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The management of problem alcohol use among drug users in primary care: Exploring patients’ experience of screening and treatment

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Abstract:

Introduction: Problem alcohol use is common among drug using patients who attend GPs in Ireland (35%) and other European countries. It is associated with adverse health outcomes including physical, psychological and social implications. These include various forms of liver disease exacerbated by the high prevalence of Hepatitis C among IDUs (62-81% in Ireland), fatal/non-fatal opiate overdose, mood anxiety, personality disorders, poor emotional health and wellbeing, early cessation of drug treatment, poor treatment outcomes and an increase in anti-social behaviour. Evidence has demonstrated the role of primary care in screening and treatment for problem alcohol use and the importance of a stepped approach to alcohol treatment. This study examined patients’ experience of being screened and treated for problem alcohol use, the barriers and enablers to addressing these issues and their views on how these therapeutic interventions can be improved.

Methods: We conducted semi structured interviews with patients (n=28) attending general practice for methadone services. Patients with known alcohol use were identified through GPs taking part in the study who were recruited through the central treatment list.

Results: Patients’ interviewed, commented on the serious nature of problem alcohol use, they were aware and had personal experience of the physical, psychological and social harm caused by problem alcohol use including liver disease, exacerbation of hepatitis C, depression, anxiety and death. Most patients’ report being screened for problem alcohol use at initial assessment but few reported routine screening or treatment. Patients’ highlighted the importance of a “good” relationship with healthcare professionals as key to the management of this issue. Main themes / codes: Patients and their experience of alcohol, experience and knowledge of alcohol related issues, experience of therapeutic interventions, patients view on service improvement. These findings informed development of clinical guidelines, which will be introduced in another presentation also at this conference.

Conclusions: Patients’ are aware of the prevalence and harm associated with problem alcohol use but are not fully aware of what constitutes ‘safe drinking’. Their experience of and attitudes towards therapeutic interventions for problem alcohol use are important resource when developing services in this area.

AUDGPI Annual Scientific Meeting, Friday 9th March 2012
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