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<tr>
<td>Publication date</td>
<td>2011-01-20</td>
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<tr>
<td>Conference details</td>
<td>Paper presented at the ADEGS/AUDGPI Scientific Meeting (Annual Conference of University Departments of General Practice in Ireland), Thursday 20th &amp; Friday 21st January 2011</td>
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<tr>
<td>Item record/more information</td>
<td><a href="http://hdl.handle.net/10197/3472">http://hdl.handle.net/10197/3472</a></td>
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“Exploring healthcare professionals experience and attitudes towards screening for and treatment of problem alcohol use among drug users attending primary care”

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Abstract:

**Introduction:** Problem alcohol use (PAU) is common among drug users (DUs) prevalence rates vary from 13-76%, in a recent Irish study of patients on methadone 35% had an AUDIT score indicating PAU. PAU is associated with adverse health outcomes including physical, psychological and social implications. Despite the crucial role of primary care in screening and treatment for problematic alcohol use and the importance of a stepped approach to alcohol treatment, supported by the evidence, little data reporting intervention interventions which address this issue in DUs attending primary care has been reported. This study has examined healthcare professionals’ experience of and attitudes towards screening and treatment for PAU among drug users in primary care.

**Methods:** Twelve GPs and practice nurses who were recruited through the central treatment list participated in this study. Qualitative interviews exploring their experiences of and attitudes towards management of PAU in DUs attending primary care were conducted according to a semi structured interview guide. The topic guide was informed by the results of a literature review completed in the previous phase of our research project. Interviews were audio-recorded and subsequently transcribed by external transcribers. For the purpose of this presentation, we have analysed only sections of the interviews concerning strategies that could facilitate implementation of alcohol interventions in primary care settings. Thematic analysis was utilized to analyse these interview sections.

**Results:** Analysis of the selected interview sections revealed that Doctors and Nurses would prefer additional staff to be available in order to support successful implementation of alcohol screening and brief intervention within their practices. They rated this strategy as the most helpful from a list of strategies provided by the interviewers.

**Conclusions:** The results of this preliminary analysis pointed to the importance of professionals trained in the delivery of brief interventions as a necessary adjunct to the optimal provision of drug treatment in general practice. This finding supports the evidence showing that implementation of evidence based interventions to vulnerable populations attending primary care needs to be preceded by identification of potential obstacles at the implementation onset. Further implications of our findings for clinical practice and policy planning will be discussed in the presentation.
Acknowledgements

- Patients and staff at participating practices
- Health Research Board Ireland
- Professor Kevin Malone
- A shortened version of this presentation was delivered in Slovak language at the 10th Annual Czecho-Slovak conference ‘Qualitative approach and methods in human sciences’, 24-25.1.2011, Olomouc, Czech Republic
References


