Screening and brief intervention for hazardous alcohol use in an inner-city emergency ward in the Netherlands: a prospective study with 3 months follow up

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Hazardous alcohol use carries elevated risk for future health problems. Visits to an ED offer a chance to promote change in drinking behavior. In this first prospective observational pilot study in the Netherlands we examined whether an ED Screening and Brief intervention (SBI) is effective in identifying patients with hazardous alcohol use and in motivating them to reduce their alcohol use.

Of the 41900 consecutive ED patients aged 18 years and older who presented at the ED between November ’11 and November ‘12 22537 were screened for hazardous alcohol use. AUDIT-C was used to assess drinking behavior. Cut-off values were 4 for women and 5 for men.

Patients with elevated AUDIT-C scores were provided educational material. Brief interventions were performed by ED nurses and physicians, who were trained in motivational interviewing. 37% of patients with elevated AUDIT-C scores received educational material. The proportion offered a brief intervention raised from 7 to 17% in time.

Follow-up: at 3 months, patients with a elevated AUDIT-C score were called and recent drinking pattern was assessed. 33% of them either lowered or stopped their alcohol use (p<0.005). When patients were given educational material or were given brief interventions, respectively 52 % and 77 % either lowered or stopped their alcohol intake. p < 0.001

This large prospective study in the Netherlands demonstrates that SBI can be effectively applied in a large innercity ED. Just screening results in a considerable reduce of alcohol intake. Educational material and motivational interventions have shown to be effective in further reducing alcohol intake. Our goal is motivate other hospitals in the Netherlands to adopt SBI.

3 short questions can reduce the alcohol intake by 33%