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▶ The effectiveness of brief intervention among injured patients with alcohol dependence: who benefits from brief interventions?

Field C.A., Caetano R. Request reprint

Drug and Alcohol Dependence: 2010, 111, p. 13-20.

At a US emergency department, a brief conversation about the pros and cons of their risky drinking and offers of support for any efforts to reduce harm curbed drinking among alcohol-dependent patients; non-dependent patients tended to do better with assessment and usual care only.

Original abstract *Background* Research investigating the differential effectiveness of brief motivational interventions (BMIs) among alcohol-dependent and non-dependent patients in the medical setting is limited. Clinical guidelines suggest that BMI is most appropriate for patients with less severe alcohol problems. As a result, most studies evaluating the effectiveness of BMI have excluded patients with an indication of alcohol dependence.

Methods A randomised controlled trial of brief intervention in the trauma care setting comparing BMI to treatment as usual plus assessment (TAU+) was conducted. Alcohol dependence status was determined for 1336 patients using DSM-IV diagnostic criteria. The differential effectiveness of BMI among alcohol-dependent and non-dependent patients was determined with regard to volume per week, maximum amount consumed, per cent days abstinent, and alcohol problems at six- and 12-month follow-ups. In addition, the effects of BMI on dependence status at six and 12 months were determined.

Results There was a consistent interaction between BMI and alcohol dependence status which indicated significantly higher reductions in volume per week at six- and 12-month follow-ups and in maximum amount at six months, a significant increase in per cent days abstinent at 12 months and a decrease in alcohol problems at 12 months among patients with alcohol dependence receiving BMI. In addition, patients with alcohol dependence at baseline who received BMI were 0.59 times less likely to meet criteria for alcohol dependence at six months.

Conclusions These findings suggest that BMI is more beneficial among patients with alcohol dependence who screen positive for an alcohol-related injury than those whose drinking is risky but who are not dependent.

For other reports on this trial see these Findings entries: Ethnic differences in drinking outcomes following a brief alcohol intervention in the trauma care setting; The role of ethnic matching between patient and provider on the effectiveness of brief alcohol interventions with Hispanics.

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