

## Testing the efficacy of brief alcohol interventions provided through different delivery channels: Study design

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### Background

#### Unhealthy alcohol use

- can cause cancer and other diseases<sup>1,2</sup>.
- Women/ men should not drink more than 3/ 4 drinks per occasion or 7/ 14 drinks per week<sup>3</sup>.

#### In-person interventions:

- + Therapist-client-relationship important for success<sup>4</sup>
- + Effective in substance use
- + Suitable for unmotivated clients

#### Computer interventions:

- + Reliable processing of multiple information
- + Effective in large populations<sup>5</sup>
- + Low costs

### Aim

- to investigate whether motivationally tailored interventions are more effective in reducing unhealthy alcohol use when delivered in-person or by computer.

### Methods

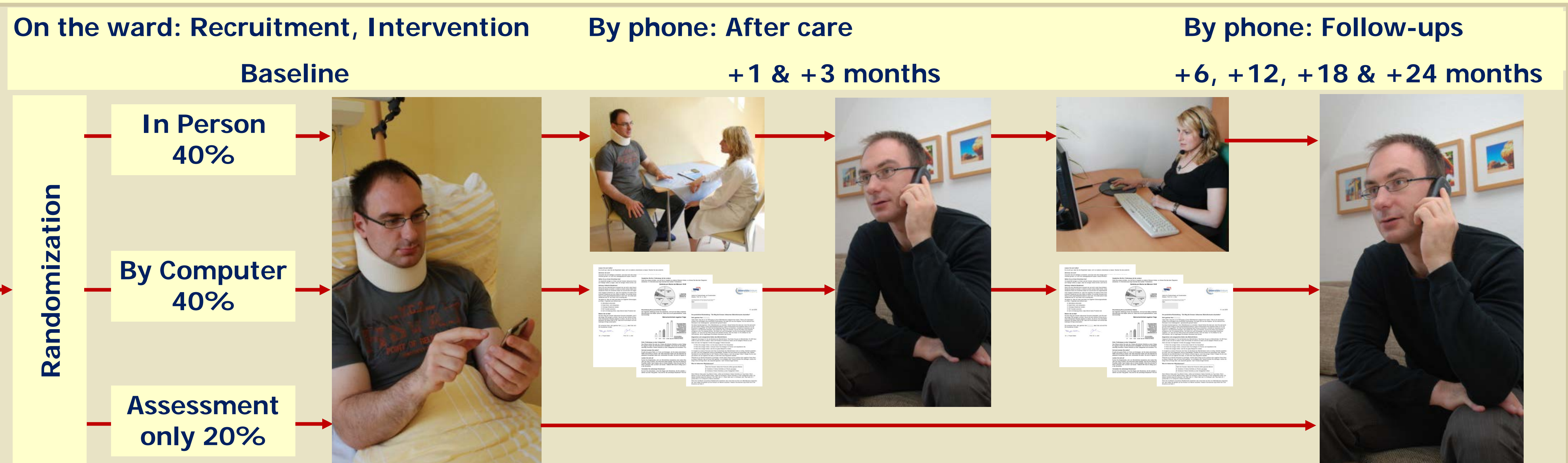
#### Sample recruitment

- Site: University Medicine Greifswald; 13 wards (surgical, internal, ear-nose-throat)
- Over 17 months (02/21/11 – 07/20/12) all inpatients aged 18 – 64 were systematically screened via handheld computers.
- PECO-Inclusion: AUDIT-C<sup>6</sup> ≥ 4/5 for women/men.
- Exclusion: AUDIT<sup>7</sup> ≥ 20 (indication alcohol use disorder<sup>8</sup>).
- Three-armed randomized study:
  1. Motivational Interviewing<sup>9</sup> based counselling (PE)
  2. Individualized computer generated feedback letters (CO)
  3. Assessment only (controls)

#### Follow-ups

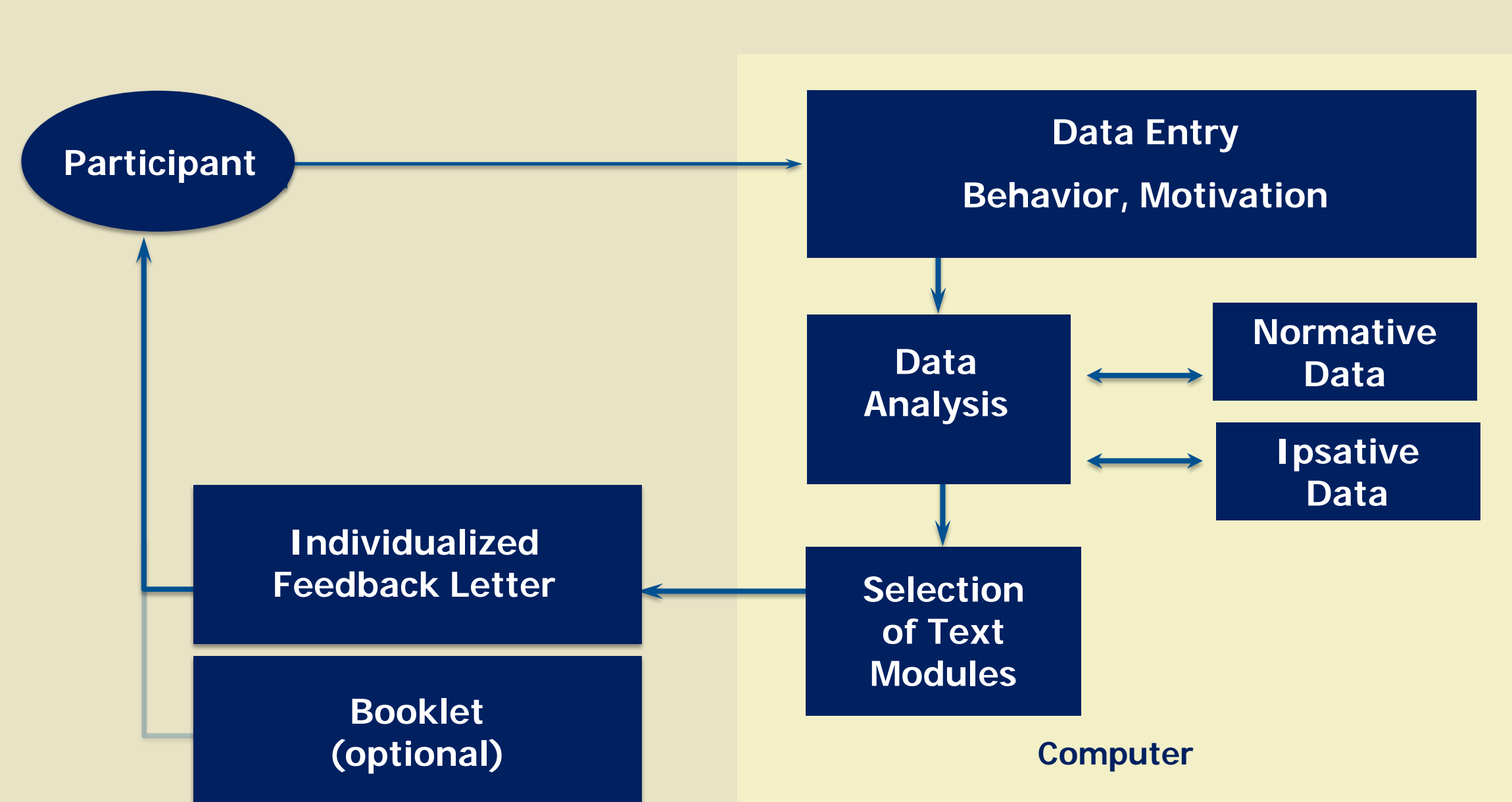
- 6, 12, 18 and 24 months after baseline.
- Outcomes: alcohol use, motivation, knowledge, self-reported health.

### Study design



### Computer intervention

- Computer-expert system + 1 of 4 booklets.
- 1x feedback letter on the ward, 2x per mail.

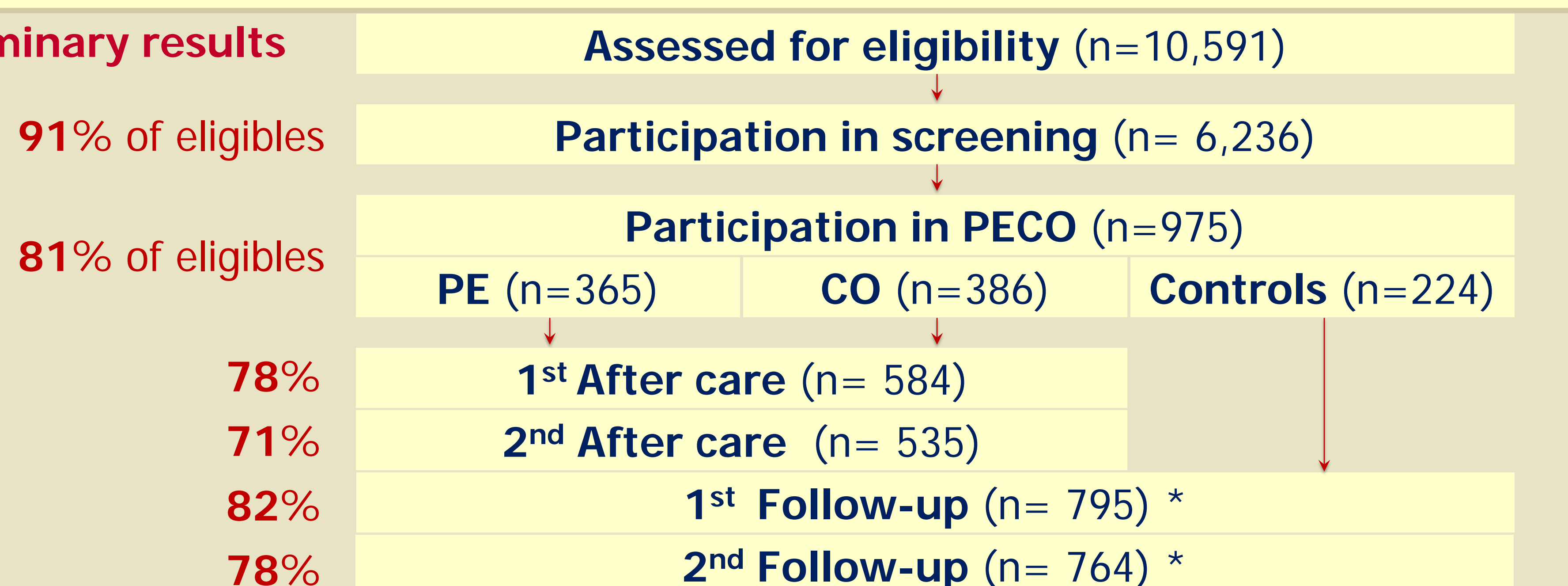


### In-person intervention

- Individualized manual, the same content as CO, based on Motivational Interviewing.
- 1x face-to-face counseling, 2x by phone.



### Preliminary results



\* 3<sup>rd</sup> & 4<sup>th</sup> Follow-up in progress: 77% & 71%, respectively (current state)

### Discussion

A large study has been successfully implemented at a general hospital. Satisfactory participation rates provide a solid basis to investigate the comparative efficacy of brief alcohol interventions delivered by computer versus in person. The follow-up period of up to 24 months provides an excellent opportunity to investigate gradually increasing effects.

### Literature

<sup>1</sup> Baan R et al. *Lancet Oncology* 2007. <sup>2</sup> British Medical Association 1995. <sup>3</sup> NIAAA 2012. <sup>4</sup> Martin DJ et al. *Journal of consulting and clinical psychology* 2000. <sup>5</sup> Rooke S et al. *Addiction* 2010. <sup>6</sup> Gual A et al. *Alcohol Alcohol* 2002. <sup>7</sup> Saunders J et al. *Addiction* 1993. <sup>8</sup> Donovan DM et al. *Addiction* 2006. <sup>9</sup> Miller WR & Rollnick S., 2002.