

Clinical Toolkit

Clinical Tips: Alcohol and Other Drugs Patterns of Use

Patterns of substance use occur on a continuum and defining the pattern of substance use can assist management of a SUD. A diagnosis of a substance use disorder is not confined to any one specific pattern of use. The core defining feature of a substance use disorder is continued substance use despite significant substance-related problems (see DSM 5 and ICD-10 classification)

Non Use

People choose not to use drugs for a number of reasons. Some of these reasons relate to religion, culture or health. In rare cases even non-use can be a very risky choice when drug use is required for medical or therapeutic purposes.

First Use

Experimental use: All people who use substances will go through a period of experimentation. This process will determine how and if a person will use the drug subsequently ([YSAS](#)).

Subsequent Use

Occasional use: This form of drug use is often circumstantial. For example, a person may only drink alcohol at social functions or may only take paracetamol when they have a headache. The more problematic form of occasional use is binge style use. 'Bingeing' can involve quite intensive use in short periods or bursts. This too is most often circumstantial ([YSAS](#)). Binge use can be harmful to a person's health (physical and mental) and safety (e.g. increased engagement in risk taking behaviour, increased vulnerability to harm). Young people may be unaware of, or minimise the risks associated with this pattern of substance use associating problematic substance use with regular and dependant use.

Regular social/recreational use: A person who uses drugs on a regular basis may or may not experience substance use related problems. Social/recreational use is likely to feature the least opportunity for harm and there may be risks associated with acute intoxication. Regular, controlled users of drugs are not considered to be dependent on their drug of choice as they have the ability to moderate or change their use as circumstances dictate ([YSAS](#)).

Regular intensive use: There is no standardised method of categorising use as intensive or heavy. It depends on a range of factors including health and the norms of one's group or culture. People can consume large amounts of substances on a regular basis in a controlled way, without developing dependence. Alternatively, this form of regular use can be hazardous and meet the criteria for substance use disorder (see DSM 5 and ICD-10 classification)

Dependent use: Some people come to depend or rely on one or more drugs in order to function and manage their circumstances. People can be dependent on a drug and manage without problems occurring in other areas of their lives or engaging in high-risk behaviour. A diagnosis of a substance use disorder may still be indicated, for example, if the person experiences impaired control of their substance use (unsuccessful efforts to cut down or cease use, using larger quantities than intended or strong cravings; see DSM 5 classification). If a person's drug use does begin to impinge on other areas of their life, such as their physical or mental health, family or work, and the person is unable to change or moderate their use, they would be thought of as being dependent on that drug.