Suffolk Alcohol Treatment Service

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Service Manager
Alcohol

Word Association
Alcohol in 2013

- 25% of adults in England drink at hazardous levels. (150,000 in East and West Suffolk)
- 3.8% of the population are drinking at harmful levels (22,800 in East and West Suffolk)
- For men, the highest levels of dependence were identified in those between the ages of 25 and 34 (16.8%),
- The number that go into hospital for alcohol-related reasons rose by 52% between 1996 and 2006.
Question 1

What does the abbreviation a.b.v. Mean?
Question 2

What is the formula for calculating units?
A 125ml glass of wine (13% abv) is the same as one 50ml measure of sherry (17.5% abv)

True / False
A pint of lager (9% abv) contains more units than a 568ml can of the same lager

True / False
175ml glass of wine (10% abv) will have the same unit value as a 175ml glass of wine (14% abv)

True / False
Drinking 2 pints of 5% larger a day does not exceed the lower risk level of units for men

True / False
Drinking two 175ml glasses of 13% wine a day does not exceed the lower risk level of units for women

True / False
‘abv’ is the abbreviation for alcohol by volume
The formula for calculating units is:

\[(\text{Volume in ml}/1000) \times \%\ \text{abv}\]

This formula can be used on any alcoholic beverage.

One unit of alcohol is equivalent to 10ml or 8g of pure alcohol.
False

Wine \((125/1000) \times 13 = 1.625 \text{ units}\)

Sherry \((50/1000) \times 17.5 = 0.875\)
Answer 4

False

1 pint = 568mls

\[(\frac{568}{1000}) \times 9\% = 5.1\text{units}\]
Answer 5

- False

- \((175/1000) \times 10 = 1.75\)

- \((175/1000) \times 14 = 2.45\)
Answer 6

- False

- 2 Pints of 5% larger is 6 units

- Adult men should not regularly exceed 3-4 units per day.
False

Two 175ml glasses of wine 13% contain 4.6 units

Adult women should not regularly exceed 2-3 units per day
When does ‘Alcohol Use’ become ‘Alcohol Misuse’?
Recommended Drinking Limits

Men:
- No more than 3-4 units per day
- At least two days with no alcohol per week

Women:
- No more than 2-3 units per day
- At least two days with no alcohol per week.
Alcohol Misuse

- What are the **Social** Effects of Alcohol Misuse?

- What are the **Health** Effects of Alcohol Misuse?
Family Problems:
- Tension, quarrelling, violence
- Destabilised relationships
- Social isolation
- Children’s behavioural issues and underperformance
- Divorce

Social Effects of Alcohol Misuse

Work Problems:
- Performance deteriorates
- Conflicts
- Accidents
- Worsening attendance record
- Repeated dismissals
- Long term unemployment
- Debts

Crime:
- Petty theft
- Driving offences
- Fraud
- Sexual offences
- Violent crimes
Health

**Mental Health**
- High levels of anxiety
- Depressive Illness
- Aggressive and Irrational behaviour
- Hallucinations
- Korsakoffs

**Liver Disease**
- Alcohol is the most common cause of liver damage in the UK
- Fatty liver
- Alcoholic Hepatitis
  - (Inflammation of liver)
- Cirrhosis

**Sexual Problems**
- Reduced fertility
- Impaired sexual performance
- Impotence in men
- Unwanted pregnancies
- Miscarriages
- Menstrual Disturbances
- Sexually Transmitted Diseases

**Impaired Mobility**
- Osteoporosis
- Gout
- Muscle and nerve damage

**Cancer**
- Approximately 3% of all cancers can be attributed to alcohol, in particular mouth and throat cancers

**Effects on the brain**
- Memory Loss
- Poor concentration
- Blurred Vision
- Insomnia
- Loss of inhibitions
- Seizures / Blackouts
- Peripheral Neuropathy

**Heart Disease**
- High blood pressure, which increase the risk of stroke and heart disease.
- Weakness of the heart muscle
- Impaired blood clotting
- Anaemia

**Digestive Problems**
- Inflammation on stomach
- Vomiting
- Diarrhoea
- Ulcers
- Vitamins deficiency
- Malnutrition
- Pancreatitis

**General**
- Dehydration
- Hypoglycemia
- Muscle degeneration
- Obesity
- Reduced resistance to infection
- Increased risk of pneumonia and Frequent colds
Consequences of Alcohol

- Possible Harm
- Probably Harm
- Dependency
Possible harm

- Being drunk more often
- Taking day off for hangover
- Accidents, rows or injuries due to drink
- Getting in trouble due to drink
- Doing something you wouldn’t do normally and regretting it
- Drinking more than you planned
Probable harm

- Obsessive thinking
- Gulping first drink
- Being first to finish
- Needing, not choosing a drink
- Spending more than you can afford

- Secret drinking
- Hiding drink evidence
- People telling you they are worried
Dependence ICD 10

- Sense of compulsion
- Impaired capacity to control use and amount
- Withdrawal states (nausea, shakes etc)

- Tolerance
- Preoccupation with alcohol
- Use despite harm
Definitions ICD 10

Hazardous Drinkers
“an occasional, repeated or persistent pattern of use. . . . . which carries with it a high risk of causing future damage to the medical or mental health of the user but which has not yet resulted in significant medical or psychological ill effects!

Harmful Drinkers
“A pattern of use which is already causing damage to health (physical and or mental)

Dependent drinkers
Psychological dependence - MAY include physical withdrawals
How often do you have a drink containing Alcohol?

- 0 Never
- 1 Monthly or Less
- 2 2-4 times a month
- 3 1-2 times a week
- 4 4 or more times a week

10 Questions – score out of 40

- 8 or more Indicates a strong likelihood of hazardous or harmful alcohol consumption.
- 20 or more Likely to be drinking at dependent levels.

www.drinkaware.co.uk/selfassessment
1) How often do you have a drink containing alcohol?
   - Never
   - Monthly or less
   - 2-4 times per month
   - 2-3 times per week
   - 4+ times per week

2) How many drinks containing alcohol do you have on a typical day when you are drinking?
   - 1 or 2
   - 3 or 4
   - 5 or 6
   - 7 to 9
   - 10 or more

3) How often do you have six or more drinks on one occasion?
   - Never
   - Less than monthly
   - Monthly
   - Weekly
   - Daily or almost daily

4) How often during the last year have you found that you were not able to stop drinking once you had started?
   - Never
   - Less than monthly
   - Monthly
   - Weekly
   - Daily or almost daily

5) How often during the last year have you failed to do what was normally expected of you because of drinking?
   - Never
   - Less than monthly
   - Monthly
   - Weekly
   - Daily or almost daily

6) How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?
   - Never
   - Less than monthly
   - Monthly
   - Weekly
   - Daily or almost daily

7) How often during the last year have you had a feeling of guilt or remorse after drinking?
   - Never
   - Less than monthly
   - Monthly
   - Weekly
   - Daily or almost daily

8) How often during the last year have you been unable to remember what happened the night before because of your drinking.
   - Never
   - Less than monthly
   - Monthly
   - Weekly
   - Daily or almost daily

9) Have you or someone else been injured because of your drinking?
   - No
   - Yes, but not in the last year
   - Yes, during the last year

10) Has a relative, friend, doctor or other health care worker been concerned about your drinking or suggested you cut down?
    - No
    - Yes, but not in the last year
    - Yes, during the last year

**TOTAL AUDIT SCORE:**
<table>
<thead>
<tr>
<th>Pattern of drinking</th>
<th>Features</th>
<th>AUDIT score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low risk</td>
<td></td>
<td>0-7</td>
</tr>
<tr>
<td>Hazardous</td>
<td>Pattern of use that gives increased risk to health, but absence of current disease or disorder</td>
<td>8-15</td>
</tr>
<tr>
<td>Harmful</td>
<td>Pattern of use which is causing damage to the patient in terms of their physical or mental health</td>
<td>16-19</td>
</tr>
<tr>
<td>Dependent</td>
<td>Inability to control drinking despite harmful effects</td>
<td>20 and over</td>
</tr>
</tbody>
</table>

Scores 8-19 are appropriate for brief interventions
Audit Exercise

Practice using the Audit Tool in pairs.

Feedback
Change

Behaviour Change
Cycle of change

1. Pre-Contemplation
2. Contemplation
3. Preparation
4. Action
5. Maintenance
6. Relapse

Lapse

Prochaska and Diclemente 1982
What is Brief Advice?

Brief advice is a short intervention delivered opportunistically. It can be used to raise awareness of, and assess willingness to engage in further discussion about, healthy lifestyle issues such as harmful drinking patterns and the associated effects.

It is less in-depth and more informal than a brief intervention and usually involves giving information about behaviour change and simple advice, such as how to reduce alcohol consumption to sensible levels.
What is Brief Advice?

- Understanding units
- Understanding risk levels
- Knowing where they sit on the risk scale
- Benefits of cutting down
- Tips for cutting down
Benefits of Brief Advice

- Reduction from higher-risk to lower-risk drinking in 250,000 men and 67,500 women each year

- Higher-risk and increasing-risk drinkers who receive brief advice are twice as likely to moderate their drinking 6 to 12 months after an intervention when compared to drinkers receiving no intervention

- Brief advice can reduce weekly drinking by between 13% and 34%

- For every eight people who receive simple alcohol advice, one will reduce their drinking to within lower-risk levels

- This compares favourably with smoking, where only 1 in 20 will act on the advice given
Brief Interventions

- **F**eedback – personalised assessment/evaluation of the problem
- **R**esponsibility – emphasising drinking is by choice
- **A**dvice – (clear and practical) on changing drinking behaviour
- **M**enu – variety of alternative goals/strategies
- **E**mpathy – warm, reflective role/attitude of supporter
- **S**elf-efficacy – instilling optimism and confidence that goals can be achieved
Principles of Brief Advice

- Empathetic
- Avoid labelling
- Understand there are preconceptions: both healthcare professionals and customers
- Supportive
- Non-threatening / non-confrontational
- Body language and speech tone
Opening Phrases...

- “We are providing a new service...”
- “Looking at what medication you are on you may wish to consider the effects of alcohol...”
- Draw attention to a leaflet or poster – “Have you seen that we are offering...”
- “We are randomly asking our customers about their alcohol drinking and...”
- “Your (husband, partner, daughter, boyfriend, friend) might want to pop in and see us...”
Brief Intervention Tools
There are times when you will be at risk even after one or two units. For example, with strenuous exercise, operating heavy machinery, driving or if you are on certain medication.

If you are pregnant or trying to conceive, it is recommended that you avoid drinking alcohol. But if you do drink, it should be no more than 1-2 units once or twice a week and avoid getting drunk.

Your screening score suggests you are drinking at a rate that increases your risk of harm and you might be at risk of problems in the future.

What do you think?
Making your plan

- When bored or stressed have a workout instead of drinking
- Avoid going to the pub after work
- Plan activities and tasks at those times you would usually drink
- When you do drink, set yourself a limit and stick to it
- Have your first drink after starting to eat
- Quench your thirst with non-alcohol drinks before and in-between alcoholic drinks
- Avoid drinking in rounds or in large groups
- Switch to low alcohol beer/lager
- Avoid or limit the time spent with “heavy” drinking friends

The benefits of cutting down

Psychological/Social/Financial

- Improved mood
- Improved relationships
- Reduced risks of drink driving
- Save money

Physical

- Sleep better
- More energy
- Lose weight
- No hangovers
- Reduced risk of injury
- Improved memory
- Better physical shape
- Reduced risk of high blood pressure
- Reduced risk of cancer
- Reduced risks of liver disease
- Reduced risks of brain damage

What targets should you aim for?

**Men**
Should not regularly drink more than 3–4 units of alcohol a day.

**Women**
Should not regularly drink more than 2–3 units a day

‘Regularly’ means drinking every day or most days of the week.
You should also take a break for 48 hours after a heavy session to let your body recover.

What is your personal target?

This brief advice is based on the "How Much Is Too Much?" Simple Structured Advice Intervention Tool, developed by Newcastle University and the Drink Less materials originally developed at the University of Sydney as part of a W.H.O. collaborative study.
# Drink Diaries

## Drink Diary

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Drink</th>
<th>Units</th>
<th>Cost</th>
<th>Where</th>
<th>Comments (feelings)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MON</td>
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<tr>
<td>TUE</td>
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<td>FRI</td>
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<td>SAT</td>
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<tr>
<td>SUN</td>
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</tbody>
</table>

- An easy way of obtaining a picture of drinking patterns
- Offers self reflection
In England 2008, 71% of men and 56% of women had drunk an alcoholic drink on at least one day in the week prior to interview.
11% of men and 6% of women reported drinking on every day in the previous week.
*Statistics on alcohol, England 2010 NHS Information Centre.*

**Government Recommendations**
No more than 2-3 units per day or 14 units per week for women
No more than 3-4 units per day or 21 units per week for men.
And at least 2 alcohol free days a week.

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**Understanding Alcohol**

**What is a unit of alcohol?**
8g or 10mls of pure alcohol
ABV x ml / 1000 = 1 unit
Eg. 1 can of special brew 9% x 500ml / 1000 = 4.5 units

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**My daily units**

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**How much is too much?**

**Hazardous Drinking**
Applies to anyone drinking over recommended government guidelines.

**Harmful Drinking**
A pattern of use which is already causing damage to physical or mental health.

**Dependant Drinking**
Anyone who has a moderate or severe dependency on alcohol, they will usually have experienced alcohol related problems.

*World Health Organisation Definitions*

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**Impact on your life**
*The 4 L's*
Liver (other health issues)
Lifestyle
Lover
Law

**Treatment**
All treatment is tailored to individual need, this could include:

- Assessment
- Brief Interventions
- Education
- Psychosocial Input
- Group Work
- Counselling
- Home Detox
- Referral to Rehab
- After Care

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**Client:**
**Worker:**

How useful was this map and discussion?
Not useful...1-2-3-4-5-6-7-8-9-10...Very useful
Comments:
**Mental Health**
- High levels of anxiety
- Depressive Illness
- Aggressive and Irrational behaviour
- Hallucinations
- Korsakoffs

**Liver Disease**
- Alcohol is the most common cause of liver damage in the UK
- Fatty liver
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- Cirrhosis

**Sexual Problems**
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**Digestive Problems**
- Inflammation on stomach
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**Impaired Mobility**
- Osteoporosis
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**Cancer**
- Approximately 3% of all cancers can be attributed to alcohol, in particular mouth and throat cancers

**Effects on the brain**
- Memory Loss
- Poor concentration
- Blurred Vision
- Insomnia
- Loss of inhibitions
- Seizures / Blackouts
- Peripheral Neuropathy

**What alcohol does to your body**

**What effects do I have?**

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**Client:**

How useful was this map and discussion?
Not useful...1-2-3-4-5-6-7-8-9-10...Very useful

**Worker:**

Comments:

**Date:**
Harm Prevention

Alcohol
Reduce strength
Reduce units
Alcohol free days
Don't mix drinks
Avoid Cider

Driving
Drink driving
Next day driving
Legal

Work
Does alcohol effect my ability to carry out my duties?

Social
Unsociable behaviour
Not being able to identify harm
Vulnerable
Unsafe sex

Family
Need to maintain relationships
Partner
Children
Extended family

Health
Looking after myself
Sleep
Exercise
Diet:-
Vitamin deficiency

Client: 
Worker:
How useful was this map and discussion?
Not useful...1-2-3-4-5-6-7-8-9-10...Very useful
Comments:

Date:
Our Area
SATS – Two Teams
Bury St Edmunds & Ipswich
Assessment

Ipswich
- Monday 2-4pm
- Thursday 10-12noon
- At Mariner House

Bury St Edmunds
- Tuesday Mornings 10-12noon
- At Blomfield House
- Appointments are offered locally but for rapid access attend Bury.
SATS – What we offer

- Open Access Assessment
- Self Help information
- Brief Intervention
- Structured 1:1 sessions
- Support for Community Alcohol Detox
- Alcohol Reduction Groups
- Recovery Course
- Referral to the Alcohol Day Programme (Phoenix/ Norcas)
- Referral to T4 Residential Rehab
- Aftercare
Sessions – Making Changes

1. Introduction to Units and Diary keeping. Where are you now?
2. Motivation, Cycle of change, Goal setting and Harm minimisation.
3. Strengths, Exploring self, Psychosocial. Physical/Mental health
4. Triggers and cravings, Four L’s, Coping strategies, Medication. Introduction to Mindfulness/meditation
5. Evaluation ‘Where are you now’, Mindfulness/meditation.
6. Physical wellbeing, HALT, Social Boundaries, Support community Recovery,
7. What next, How to maintain reduction, evaluating strengths, consolidating progress. Mindfulness/meditation
Recovery Course Sessions

1. Triggers and Coping Strategies/
2. Dealing with cravings and High Risk Situations
3. Handling Stress and Improving Self-care
4. Dealing with Difficult Emotions
5. Saying No and Handling Criticism
6. Putting it all together, problem solving and goal setting
Intervention Tools

How much is too much?: http://sips.iop.kcl.ac.uk/documents/gnr/sipsBLC.pdf

Brief advice : http://sips.iop.kcl.ac.uk/documents/gnr/sipsBA.pdf

Don’t Let drink sneak up on you ‘leaflet’- Change for Life

Useful Websites:

www.drinkaware.co.uk
www.alcohollearningcentre.org.uk
www.smhp.nhs.uk/alcohol
www.nhs.uk/change4life/Pages/change-for-life.
www.livewellsuffolk.org.uk
www.matthewproject.org/under18-suffolk/

Role play video of brief advice
http://www.alcohollearningcentre.org.uk/Topics/Latest/Resource/?cid=5059
Useful websites

Google

- Alcohol learning centre – online training
- Alcohol Concern
- DrinkAware.co.uk
- NHS/alcohol
- Alcohol and families.org.uk
Suffolk Alcohol Treatment Service

Questions???