel their mental health needs are ignored, they may disengage.

Research shows that **split treatment** approaches lead to worse outcomes overall for individuals with co-occurring disorders.



What Is Integrated Treatment?

Integrated treatment means providing coordinated and simultaneous care for both addiction and mental health conditions. Rather than treating these as separate issues, this approach recognizes how closely they are intertwined.



Key features of integrated treatment include:

- Single treatment team addressing both conditions
- Therapies tailored to dual diagnosis needs
- Medication management that considers interactions between psych meds and substance use
- Holistic care including counseling, behavioral therapies, and peer support
- Consistent monitoring and flexibility to adjust treatment based on progress

According to several clinical guidelines, integrated treatment is considered the “gold standard” for co-occurring disorders because it:

- Reduces relapse rates
- Improves mental health symptoms
- Enhances overall functioning and quality of life
- Supports long-term recovery rather than short-term fixes

Which Should Be Treated First: Addiction or Depression?

The question of **treating addiction first vs. treating depression first** often arises, but experts argue that picking one to start and delaying the other isn't ideal.

- **If addiction is treated alone:** Hidden or untreated depression might cause increased risk of relapse or even suicidal thoughts.
- **If depression is treated alone:** Continued substance use may interfere with antidepressant effectiveness or worsen depression symptoms.

Instead, starting findatopdoc.com an integrated approach that treats both simultaneously is recommended for the best outcomes.

Real-Life Example:

Jason came to a community behavioral health clinic struggling with heroin use and generalized anxiety disorder. Initially, he was enrolled in detox and addiction counseling. However, his anxiety was not addressed, and within

weeks of sobriety, he relapsed.

Only after moving to an integrated program — where addiction counselors, psychiatrists, and therapists worked together — did Jason’s anxiety symptoms reduce in tandem with sustained sobriety. This approach gave him tools to manage both conditions simultaneously.

How to Navigate Finding the Right Treatment on FindATopDoc

When you or your loved one face co-occurring disorders, navigating treatment can feel overwhelming. The FindATopDoc website offers clear ways to find specialized care:

- **Home:** Start here to understand basic concepts and available services.
- **Expert:** Search for addiction and mental health experts with credentials in integrated care.
- **Blog Listing:** Learn from patient-friendly articles about dual diagnosis, integrated treatment, and practical recovery tips.

Using these tools can empower you to ask informed questions about integrated vs. separate treatment options and advocate for a comprehensive treatment plan.

Summary Checklist: What to Remember About Treating Co-Occurring Disorders

Topic Key Point Co-occurring disorders Simultaneous diagnosis of addiction and mental health condition. Self-medication cycle Using substances to cope with untreated mental illness often worsens both. Separate treatment risks Ignoring one condition can lead to relapse and incomplete recovery. Integrated treatment Coordinated care for both disorders by a unified team reduces relapse and improves outcomes. Treating addiction or depression first? Best to treat both together rather than choosing one first.

Final Thoughts

There isn’t a one-size-fits-all answer to whether it’s better to treat addiction first or mental health first. However, it’s clear from clinical evidence and real-life experiences that integrated treatment is the most effective way to break the harmful cycle of co-occurring disorders.

If you’re using resources like FindATopDoc or speaking with clinicians, keep these principles in mind and insist on a treatment plan that addresses the whole picture. Recovery means managing both mental health and addiction together—not choosing one over the other.

Remember, integrated treatment embraces the complexity of co-occurring disorders and offers hope for lasting healing.