Alcohol Abuse Screening and Brief Interventions for use in Primary Care Settings

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Objectives

• Upon completion of this session, participants will:

  • Recognize the need for alcohol screening in primary care settings.
  
  • Identify at least three alcohol screening tools for use in primary care settings.
  
  • Compare brief intervention techniques available for use in primary care practices.

Alcohol Abuse

• Alcohol abuse has become a critical problem in the US & ND
  • ND has one of the highest rates of alcohol use among 12-25 year olds
  
  • ND has one of the highest rates of binge alcohol use in all age groups in the country
    • Includes 12y-20y age group
  
  • Highest prevalence of binge drinking in ND:
    • Farm or ranch employees, food or drink servers, and farm or ranch owners.
Excessive Alcohol Use is the 3rd Leading Lifestyle Related Cause of Death in United States Each Year!

United States
- More than 50% of adults in the U.S. drank in past 30 days
- 6.1% drank heavily
- 17% binge drank

North Dakota
- 60.6% of North Dakotans drank at least one drink within past 30 days
  - 6.5% drank heavily
  - 24.1% binge drank

Who’s Drinking?

Females
- Midwestern college-aged women are engaging in high-risk alcohol behavior and binge drinking at increasing rates.
- 60% of US women of childbearing age (18-44 yrs) use alcohol
- In the US, 47% of women reported recent drinking and 10% of those reported binge drinking

In North Dakota:
- 54% of women reported recent drinking;
- 23% of women reported recent binge drinking
Infants and Children

- Female Drinking has a **HUGE** Impact on Infants and Children!
- Pre-pregnancy drinking behavior correlates with alcohol use during pregnancy
- 10-12% of women continue to drink during pregnancy; 2% admit to binge drinking causing PAE to the fetus
- Parental and family behaviors/attitudes about alcohol are also strongly tied to future alcohol use.
- The earlier drinking starts, the more likely alcohol will be abused later in life
  - 40% more likely to abuse alcohol if drinking starts at age 12

Fetal Alcohol Spectrum Disorders

- Prevalence of Fetal Alcohol Syndrome in US
  - 0.5-2 cases per 1000 live births
- For every child born with FAS
  - At least 3 more are born with neurobehavioral deficits from PAE
  - 9-10 per 1000 live births fall under the Fetal Alcohol Spectrum Disorder umbrella
- FASD = Growth delays, deformities, and neurodevelopmental deficits

The North Dakota FASD Registry has a current record of 486 cases of FAS/FASD in the state

Teens and Young Adults

- YRBS: 9-12 graders surveyed (5 or more drinks in a row within a couple of hours on at least 1 day):
  - US 21.9 reported binge drinking
- Underage drinking peaks by college & alcohol dependence becomes more common
- Young adults often have little contact with health professionals making screening and intervention in this group difficult

25.6% of ND High school students reported binge drinking (2011)
Males

- Male are more likely to drink excessively and more likely to take other risks like driving fast, not using seatbelts
- In the US, 61% of men drink and 20% report recent binge drinking
- Men are 2x more likely than women to binge drink

In North Dakota:
- 64% of men reported recent drinking
- 24% of men reported recent binge drinking

Elderly

- As US baby boomers age, there is a potential for their substance abuse to place a significant burden on the healthcare system.
- The number of age 50 years or older with substance abuse disorders may double by 2020
- Older adults are often
  - Underdiagnosed
  - Misdiagnosed
  - Untreated or undertreated

Age group that binge drinks most often: 65+ years

The High Cost of Drinking

- Excessive drinking cost the U.S. $223.5 billion per year
  - Median state cost $2.9 billion
  - Binge drinking contributes to >70% of total state costs
  - Underage drinking responsible for >11% of total state costs

- (2006 data)
The High Cost of Drinking in North Dakota

- Excessive alcohol use cost ND a total of $420 million
  - Cost per drink: $1.36 per drink
  - Per capita cost: $660
  - Binge drinking: $305 million
  - Underage drinking: $69 million
- Healthcare Cost: $59.3 million
- Productivity Cost: $280.9 million
- Other Cost: $79.4 million
  - *Includes costs r/t crime, criminal justice system costs, MVAs, property damage, special education r/t FAS

Non-Monetary Costs of Drinking

- Morbidity
  - Long term alcohol use can lead to: dementia, stroke, neuropathy, heart disease, hypertension, depression, anxiety, thoughts of suicide, cancer and liver disease
- Mortality
  - 88,000 deaths due to excessive alcohol use in U.S. each year
  - 2.5 million years of potential life lost due to excessive alcohol use in U.S. each year

Why Aren’t North Dakotans getting help?

- North Dakota is a Frontier State
  - 37 of the state’s 53 counties have 7 or fewer people per square mile
  - Longer distances to travel to clinic
  - Fewer providers
- Farm and ranch employees, food or drinker servers, farm/ranch owns have lower rates of insurance coverage
  - May determine ability to receive effective clinical interventions like SBIRT
  - **Costs for treatment, number of providers, western ND

North Dakota:
- 179 deaths/year;
- 5,132 years of potential life lost each year
Why Aren’t North Dakotans getting help?

• North Dakota ranks among the highest in the country for rates of individuals needing but not receiving alcohol treatment. Very few alcohol treatment centers regionally.
  • Time away from work
  • Travel and distance to centers
  • Finances
  • Stigma
  • Lack of resources....
  
  ALL of the above limit access and opportunities for help with this problem!

Are Health Professionals Supposed to Routinely Screen for Alcohol Use?

U.S. Screening Guidelines and Recommendations

• Healthy People 2020
  • Objectives stress:
    • DECREASE adolescent alcohol use and DECREASE binge drinking
    • DECREASE the number of adults who drink excessively
    • DECREASE alcohol related deaths
    • INCREASE screening and referral to treatment for alcohol problems
    • INCREASE the number of Level I and II trauma centers and primary care settings that use SBI
    • PREVENT alcohol use in pregnancy
    • REDUCE the numbers of FASDs in the U.S.
U.S. Screening Guidelines and Recommendations

- USPSTF has issued a Grade B recommendation
  - Clinicians should screen adults aged 18 years and older for alcohol misuse and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce alcohol misuse
  - This includes pregnant women BUT remember pregnant women should completely abstain from alcohol use

http://www.uspreventiveservicestaskforce.org/uspstf12/alcmisuse/alcmisusefinalrs.htm

US Screening Guidelines and Recommendations

- The US Health and Human Services National Task Force on FAS and Fetal Alcohol Effects
  - Recommends education and training in:
    - Alcohol screening and intervention for women at risk of alcohol exposed pregnancies
    - Formal alcohol screening tools with validated instruments
    - Brief intervention programs appropriate for women of childbearing age
- The Patient Protection and Affordable Care Act
  - Calls for an increased integration of substance abuse intervention and treatments into mainstream healthcare

Who Else Recommends Screening for Alcohol Abuse?

- American Academy of Pediatrics
- American Medical Association
- World Health Organization
- Administration on Aging
- American Public Health Association
- American College of Emergency Physicians
- US Surgeon General
- American Society of Addiction Medicine
Why Aren’t Health Professionals Screening?

Barriers to Screening

• Despite the known benefits of early identification of alcohol abuse, many providers do not routinely screen patients
• WHY?
  • Difficult topic/stigma
  • Lack of time
  • Inexperience or lack of confidence with screening
  • No resources available
  • Worry about hurting with patients
  • Not convinced that interventions will help
• Only 1 in 6 adults talk with health professional about drinking, BUT we can change this.........

What is SBIRT?

• Screening
• Brief Intervention
• Referral to Treatment

• A true benefit of the SBIRT technique is that it helps providers “meet the patient where they are” and compliments assessments in multiple primary care settings and emergency departments
SBIRT

- Impacts awareness and Prevention and education
- Improves rates of diagnosis
- Helps decrease comorbidities
- Reduces overall healthcare costs

How much work is SBIRT?

- 4% Brief Intervention and Referral
- 25% Brief Intervention
- 71% No Intervention

How to Begin Screening

What Constitutes a Standard Drink?
Screening Tools

- The U.S. Preventive Services Task Force considers 3 tools as the instruments of choice for screening for alcohol misuse in the primary care setting:
  - Alcohol Use Disorders Identification Test (AUDIT)
  - The abbreviated AUDIT-Consumption (AUDIT-C)
  - A single-question screening (NIAAA)
Alcohol Use Disorders Identification Test (AUDIT)

• AUDIT:
  • Most widely studied tool for detecting alcohol misuse in primary care settings
  • Good sensitivity and specificity across multiple populations
  • 2-5 minutes to complete

• AUDIT-C:
  • Brief Screen: 3 questions
  • Modified version of 10 question AUDIT
  • If positive, go on to full AUDIT

AUDIT and AUDIT-C


• Audit-C:

<table>
<thead>
<tr>
<th>Questions</th>
<th>Scoring layers</th>
<th>Never</th>
<th>Monthly or less</th>
<th>2-4 times per month</th>
<th>2-3 times per week</th>
<th>&gt;4 times per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>How often do you have a drink containing alcohol?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many units of alcohol do you drink on a typical day when you are drinking?</td>
<td></td>
<td>1-2</td>
<td>3-4</td>
<td>5-6</td>
<td>7-9</td>
<td>10+</td>
</tr>
<tr>
<td>How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?</td>
<td></td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
</tbody>
</table>

Single Question Screening

• National Institute on Alcohol Abuse and Alcoholism
• Adequate sensitivity and specificity across the alcohol-misuse spectrum
• Requires less than 1 minute to administer.
Single Question Screening
National Institute on Alcohol Abuse and Alcoholism

Do you sometimes drink beer, wine or other alcoholic beverages?

Screening is Complete....BUT remember to EDUCATE!

How many times in the past year have you had 5 (for men) or 4 (for women and all adults older than 65 years) or more drinks in a day?

NO YES

Screening is Complete....BUT remember to EDUCATE!

CAGE Questionnaire

• 1. Have you ever felt you ought to CUT DOWN on your drinking or drug use?
• 2. Have people ANNOYED you by criticizing your drinking or drug use?
• 3. Have you felt bad or GUILTY about your drinking or drug use?
• 4. Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover (EYE-OPENER)?

CRAFFT

Have you ever ridden in a CAR driven by someone (including yourself) who was high or had been using alcohol or drugs?

Do you every use alcohol or drugs to RELAX, feel better about yourself or fit in?

Do you ever use alcohol or drugs while you are by yourself, ALONE?

Do you ever FORGET things you did while using alcohol or drugs?

Do your family or friends ever tell you that you should cut down on your drinking or drug use?

Have you ever gotten into TROUBLE while you were using alcohol or drugs?

(O'Connor, Floyd, & Guiton, 2009)
Online Screening Option

• http://www.uwhealth.org/health/topic/special/interactive-tool-do-you-have-a-drinking-problem/zu1466.html

How BRIEF is a Brief Intervention?

• A "single session or multiple sessions of motivational discussion focused on increasing insight and awareness regarding substance use and motivation toward behavioral change"

• Brief behavioral interventions
  • Moderate alcohol consumption
  • Eliminate harmful drinking practices in patients who have less severe alcohol use
  • Provide patient education
  • Even 5 minutes of simple advice can make a difference!

Go with the FLO!!

• During the Brief Intervention:
  • Provide FEEDBACK with the patient
  • LISTEN to their responses and questions and encourage their thinking and decision-making process
  • Provide OPTIONS for the next step
Video Clips Examples of SBI

- http://www.sbirtoregon.org/

Referral To Treatment

- Confidentiality
- Identify alcohol services in your community
  - Consider having a manual handy for staff: phone numbers, contact persons
  - Acute detox centers
  - Don’t forget about mutual-help groups like Alcoholics Anonymous
- Have information about costs readily available

Local Services Referral List

- University Counseling Center
  - Myron Veenstra, Director
  - University of North Dakota
  - PO Box 1982
  - Grand Forks, ND 58202
  - 701-777-2197
  - DUI Evaluations, Educational Counseling

- Alcohol and Drug Services, Inc.
  - Gary Woods, LAC
  - 311 4th St. South Suite 1
  - Grand Forks, ND 58201
  - 701-746-0891
  - DUI Evaluations, DUI Services, Outpatient Treatment

- Student Center
  - 1803 44th Ave S #401
  - Grand Forks, ND 58201
  - 701-772-2020
  - Adult, Adolescent, Inpatient Treatment, Day Treatment

- Agape Associates, PLLC
  - Karen Wolter, LAC, LMCE
  - 1407 24th Ave S #101
  - Grand Forks, ND 58201
  - 701-746-4006
  - DUI Evaluations, Low Intensity Outpatient, Individual Therapy, Group Therapy
Local Services Referral List

**Northeast Human Service Center**
- Deb Davis, LAC
  - 1607 5th Street
  - Suite 225
  - 701-317-5692
  - Chemical Dependency Assessments, Outpatient Treatment, Prime for Life Services, Health Education Program.

**Milestone Recovery Center**
- Curt Hamre
  - 329 South Minot Ave.
  - 701-381-0511
  - Inpatient and Outpatient Treatment and Individualized Treatment Plans.

**Debra Lemberg, LAC**
- 1407 24th Ave. S
  - Suite 225
  - 701-757-3206
  - Adolescent, Outpatient Treatment, Individual, Group, Family Counseling, Substance Prevention, Continuing Care and Extended Care, DUI Services, Education.

**Dave Grunow, LAC**
- 1607 5th Street
  - Suite 225
  - 701-795-0889
  - Outpatient Treatment, Day Treatment, and Life Skills Center, Adolescent.

**Drake Counseling Services**
- Jodi Ramberg, LAC
  - 1407 24th Ave. S
  - Suite 1
  - 311 S 4th St.
  - 701-795-1916
  - Adult, Adolescent, Outpatient Treatment, Individual, Group, Family Counseling, Substance Prevention, Continuing Care and Extended Care, DUI Services, Education.

Future Work

- Seed Grant
  - Educational Training for NP and Social Work Students
  - Preceptor Training
  - Community Sites

Resources

- Substance Use in North Dakota: [http://issuu.com/ndprmc/docs/statedatabklt__eff.14jun2013__final](http://issuu.com/ndprmc/docs/statedatabklt__eff.14jun2013__final)