Treatment for alcohol dependence in primary care compared to specialist care: a randomized controlled trial

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Prevalence estimates

Dependence and social problems
50,000

- Dependence without social problems
250,000

- Misuse
300,000

- Hazardous consumption
450,000

No alcohol problems
6.5 million Swedes > 15 years

(Andréasson et al., 2011
Berglund et al. 2010,
Takker et al. 2004)
Treatment gap
Barriers to seeking treatment

1. Stigma/shame

Ref:
Wallhed Finn et al., 2014 Sub use and misuse;
Andréasson et al., 2013 Alcohol & Alcoholism;
Schomerus et al., 2011 Alcohol & Alcoholism
Reducing stigma

- One way to reduce the stigma is to also offer treatment in primary care
Primary care

Screening and brief interventions in primary care (PC)
(Fleming et al 1997; Kaner et al 2007)

Few studies of alcohol dependence treatment in PC
(Berger et al., 2013; O´Malley et al., 2013; Oslin et al., 2013; Karhuvaara et al., 2007; Kiritze-Topot et al., 2004; Drummond et al., 1990)
The "15 method"
AUDIT>15; 15 minutes

1: Screening Brief intervention

2: Assessment with feedback
  "Drinkers' Check up"

3: 
  a) Pharmacological treatment
  b) Psychological treatment
     "Guided self change"
# Time line

<table>
<thead>
<tr>
<th>MO. 1</th>
<th>MO. 2</th>
<th>MO. 3</th>
<th>MO. 4</th>
<th>MO. 5</th>
<th>MO. 6</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHECK UP AND SELF HELP</strong></td>
<td></td>
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<tr>
<td>Session 1, wk 0</td>
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<tr>
<td><strong>TREATMENT</strong></td>
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<tr>
<td>Session 1, wk 0</td>
<td>Session 2, wk 2</td>
<td>Session 3, wk 6</td>
<td>Session 4, wk 12</td>
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<td>Session 5, wk 24</td>
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</tbody>
</table>

| WEEKS BETWEEN SESSIONS | 2 | 4 | 6 | 12 |
The study

- Aim: to study the effects of the 15-method in primary care compared to treatment as usual in a specialist addiction unit

- Method: RCT, non-inferiority

- Hypothesis: the 15-method carried out in primary care, is equally effective as treatment as usual in a specialized addiction unit.

- Participants: 288 adults fulfilling criteria for alcohol dependence
Study population

- 288 adults with alcohol dependence
- Recruited via advertisement or question at primary care

Exclusion criteria:
- need of continuous support from the social services
- previous severe withdrawal symptoms
- misuse or dependence of narcotics or prescription drugs
- severe somatic or psychiatric condition
- not fluent in Swedish
TREATMENT OF ALCOHOL DEPENDENCE IN PRIMARY CARE
**Outcome measures**

Primary:
- change of weekly alcohol consumption measured in grams of alcohol, assessed with TLFB30

Secondary:
- days with heavy drinking per week (TLFB30)
- hazardous and harmful drinking (AUDIT)
- degree of alcohol dependence (ICD-10 criteria & SADD)
- consequences of drinking (SIP)
- symptoms of anxiety and depression (HADS)
- health related quality of life (EQ 5D-5L)
- biomarkers (CDT, AST, ALT & GGT)
- satisfaction with treatment (CSQ)
- 6 months follow up
Randomized

Allocation

Primary Care
Allocated to intervention (n=144)
- Received allocated intervention (n=133)

Lost to follow-up (n=34)

Analysed (n=109)

Specialist care
Allocated to intervention (n=144)
- Received allocated intervention (n=138)

Follow-Up
6 months (n=232)
81%

Analysis
6 months (n=228)
79%

Lost to follow-up (n=22)

Analysed (n=119)
## Participants

<table>
<thead>
<tr>
<th>Variable</th>
<th>SC (n=144)</th>
<th>PC (n=144)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female % (n)</td>
<td>47 (67)</td>
<td>43 (62)</td>
</tr>
<tr>
<td>Age mean (SD) range</td>
<td>54 (12)</td>
<td>56 (11)</td>
</tr>
<tr>
<td>Age range</td>
<td>25-79</td>
<td>23-77</td>
</tr>
<tr>
<td>Education % (n)</td>
<td>44 (63)</td>
<td>45 (66)</td>
</tr>
<tr>
<td>12 years or less</td>
<td>56 (81)</td>
<td>54 (78)</td>
</tr>
<tr>
<td>&gt; 12 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source of income employment % (n)</td>
<td>73 (104)</td>
<td>74 (105)</td>
</tr>
<tr>
<td>employment</td>
<td>22 (31)</td>
<td>22 (31)</td>
</tr>
<tr>
<td>pension</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civil status % (n)</td>
<td>64 (92)</td>
<td>58 (83)</td>
</tr>
<tr>
<td>married/co-habiting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Variable</td>
<td>SC (n=144)</td>
<td>PC (n=144)</td>
</tr>
<tr>
<td>----------------------------------------------------</td>
<td>------------</td>
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<tr>
<td>Previous depression (lifetime) % (n)</td>
<td>7 (10)</td>
<td>13 (19)</td>
</tr>
<tr>
<td>Problematic alcohol use (years) mean (SD) range</td>
<td>11.5 (10.7)</td>
<td>11.4 (10.5)</td>
</tr>
<tr>
<td></td>
<td>0.1 - 50</td>
<td>1 - 55</td>
</tr>
<tr>
<td>Treatment naive % (n)</td>
<td>80 (113)</td>
<td>75 (104)</td>
</tr>
</tbody>
</table>
## Type of treatment

<table>
<thead>
<tr>
<th>Type of treatment</th>
<th>SC (n=138)</th>
<th>PC (n=133)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feedback only</td>
<td>% (n)</td>
<td>4% (6)</td>
</tr>
<tr>
<td>Pharmacological treatment (only)</td>
<td>% (n)</td>
<td>18% (25)</td>
</tr>
<tr>
<td>Psychological treatment (only)</td>
<td>% (n)</td>
<td>33% (45)</td>
</tr>
<tr>
<td>Pharmacological and psychological treatment</td>
<td>% (n)</td>
<td>45% (62)</td>
</tr>
<tr>
<td>Number of visits</td>
<td>mean (SD)</td>
<td>4.9 (2.7)</td>
</tr>
<tr>
<td></td>
<td>range</td>
<td>1-14</td>
</tr>
</tbody>
</table>

Participants with >0 visits
Results

Weekly consumption of alcohol in grams at baseline and 6 months follow up

![Box plot showing weekly consumption of alcohol in grams at baseline and 6 months follow up for SU and PC.](image-url)
Which means...

- Patients in primary care drank 29.8 grams more per week (95% CI -10.2 - 69.7; p-value 0.15) compared to patients treated in specialist setting.
### More results

<table>
<thead>
<tr>
<th>Variable</th>
<th>SU Baseline n=144</th>
<th>SU 6 months n=119</th>
<th>PC Baseline n=144</th>
<th>PC 6 months n=109</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly consumption of alcohol (gram)</td>
<td>mean (SD)</td>
<td>343.3 (324.8)</td>
<td>181.9 (142.8)</td>
<td>367.4 (215.8)</td>
</tr>
<tr>
<td>Heavy drinking (days)</td>
<td>mean (SD)</td>
<td>11.9 (8.0)</td>
<td>6.8 (7.8)</td>
<td>13.1 (8.0)</td>
</tr>
<tr>
<td>ICD-10</td>
<td>mean (SD)</td>
<td>4.3 (1.0)</td>
<td>2.2 (1.7)</td>
<td>4.2 (1.9)</td>
</tr>
<tr>
<td>AUDIT</td>
<td>mean (SD)</td>
<td>23.2 (4.9)</td>
<td>13.5 (6.5)</td>
<td>22.4 (5.9)</td>
</tr>
<tr>
<td>SIP</td>
<td>mean (SD)</td>
<td>16.0 (6.5)</td>
<td>7.8 (5.7)</td>
<td>14.9 (7.0)</td>
</tr>
<tr>
<td>CDT</td>
<td>mean (SD)</td>
<td>2.3 (2.0)</td>
<td>1.9 (1.7)</td>
<td>2.5 (2.1)</td>
</tr>
</tbody>
</table>
From 31 to 19
Severity of dependence matters

- Moderate dependence
  3-4 ICD-10 criteria
  17.0 grams
  (95% CI -21.1 - 55.0)
  p-value 0.38

- Severe dependence
  5-6 ICD-10 criteria
  57.0 grams
  (95% CI -23.7 - 137.8)
  p-value 0.17
Conclusions

- Alcohol dependence can be successfully treated by general practitioners in primary care.

- This would enable a greater number of those in need to access effective treatment.
Thank you!

Sven Andréasson
Professor Social Medicine
MD
Main supervisor

Anders Hammarberg
PhD, Co supervisor

Victoria Andersson
Project coordinator
Nurse

Sven Wåhlin
MD