

Brief intervention in Australia

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The University of Sydney

Cost

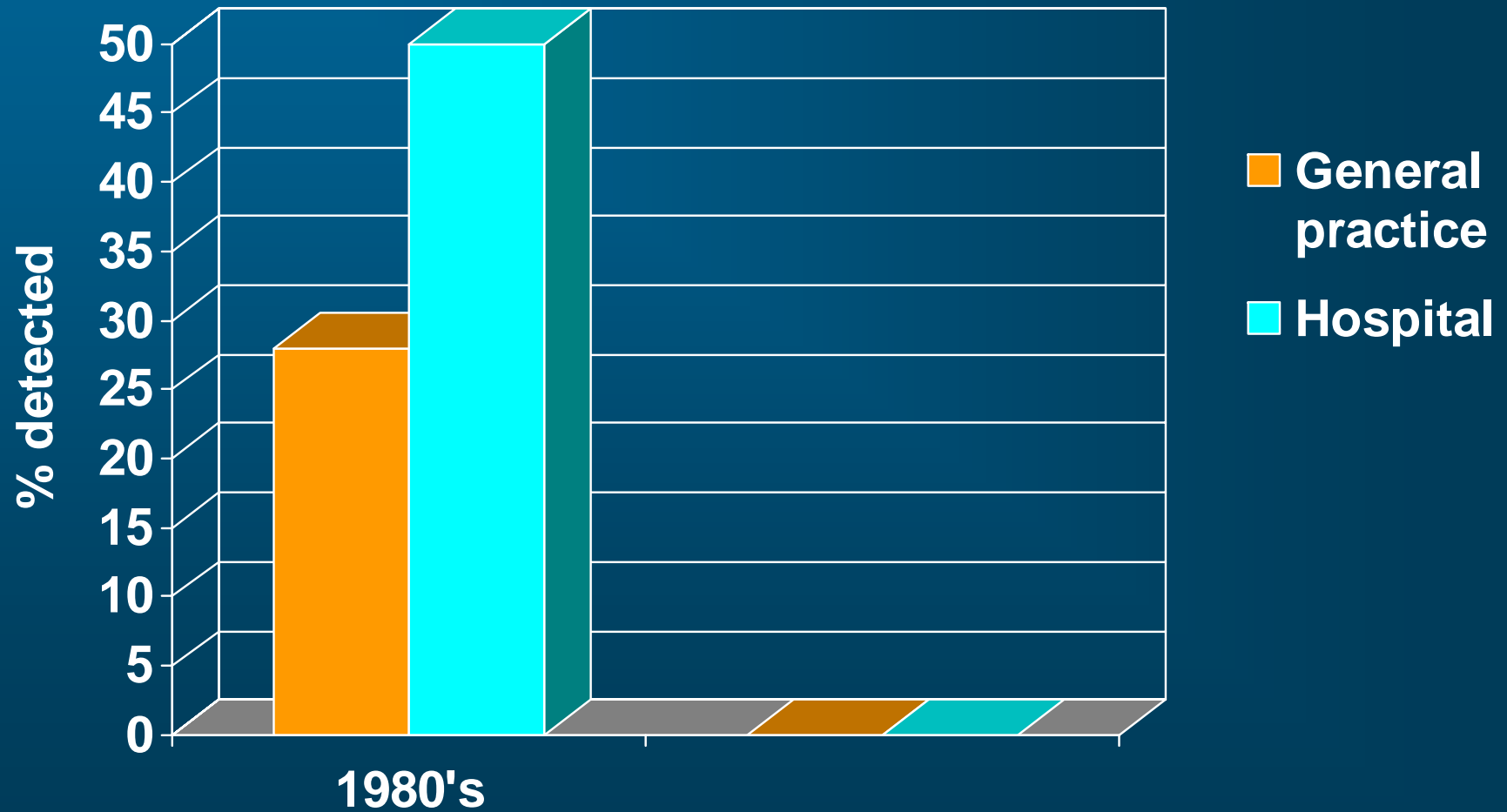
- **Costs in 1996 with a doctor screening:**
 - 500 Bhat / patient**
 - 16,250 Bhat / year of life saved**
- **1/20th the cost of breast cancer screening**

Wutzke, 2001

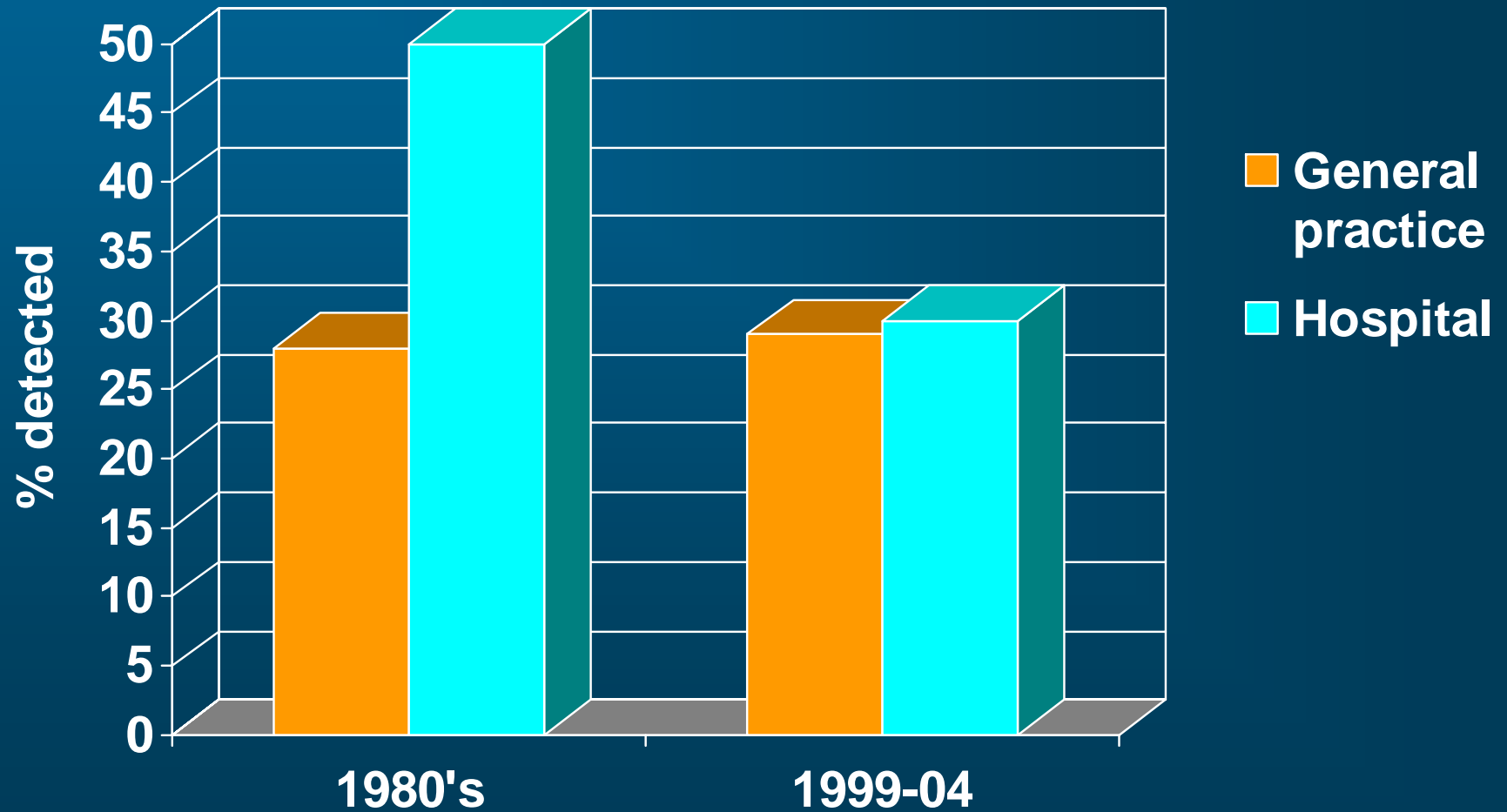
Is brief intervention happening?

The Australian experience

% of problem drinkers detected



% of problem drinkers detected



Barriers to detection

- **Lack of skills & confidence**
 - 20% physicians felt very well prepared to identify “alcoholism”

(quoted in Fleming 04)
- **Attitudes:**
 - Scared to offend
 - “alcoholism” versus a lifestyle risk factor
 - Pessimism, too hard
 - Lack of emphasis on prevention
 - No government rebate for family doctors screening for alcohol problems

Time

perhaps the biggest barrier



- **A 3 week wait to see a GP in Gunnedah**





Making intervention happen

- **Simplifying screening:**
- **(AUDIT-C)**
 - How often do you drink?
 - How many drinks do you have when you're drinking?
 - How often ... 6 or more drinks on one occasion?

A single screening question ?

- **“How often do you have 6 or more or more drinks on one occasion?”**
 - **Detects 4 out 5 cases of abuse/dependence**
 - **Less than 20% false positives**

**A challenge estimating number
of standard drinks with home
made or home poured alcohol**

Making intervention happen

- Simplifying screening
- Making intervention even easier

Questionnaire

drink less

Dear Patient

As part of my service I am examining lifestyle issues likely to affect the health of my patients. This will assist me in giving the best treatment possible. To help me do this, could you please complete this questionnaire in the waiting room before your appointment. When you have finished, please hand it back to the receptionist. I will explain the results to you during your consultation. Your answers to these questions will be treated in strict confidence.

Name _____

Age _____ Sex Male Female

1 standard drink =



1.5 standard drinks =



1. How often do you have a
Never M

2. How many standard drink
1 or 2

3. How often do you have 6
Never Less

4. How often during the last
Never Less

5. How often during the last
Never Less

6. How often during the last
Never Less

7. How often during the last
Never Less

8. How often during the last
Never Less

9. Have you or someone else
No

10. Has a friend, relative, do
No

Scoring Template

	0-7 = LOW RISK	8-12 = AT RISK DRINKER	13+ = HIGH RISK of dependence	4
1				4
2				4
3				4
4				4
5				4
6				4
7				4
8				4
9				4
10				4

Phone the NSW Drug & Alcohol Specialist Advisory Service (DASAS) on (02) 9261 8888 or 1800 022 887 to refer your patient to an appropriate agency if you would like support.

drink less

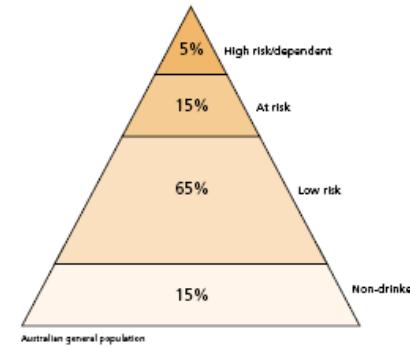
drink less

Handycard

1 Feedback – Are YOU at risk from drinking alcohol?

Score	Common Effects
0-7 low risk	<ul style="list-style-type: none"> Increased relaxation Reduced risk of heart disease In some situations even moderate drinking can pose a risk (e.g. driving, pregnancy, some medical conditions) Even occasional heavy drinking can put you at risk of injury
8-12 at risk	<ul style="list-style-type: none"> Less energy Insomnia Poor co-ordination Less ability to think clearly High blood pressure Depression/stress Impotence Risk of injury Danger in driving & operating machinery
13+ High risk of dependence	<ul style="list-style-type: none"> The above risks plus: Damage to liver, brain, memory Physical dependence (addiction)

What is everyone else like?



Have YOU thought about changing your drinking?

3 What benefits will you get from cutting down?

- sleep better
- more energy
- lose weight
- no hangovers
- better memory
- better physical shape
- improved mood
- less family hassles
- more money

Reduced risk of

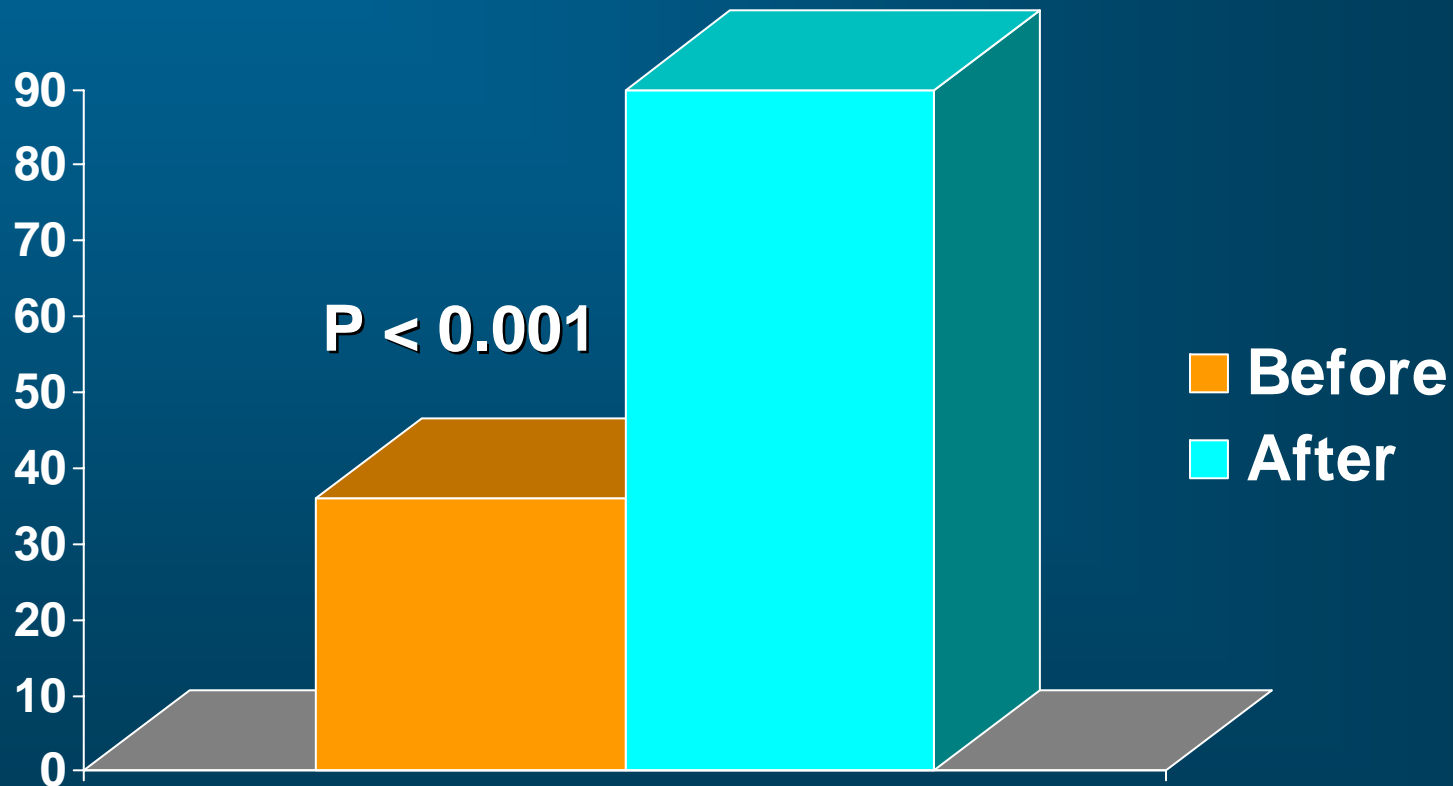
- high blood pressure
- liver c
- brain
- cancer
- drink
- injury



GP training

- **400 GPs trained**
- **Approx 50 other health and welfare staff**
 - **evening sessions over a meal**
 - **Funding from the Roads and Traffic Authority**

Confidence of doctors in conducting brief intervention



N=300; Proude et al, 2006

Making intervention happen

- Simplifying screening
- Making intervention even easier
- Improving professional education
 - Student education
 - Post graduate education

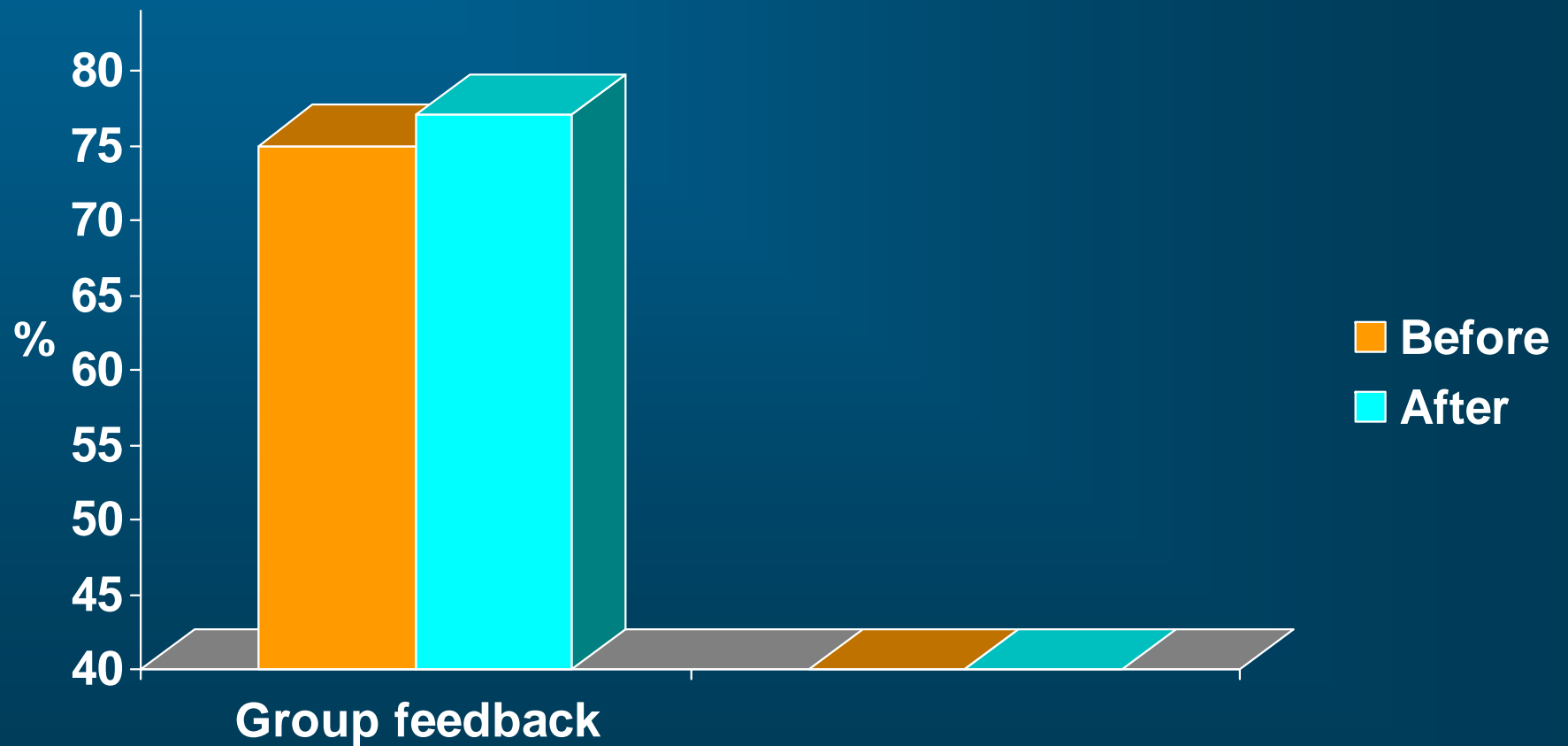
Methods for improving alcohol history taking of junior doctors

**group versus individual
feedback**

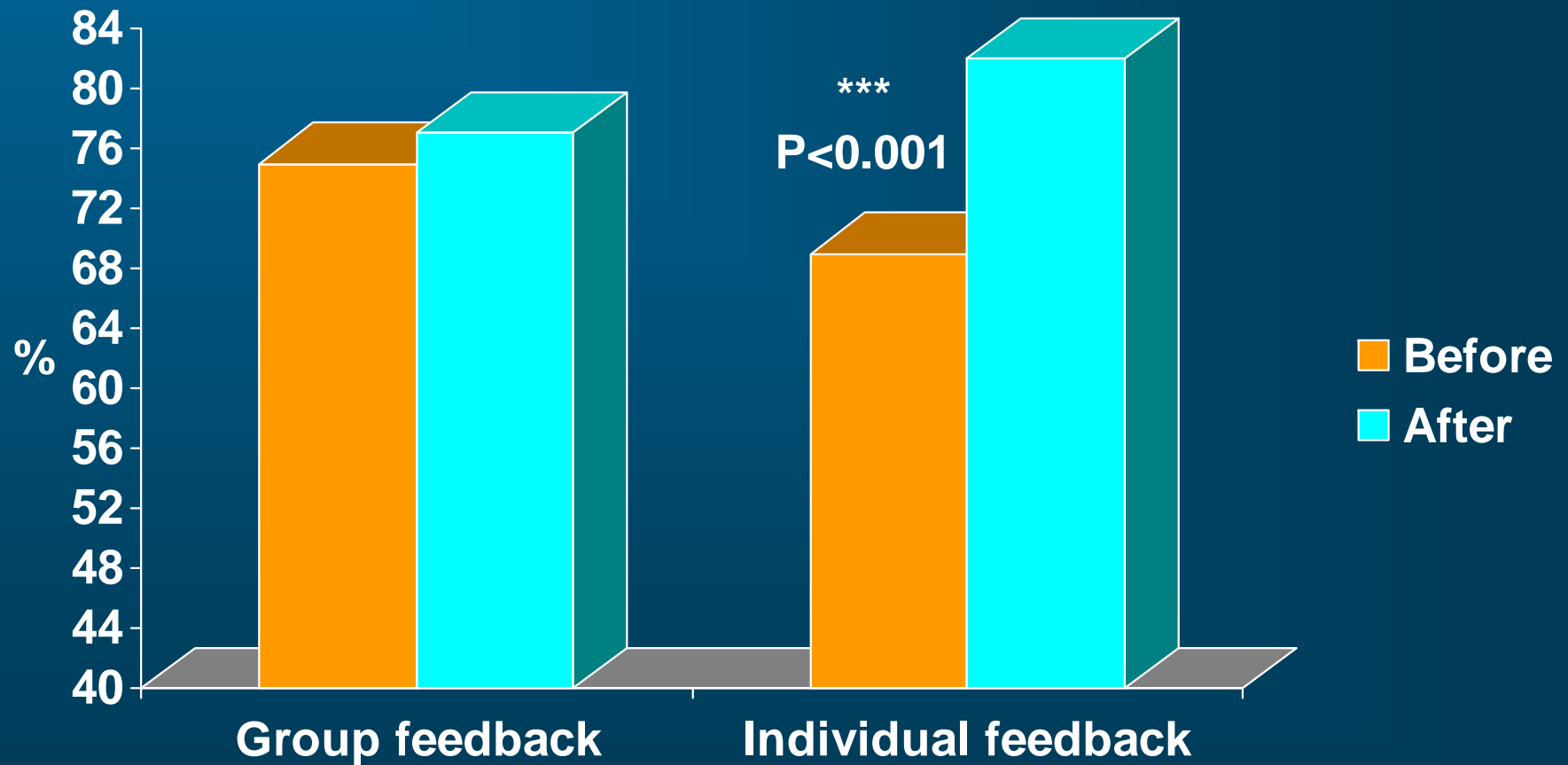
Cross over trial

- **2 city hospitals**
- **Medical records audited before and after intervention**
- **Hospital 1: individual feedback**
- **Hospital 2: group feedback**
- **In the second year, each hospital receives the other intervention**

Percentage of histories that are quantified



Percentage of histories that are quantified



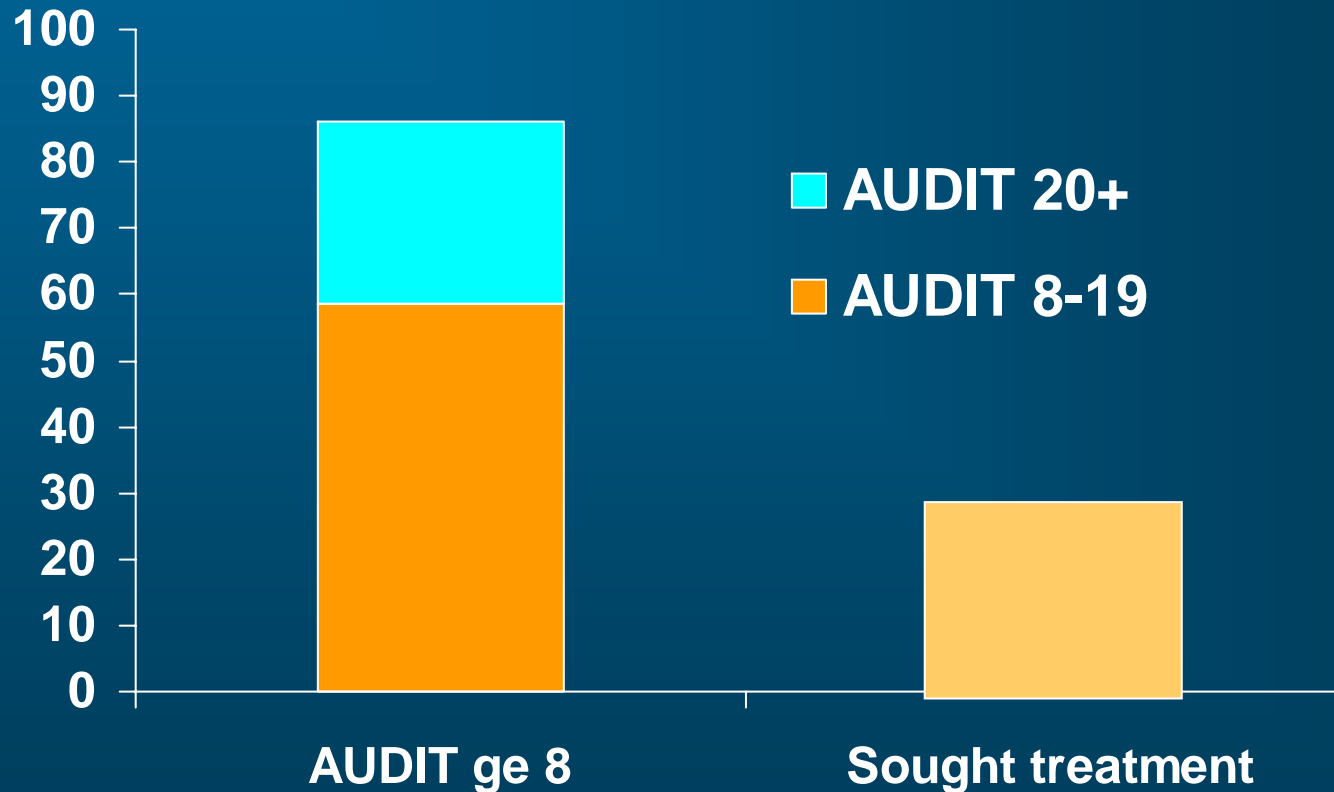
N=3025 records; Proude et al

Not just doctors....

Screening and brief intervention by

- **Nurses, e.g. clinics or wards**
- **Health workers**
- **Probation and parole**
- **Corrections**
- **?community screening**

Drink driver education course



Mills, Conigrave et al



Training for Aboriginal health workers

- **Close understanding of culture and local community**
- **Clinical experience, but limited formal training**
- **Flexible training:**
 - “block release”
 - **Steps in career development**
 - Non university through to university
 - **Pay recognition for training**

Making intervention happen

- Simplifying screening
- Making intervention even easier
- Improving professional education
- **Part of a multi-prong approach**
 - Changing attitudes to drinking
 - Community education
 - Control measures

Making intervention happen

- Simplifying screening
- Making intervention even easier
- Improving professional education
- Part of a multi-prong approach
- **Creative solutions**

Creative solutions

- **Interventions by :**
 - **correspondence**
 - **phone**
 - **internet**

Summary: brief intervention

- **Simple, cheap and effective**
- **Does not require a doctor**
- **But a challenge to change clinical practice**

