

# Cigarette Smoking In Individuals with Concurrent Posttraumatic Stress Disorder and Opioid Use Disorder



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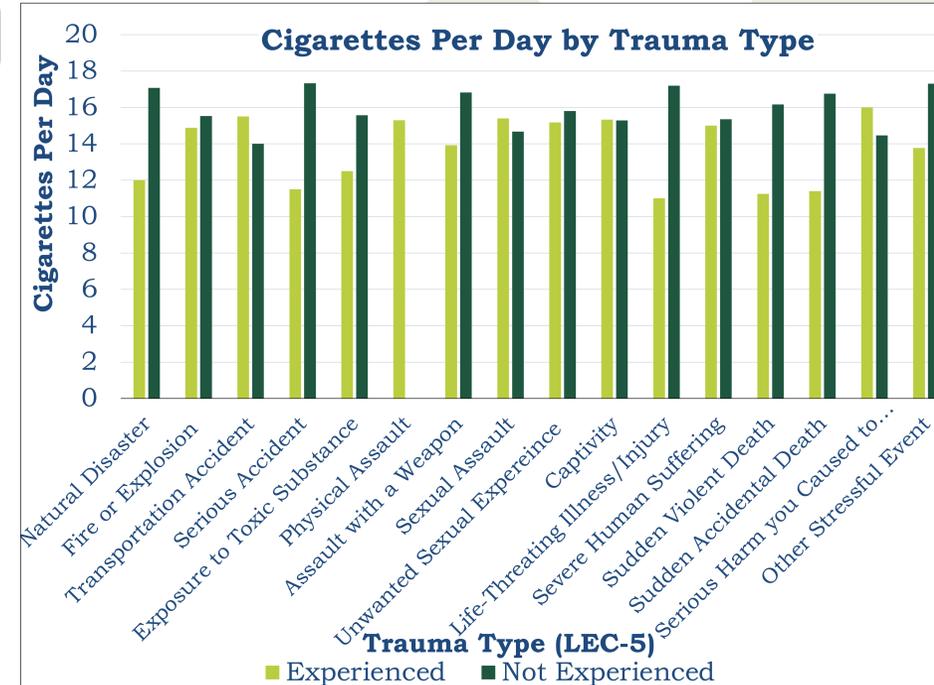
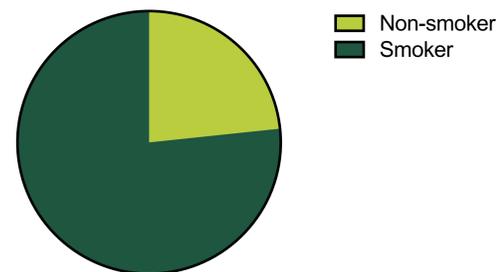
## INTRODUCTION

- Almost all individuals (85.1%) with opioid use disorder (OUD) smoke cigarettes (Guydish et al., 2016).
- Trauma and posttraumatic stress disorder (PTSD) are prevalent among individuals with OUD, with approximately 90% reporting lifetime trauma exposure and 33% meeting criteria for posttraumatic stress disorder (PTSD; Lawson et al., 2013; Mills et al., 2006; Peirce et al., 2009).
- Smokers with trauma exposure smoke significantly more cigarettes per day (CPD;  $p < .05$ ) than smokers who have not been exposed to trauma (Estey et al., 2021).
- Furthermore, the prevalence of cigarette smoking is high (27.1%) in individuals with posttraumatic stress disorder (PTSD; Pericot-Valverde et al., 2018).
- Recent research (Budenz et al., 2021) indicates that trauma type may be associated with smoking behaviors as trauma exposure involving violence and abuse is associated with a higher prevalence of current tobacco use.
- Individuals with concurrent PTSD and OUD may be at high risk for smoking and smoking-related health risks, particularly if their trauma involved violence and abuse.
- In this secondary analysis, we examined smoking prevalence and frequency in a sample of individuals with concurrent PTSD and OUD to determine whether the number of cigarettes smoked per day varied by the type of trauma experienced.

## RESULTS

Table 1 Demographics (n = 30)	
Age, years	38.1 (7.9)
Female, N (%)	19 (63.3)
White, N (%)	29 (96.7)
Education, years	13.3 (1.5)
Employed full-time, N (%)	6 (20.0)
Duration of illicit opioid use, years	7.4 (7.3)
Ever overdosed, N (%)	10 (33.3%)
<b>OAT medication</b>	
Buprenorphine, N (%)	17 (56.7%)
Daily dose, mg	15.6 (5.6)
Methadone, N (%)	13 (43.3%)
Daily dose, mg	92.2 (42.3)
Duration of OAT, years	4.5 (4.1)
History of PTSD treatment, N (%)	18 (60.0%)
CAPS-5	41.5 (8.1)

Note. Values represent mean (SD) unless otherwise indicated.



- The majority of participants (73.3%) were current smokers
- Smokers reported an average of 15.3 cigarettes daily
- The average number of trauma types directly experienced was 11.4 (SD = 3.7)
- There was no statistically significant association found between trauma type and number of cigarettes smoked daily

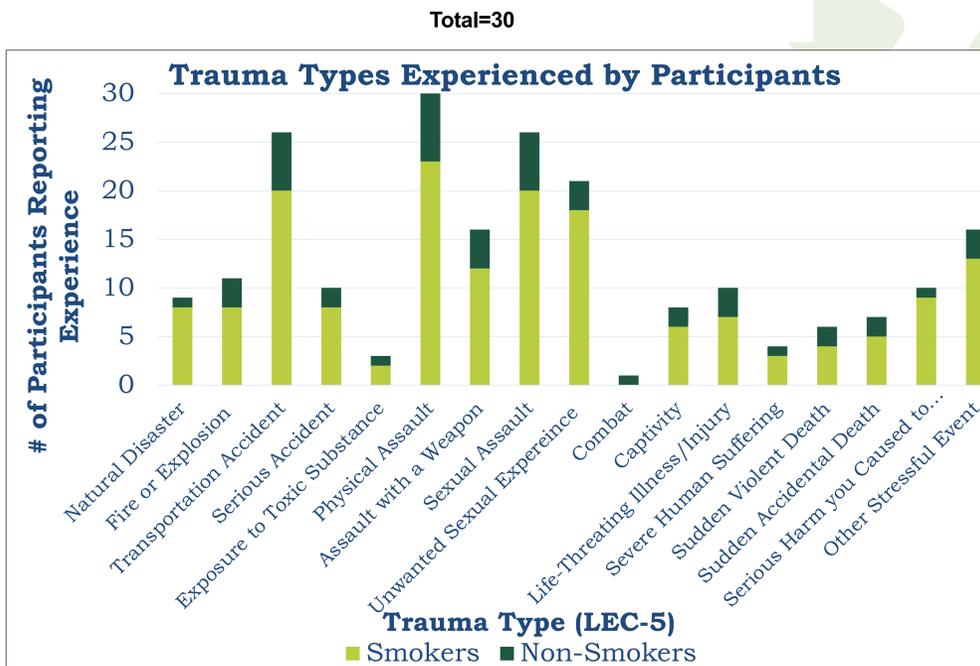
## METHODS

### Participants & Procedure

- Thirty adults recently completed an intake assessment and were enrolled in a randomized trial examining the efficacy of prolonged exposure therapy for treating PTSD in individuals with concurrent PTSD and OUD.
- At intake, participants completed a comprehensive assessment that included a demographic and drug history questionnaire, the Life Events Checklist for DSM-V (LEC-5), and the Clinician Administered PTSD Scale for DSM-5 (CAPS-5).

### Statistical Methods:

- We calculated the percentage of participants who were current smokers.
- We calculated the number of cigarettes smoked per day (CPD) for current smokers and conducted independent t-tests to examine whether CPD differed by trauma type.



## CONCLUSIONS

- In the current study, there was no significant association between trauma type and CPD.
- The prevalence of smoking in this sample of individuals with concurrent PTSD and OUD was notably higher than in previous studies of individuals with PTSD alone (Pericot-Valverde et al., 2018) and similar to prevalence rates reported in studies of individuals with OUD alone (Guydish et al., 2016).
- Research is needed in a larger, more representative sample of those with concurrent OUD and PTSD to determine if other PTSD characteristics may be more closely associated with smoking behaviors than trauma type.
- Future studies in this population may examine the severity of avoidance or negative affect. Both of which have been shown to differ between current smokers and non-smokers diagnosed with PTSD (Cook et al., 2016; Greenberg et al., 2012).

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## REFERENCES

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