

IMPLEMENTATION AND EFFECTS OF BRIEF LIFESTYLE INTERVENTIONS IN THREE OUTPATIENT HOSPITAL SETTINGS

A.J. Fouwels¹, S.J.H. Bredie³, E. Peters^{1,3}, G.M. Schippers²

¹ AMC, Amsterdam, ² Amsterdam Institute for Addiction Research, ³ UMC St. Radboud, Nijmegen

Introduction

Smoking and excessive use of alcohol can cause or negatively influence several chronic diseases as various diseases of the liver, heart, vessels and respiratory system and thereby should be regarded as risk behaviors (1).

Medical specialists are in the unique position to promote patients' health, since they frequently encounter patients at crucial moments, when responsiveness to preventive intervention is high (2). However, medical specialists often feel inadequate to act accordingly. A considerable workload; lack of time; knowledge or motivation; doubts about the effectiveness; and inadequate skills are the most important known barriers (2-4).

Brief interventions by general practitioners are effective in reducing risk behaviors among patients (5,6). Therefore, it is worthwhile to study the implementation and effects of brief interventions when applied by internists and other secondary care physicians.

This study compares the implementation and effects of a brief, individually tailored, behavioral feedback intervention for patients in three different outpatient clinics.

Questions

- I. a. Is it possible to implement a brief behavioral feedback intervention conducted by the internist?
- b. By which factors is the implementation of the intervention influenced?
- II. What are the results of this feedback intervention?

Participants

1. AMC Amsterdam: outpatient clinic for general internal medicine, 2. VUMC Amsterdam: outpatient clinic for throat- nose- and ear- diseases, 3. UMC St. Radboud Nijmegen: outpatient clinic for general internal medicine.

References

1. Pal-de Bruin van der KM, Jansen J, Verkleij H. Leefstijlgewoonten en het verloop van chronische ziekten [Lifestyle habits and the cause of chronic diseases] Tijdschr Soc Gezondheidsz 1996;74: 107–15. 2. Brull R, Ghali WA, Quan H. Missed opportunities for prevention in general internal medicine. Can Med Assoc J 1999;160:1137–40. 3. Schwartz JS, Lewis CE, Clancy C, Kinosian MS, Radany MH, Koplan JP. Internists' practices in health promotion and disease prevention: a survey. Ann Intern Med 1991;114:46–53. 4. Kaariainen J, Sillanaukee P, Poutanen P, Seppa K. Opinions on alcohol-related issues among professionals in primary, occupational, and specialized health care. Alcohol Alcoholism 2001;36:141–6. 5. Poikolainen K. Effectiveness of brief interventions to reduce alcohol intake in primary health care populations: a meta-analysis. Prev Med 1999;28:503–9. 6. Russell MA, Wilson C, Taylor C, Baker CD. Effect of general practitioners' advice

I. Implementation

1. Development of lifestyle-screening instruments
 - a short lifestyle screening form
 - a computerized self report lifestyle questionnaire
2. Development of implemental intervention protocols
 - lifestyle risk profile for the patient
 - lifestyle risk profile for the physician
 - motivational interviewing protocol
3. Monitoring the delivering of the intervention
 - criticize the delivering of the interventions by scoring consultations with the Behaviour Change Counselling Index (BECCI)
4. Detecting factors that influenced the implementation process of the interventions
 - audio/videotapes of the interventions
 - an implementation questionnaire
 - interviews with the physicians

II. Effects

1. Investigate the results of the intervention on the smoking and drinking behaviour with:
 - a comparison group "care as usual"
 - two measures of lifestyle: first measure before the intervention, second measure three months after the intervention
2. Ascertain the effect of the intervention with a randomised controlled trial in the UMC St. Radboud
 - In this trial ca. 200 cardiovascular patients will be delivered a brief lifestyle intervention from their internist. To patients who still smoke after three months a more intensive "stop smoking" intervention by a nurse practitioner will be offered.