

Screening and brief alcohol interventions effective in primary care populations

Clinical Question	How effective is screening and brief alcohol interventions (BAIs) in reducing excessive alcohol consumption in hazardous or harmful drinkers in general practice or emergency care settings?
Bottom Line	There was moderate-quality evidence that BAIs delivered in primary care reduced alcohol consumption in hazardous and harmful drinkers by an average of 20 g/week (the equivalent of approximately two to three UK standard drinks) compared to controls receiving usual care, screening or assessment only, or minimal alcohol advice. Whilst the effect sizes due to BAIs were relatively small, because of the high proportion of the population who attends primary care, this is likely to result in a positive public health or population level benefit. The effect was robust and was found up to one year following the BAI. BAIs appeared to be effective for both men and women but there was insufficient evidence to make any judgements about differential effectiveness in different ethnic groups. There was a suggestion of a reduced effect in younger people compared to the general population aged 18 years or more, and in emergency care compared to general practice, but this disappeared when adjusted for the overall reduction in effect size due to newer trials. Longer or more intensive intervention appeared to have little effect in significantly improving outcomes.
Caveat	Only four trials were based in countries not defined as high income by the WHO, so this evidence cannot be assumed to apply to countries where the structure or functioning of primary care differs, or where less liberal attitudes to alcohol consumption may exist. Most of the participants in trials were also Caucasian.
Context	Excessive drinking is a significant cause of mortality, morbidity and social problems in many countries. BAIs aim to reduce alcohol consumption and related harm in hazardous and harmful drinkers who are not actively seeking help for alcohol problems. Interventions usually take the form of a conversation with a primary care provider and may include feedback on the person's alcohol use, information about potential harms and benefits of reducing intake, and advice on how to reduce consumption. Discussion informs the development of a personal plan to help reduce consumption. BAIs can also include behaviour change or motivationally-focused counselling.
Cochrane Systematic Review	Kaner EFS et al. Effectiveness of brief alcohol interventions in primary care populations. Cochrane Reviews, 2018, Issue 2. Art. No.: CD004148.DOI: 10.1002/14651858.CD004148.pub4. This review contains 69 studies involving 33,642 participants.

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Cochrane systematic review link: <http://cochranelibrary-wiley.com/doi/10.1002/14651858.CD004148.pub4/full>