

# COURAGE TO CARE

A Health Campaign of Uniformed Services University, [www.usuhs.edu](http://www.usuhs.edu), and the Center for the Study of Traumatic Stress, Bethesda, Maryland, [www.CSTSonline.org](http://www.CSTSonline.org)

## ADDRESSING ALCOHOL MISUSE THROUGH BRIEF SCREENING AND COUNSELING

Problem drinking is a persistent health issue in the military. The DoD spends more than \$600 million annually in medical care and lost work time due to alcohol abuse. Another \$132 million a year is spent to care for babies with fetal alcohol syndrome, demonstrating the impact of problem drinking on military families and children. In our current climate of multiple deployments, family separations, single parenting and reintegration challenges, it is reasonable to screen for problem drinking in the military community.

The *American Journal of Preventive Medicine* reports that addressing alcohol use in primary care settings may help reduce drinking patterns in at least one of six problem drinkers. Screening for problem drinking, combined with a doctor's advice, reduced problem drinking by 17.4 percent over a period of six months to two years. Physicians and healthcare professionals can make a difference. Brief alcohol screening and counseling may rank among the

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top five most cost-effective preventive services doctors can offer.

Patients may engage in risky drinking (levels associated with risk for social, legal, economic and health problems) or harmful drinking (having already experienced adverse consequences due to drinking). The entire spectrum, from risky drinking to alcohol use disorders, is referred

to as alcohol misuse (U.S. Preventive Services Task Force, 2004). Patients with the most harmful drinking habits meet diagnostic criteria for alcohol dependence (American Psychiatric Association 1994). This *Courage to Care* fact sheet addresses the need for brief alcohol screening and alcohol counseling in primary care settings as a preventive approach to foster the health of our military community. The companion, Patient Fact Sheet can be downloaded and distributed to your patients, and lists DoD approved resources for additional information and help with alcohol problems.

### Why Screen?

- **At risk drinking is common**
  - 3 in 10 drinkers are at risk for physical, psychological or social problems
  - 1 in 4 meet criteria for abuse or dependence
- **Only 10% of patients with an alcohol problem are referred for treatment**
- **Brief interventions by physicians can make a real difference in promoting healthy behavior changes**
  - Changes may occur soon after the first session
  - The amount of time spent on the interview is not a major determinant of change (brief interventions work well)

- The style of the physician's intervention is a major determinant of success

### Brief Screen

- **Do you drink?**
  - 35% of patients seen in primary care settings do not drink
  - 45% are low risk drinkers
  - 20% are moderate to high risk drinkers
  - 5% are alcohol dependent
- **How many drinks do you have during the week? How many drinks do you usually have in a day?**

*Continued on reverse side*

- Men younger than 65—2 drinks/day or 14 drinks/week
- Women and men age 65 or older—1 drink/day or 7 drinks/week
- ❑ At risk drinking
  - Men younger than 65: > 14/week or > 4/occasion
  - Women > 7-11/week or >3/occasion
  - Men or women age 65 or older: >7/week or >1/occasion

*If you have concerns about your health and associated alcohol risk level please talk with your healthcare provider.*

■ **Simple advice on alcohol health risks and when not to drink**

- ❑ Pregnant or trying to become pregnant
- ❑ Taking prescription or over-the-counter medications that may cause harmful reactions when mixed with alcohol
- ❑ Under the age of 21
- ❑ Recovering from alcoholism or are unable to control the amount you drink
- ❑ Suffering from a medical condition that may be worsened by alcohol

**You Can Make A Difference**

Studies have found that most patients with alcohol misuse were not counseled about their drinking. Embracing a broader, preventive focus that includes brief screening and counseling of every patient can help identify those who need help. This small and timely intervention can guide toward change and reduce the impact of problem drinking on individuals and families.

**Alcohol Counseling**

Alcohol counseling involves 1) educating patients about safe and at risk drinking levels, and 2) providing ‘simple advice’ about the risks on drinking for their health history or medical condition.

■ **Definitions of safe and at risk drinking (NIAAA)**

- ❑ Safe drinking levels



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