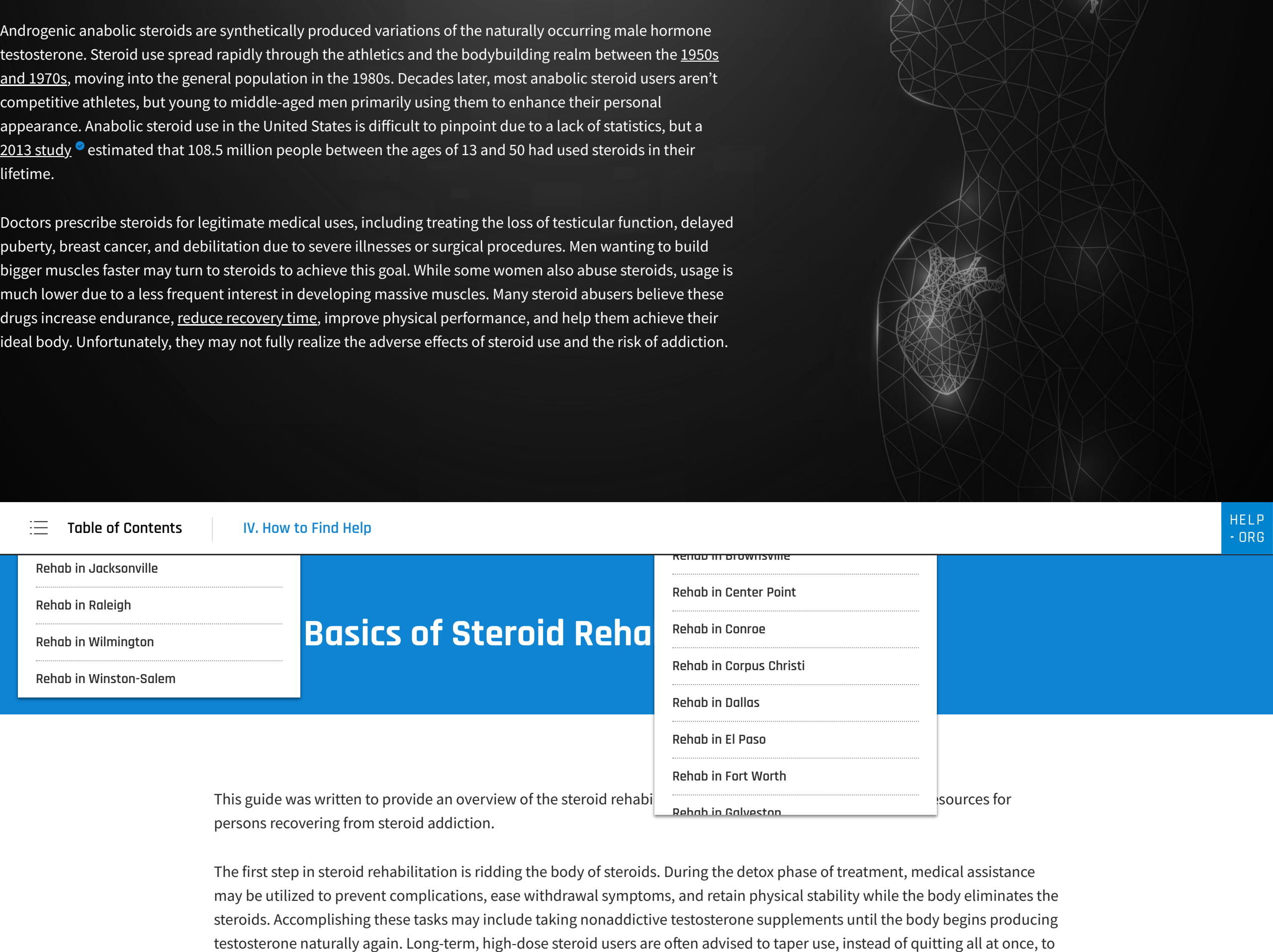


STERIOD REHABILITATION AND TREATMENT



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Androgenic anabolic steroids are synthetically produced variations of the naturally occurring male hormone testosterone. Steroid use spread rapidly through the athletics and the bodybuilding realm between the 1950s and 1970s, moving into the general population in the 1980s. Decades later, most anabolic steroid users aren't competitive athletes, but young to middle-aged men primarily using them to enhance their personal appearance. Anabolic steroid use in the United States is difficult to pinpoint due to a lack of statistics, but a 2013 study ¹ estimated that 108.5 million people between the ages of 13 and 50 had used steroids in their lifetime.

Doctors prescribe steroids for legitimate medical uses, including treating the loss of testicular function, delayed puberty, breast cancer and debilitation due to severe illnesses or surgical procedures. Men wanting to build bigger muscles faster may turn to steroids to achieve this goal. While some women also abuse steroids, usage is much lower due to a less frequent interest in developing massive muscles. Many steroid abusers believe these drugs increase endurance, reduce recovery time, improve physical performance, and help them achieve their ideal body. Unfortunately, they may not fully realize the adverse effects of steroid use and the risk of addiction.

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This guide was written to provide an overview of the steroid rehab process for people recovering from steroid addiction.

The first step in steroid rehabilitation is ridding the body of steroids. During the detox phase of treatment, medical assistance may be utilized to prevent complications, ease withdrawal symptoms, and retain physical stability while the body eliminates the steroids. Accomplishing these tasks may include taking nonaddictive testosterone supplements until the body begins producing testosterone naturally again. Long-term, high-dose steroid users are often advised to taper use, instead of quitting all at once, to decrease the severity of withdrawal symptoms.

Treatment options may include inpatient or outpatient addiction recovery programs. Intake procedures may include urine and/or blood testing to determine the level of steroids in the body. Commonly advised treatment plans include cognitive behavioral therapy, motivational interviewing, and group counseling. It can take **several months** ² for withdrawal symptoms to subside completely, which is why some people begin using again to alleviate these symptoms. To reduce the risk of relapse, an aftercare plan should include a social support system and ongoing therapy to improve self-confidence and/or manage stress.

Four Steps of the Rehab Process

Here are the four key components of substance abuse treatment:

- Assessment:** This stage centers around tailoring a treatment plan for the individual patient based on type, length, and severity of his or her addiction, as well as any unique challenges that they face (such as co-occurring mental disorders or domestic abuse).
- Detox:** During this phase, the goal is to eliminate your body's dependence on the substance(s), and manage the symptoms of withdrawal.
- Therapy:** The third stage uncovers and treats the underlying cause(s) of the addiction, and it gives addicts the tools to overcome their addiction.
- Aftercare:** The purpose of the last phase is to facilitate the transition into programs that will help to continue the lifelong process of recovery by building on the treatment received in the previous steps and preventing relapses.

For more information, read our guide to the [rehab process](#).

What Makes Steroid Rehabilitation Difficult?

Anabolic steroids are [Schedule III \(3\) controlled substances](#), making it a federal offense to possess these drugs without a prescription and punishable by up to one year in prison and a minimum fine of \$1,000. Although there hasn't been a comprehensive analysis of worldwide anabolic steroid use thus far, researchers combined data from various studies to determine that the lifetime prevalence of steroid use was **3.3% of the global population**. Usage was more prevalent in males at 6.4% compared to females at 1.6%, with abuse particularly widespread in the United States, British Commonwealth countries, Brazil, and Scandinavia.

Long-term use and/or high doses of steroids can cause a hormonal imbalance that may persist for long periods and do other serious harm to the body. Steroid rehabilitation may also be difficult because the psychiatric and physical symptoms of withdrawal can last for many months, causing or [worsening withdrawal symptoms](#). These include how long steroids have been used, the average regular dose, frequency of use, administration methods, and whether the user consumed alcohol or other drugs while using steroids.

The Unique Struggle of Steroid Addicts

Steroid...

- addiction can cause a hormonal imbalance that may persist for long periods and require medical treatment
- rehabilitation may require medically assisted detox and medical intervention to treat harm done to the body
- cessation can bring on depression and suicidal behavior
- cessation causes withdrawal symptoms that can last for many months
- abuse is often accompanied by other types of drug abuse, causing a dual addiction that makes it twice as hard to quit

Steroid Rehabilitation Statistics

Heroin Treatment Admissions by Gender

It's estimated that **30% of anabolic steroid users** ³ may develop dependence. However, there aren't specific statistics identifying the number of anabolic steroid users with a substance use disorder who need treatment and/or received treatment for the addiction. There are statistics on illicit drug use, and various studies have noted a link between steroid use and illicit drug use, primarily [heroin and other opiates](#).

The Substance Abuse and Mental Health Services Administration's (SAMHSA) 2018 National Survey on Drug Use and Health estimated:

- 20,258,000** ⁴ individuals aged 12 or older — 7.4% of the population — had a substance use disorder
- 8,743,000** ⁵ individuals aged 12 or older — 3.2% of the population — were classified as needing treatment for illicit drug use
- 1,392,000** ⁶ individuals aged 12 or older — 0.5% of the population — received treatment for illicit drug use

Demographics of Individuals Seeking Treatment for Heroin Addiction (Often Codependent with Steroid Abuse)

According to a [2017 SAMHSA report](#) ⁷ that charts admissions to and discharges from publicly funded substance use treatment facilities, men are consistently more likely to seek treatment for heroin abuse, a codependent drug of some steroid users. The gender breakdown of treatment admissions for heroin was 63.7% male and 36.3% female. While heroin addiction occurs in all age groups, the most common age group admitted to a treatment facility for heroin use was individuals aged 25 to 34, with 36 being the average age of all individuals from all age groups who sought rehabilitation.

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II. Steroid Detoxification & Withdrawal Process

There's [limited evidence](#) ⁸ on managing withdrawal, but several studies suggest that prolonged withdrawal symptoms are often the norm. While symptoms have been known to last for weeks or even months, the exact duration varies by user, with numerous factors influencing the timeline and severity of withdrawal symptoms. These include how long steroids have been used, the average regular dose, frequency of use, administration methods, and whether the user consumed alcohol or other drugs while using steroids.

Another factor that impacts withdrawal duration is the type(s) of anabolic steroid because some steroids stay in the system longer than others. The longer steroids remain, the more prolonged the detox. Depending on the half-life of the steroids taken, withdrawal symptoms may not even begin for several days following the last dose.

Once withdrawal symptoms begin, they may be subtle, such as headache, nausea, and irritability. It may not take long for symptoms to ramp up, with some previous steroid users experiencing extreme fatigue while struggling with insomnia. Psychological symptoms, such as anxiety and depression, may get worse instead of better over time. All symptoms eventually fade away. However, the timing of when each symptom begins and ends fluctuates for so many reasons that pinpointing exact timetables and duration are nearly impossible.

Withdrawal Symptoms

	Body	Mind
Short-Term and/or Long-Term Symptoms	Fatigue Tremors Headache Restlessness Loss of appetite Reduced sex drive Loss of muscle mass Muscle and joint pain	Anxiety Irritability Mood swings Steroid cravings Depression Suicidal thoughts/actions

Sources: [National Institute on Drug Abuse](#) ⁹ and National Library of Medicine

Hormone imbalance worsens withdrawal from anabolic steroids

Steroid use can create tremendous hormonal imbalances within the body that can cause severe withdrawal symptoms. The body becomes used to having an increased testosterone level, which reduces its natural ability to produce testosterone on its own. Once the user quits using steroids, testosterone levels drop, causing withdrawal symptoms. These symptoms continue until the body can begin producing testosterone again, and this often takes a while.

Withdrawal symptoms can last a long time

Once steroid withdrawal symptoms start, they can last a long time, with numerous factors influencing duration. The type of steroids taken can be a primary influence because some stay in the body much longer than others. The longer withdrawal symptoms linger, the more likely the abuser's chances of going back to using steroids or turning to other harmful drugs just to relieve the prolonged unpleasantness.

Steroid withdrawal can lead to depression and suicidal behavior

Mood disorders with suicidal depression are the [most life-threatening](#) issue regarding steroid withdrawal, and this depression can persist for years. Although depression doesn't appear to affect everyone, [studies have documented](#) ¹⁰ depressive symptoms, especially during withdrawal, with several reports of suicides. It's unclear whether individuals with depression caused by stopping high-dose steroid use would respond to [antidepressants](#) and should be monitored carefully for suicidal behavior.

Steroid Detoxification Medications

[Certain medications](#) ¹¹ have been shown to help treatment of anabolic steroid withdrawal in some cases. Doctors may prescribe antidepressants to treat depression, nonnarcotic pain medicines for headaches and muscle and joint pain, anti-anxiety medications, and synthetic hormones or other medications to help restore hormonal balance.

For more information about withdrawal, read our guide on [Steroid Addiction](#).

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III. Treatment for Steroid Addiction

Some people seeking treatment for steroid addiction have found that a combination of behavioral therapy and certain medications are helpful. The goals of medical treatment are to help alleviate withdrawal symptoms and restore hormonal function. Depending on how long the person was using steroids and how much they were using, it may also be necessary to taper off steroids to minimize side effects.

Behavioral therapy may include psychosocial treatments, such as cognitive behavioral therapy, motivational interviewing, and group counseling. Therapeutic goals are to address preoccupations with enhancing muscularity and resolve self-esteem and confidence issues that may have resulted from previous bullying/violence. It's suggested that psychological issues be tackled after acute withdrawal is resolved to help ensure more successful treatment.

Rehabilitation Settings

Within either an inpatient or outpatient setting, treatments such as detoxification services, behavioral therapies, and medication-assisted treatments are offered for varying lengths of time.

Inpatient treatment involves living full-time (including overnight) at a treatment facility for a set period of time. Outpatient treatment involves scheduled appointments at a facility in which you are free to come and go. Within each category, there are several distinctions.

Tramadol Treatment Programs

Setting	Type of Treatment	Description	Duration	Time Commitment
Inpatient	Short-Term Residential	Intensive treatment, sometimes in a hospital setting. Therapies offered are extensive. Medication-assisted treatment is available to those who qualify.	14-30 days	Hours Per Day: 24 Days Per Week: 7
		Long-Term Residential	Intensive treatment in a non-hospital setting, most often a therapeutic community with other patients. Therapies offered are extensive. Medication-assisted treatment is available to those who qualify.	3-12 months Hours Per Day: 24 Days Per Week: 7
		Partial Hospitalization	Intensive treatment in a hospital setting. Patients do not stay overnight. Considered inpatient due to the hospital setting. Extensive services are provided and require a near full-time commitment every week. Medication-assisted treatment is available to those who qualify.	14-30 days Hours Per Day: 6-8 Days Per Week: 5
Outpatient	Intensive Day Treatment	Extensive services of an inpatient program but patients return home each day following treatment. After counseling, patients often transition to less intensive completion. Therapies offered are extensive. Medication-assisted treatment is available to those who qualify.	3-4 months Hours Per Day: 2-4 Days Per Week: 3	
	Counseling	Both individual counseling and group counseling focus on short-term behavioral goals to develop coping strategies. Therapies offered are moderate. Medication-assisted treatment is not available.	As long as desired	Hours Per Day: 1-2 Days Per Week: 1-3
	Support Groups	Self-help groups center on maintaining abstinence after another form of treatment. Typically meet one day a week for 1-2 hours.	As long as desired	Hours Per Day: 1-2 Days Per Week: 1

Source: [National Institute on Drug Abuse](#) ¹²

Behavioral and Medication-Assisted Therapies

Behavioral therapy for substance addiction seeks to identify and manage addictive behaviors that lead to use and prevent relapse. Behavioral therapy is based on the concept that all behavior is learned, and, thus, unhealthy behavior can be changed through learning coping skills and increasing awareness of negative thoughts and beliefs that contribute to substance abuse.

The primary goals of medication-assisted treatment are to help alleviate withdrawal symptoms and lead to prevent relapse and restore hormonal balance. Hormonal imbalance can cause and/or worsen withdrawal symptoms and long-term health issues. Medications prescribed for depression may also lower the risk of suicide, which is the most dangerous part of the withdrawal process.

Behavioral Therapies for Steroid Addiction

Type of Therapy	Definition
Cognitive Behavioral Therapy	Cognitive Behavioral Therapy is a goal-directed process that helps steroid users unlearn maladaptive behavioral patterns and thought processes that led to their substance abuse. Therapists help clients readjust to life without steroids by helping them develop healthier habits and coping strategies to prevent relapse.
Motivational Interviewing	Motivational interviewing focuses on improving steroid users' motivations to change their addictive behaviors by exploring their ambivalence about changing. It also helps them replace addictive behaviors with new behavioral skills.
Group Counseling	Group counseling allows individuals with similar substance abuse issues to receive therapy as a group, sharing their experiences and helping provide support to others going through the same or similar issues to anabolic steroid abuse. Support groups are a form of group counseling.

Medication-Assisted Treatment for Steroid Addiction

Type of Medication for Treatment	Definition
Medications for Specific Symptoms	Various medications have been used during anabolic steroid withdrawal to treat specific symptoms. Medications previously used include antidepressants to counter depression, nonnarcotic pain medications for headaches and muscle and joint pain, anti-anxiety medications, and various medications to help restore hormonal balance, such as nonaddictive testosterone supplements.

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IV. How to Find Help

Finding a Rehabilitation Center for Steroid Addiction

The long-term effects on the body from steroid abuse are numerous and can affect all major organ systems. Many effects are reversible, but damage to the kidneys, liver, and cardiovascular system could lead to premature death. Due to the potentially severe and long-lasting withdrawal symptoms that often occur when stopping steroid use, it can be extremely difficult to stop on your own and avoid relapse safely.

Research has consistently shown that steroid users are [reluctant to seek medical help](#). Therefore, few of them seek substance abuse treatment, and many may even be [skilled](#) ¹³ about medical professionals' anabolic steroid knowledge. Despite this reluctance, it's important that steroid abusers seek a reputable rehabilitation center to break addictive behaviors that are doing serious harm to their bodies.

Our Directory

Our directory of rehab programs includes a comprehensive list of available treatment centers and programs as provided by the Substance Abuse and Mental Health Services Administration (SAMHSA). In the directory, you will find tools to filter the programs by setting, price, and location.

Click your state from the list below, then input your zip code to find rehabs near you

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York State
- North Carolina
- North Dakota
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- Utah
- Vermont
- Virginia
- Washington
- West Virginia
- Wisconsin
- Wyoming

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