



Tacoma General and Allenmore Hospitals Substance Use Outcomes

4.60.TGH-AH.2007.1 Preliminary Report: TGH-AH



Use of Alcohol and Other Drugs Declined Among Tacoma General and Allenmore Emergency Department Patients who Received Brief Interventions for Substance Use Disorders through WASBIRT

Six-Month Follow-up Survey for WASBIRT Participants from Tacoma and Allenmore Hospitals: April 12, 2004 – March 31, 2006

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Tacoma General and Allenmore Hospitals are two of nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen mostly emergency department patients for alcohol and drug use. Based on a patient's level of risk for substance use disorders, the counselor provides brief interventions to those at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 413 of 2,431 Tacoma General and Allenmore patients with moderate or high risk for substance use disorders were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 333 of the sample—an 81 percent response rate. Analyses were based on 310 to 314 study participants with complete information on alcohol use, binge drinking, or drug use. (See Technical Notes.)

Alcohol and other drug use declined for patients who got at least a brief intervention.

Tacoma General and Allenmore patients who received brief interventions as well as those who received additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol use increased.
- Abstinence from drug use increased among patients who received only a brief intervention.
- Binge drinking declined.

Among substance users who received at least a brief intervention, use reported in the six-month follow-up interview declined significantly compared to use reported at screening.

- 79% of 232 patients who drank alcohol reduced the number of days of drinking in the past 30 days, in part because a third of them (33%) stopped drinking.
- Average days of drinking in the past 30 days declined from 8.3 to 5.1 days ($p < .05$).
- 83% of 121 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days, with the average declining from 7.1 to 3.1 days ($p < .05$).
- 82% of 130 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 42% of them stopped using drugs.
- Average days of drug use in the past 30 days declined from 12.7 to 7.7 days ($p < .05$).

We thank the following for their contribution to the WASBIRT Project:
Pierce County Alcohol and Drug Coordinator
MultiCare Health Systems
Tacoma General Hospital
Allenmore Hospital
Metropolitan Development Council

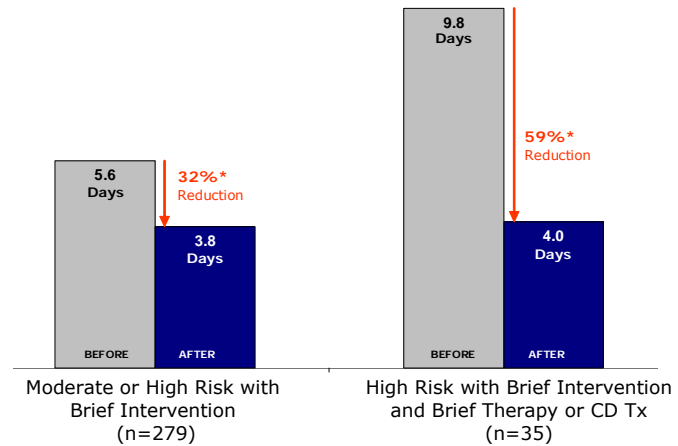
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days declined significantly

The average number of days of drinking in the last 30 days declined significantly:

- From 5.6 to 3.8 days (32% decrease) for 279 patients with a moderate or high risk for substance use disorders who received only a brief intervention.
- From 9.8 to 4.0 days (59% decrease) for 35 patients with a high risk for substance use disorders who received a brief intervention plus brief therapy or CD treatment.

*p < .05

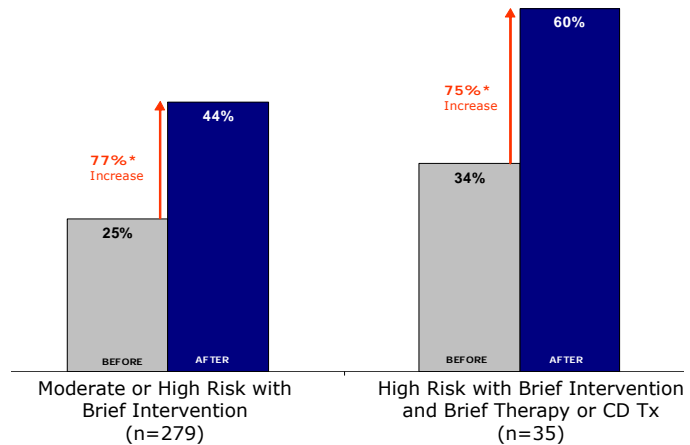


Abstinence from alcohol in the past 30 days increased significantly

Abstinence from alcohol increased significantly:

- From 25% to 44% for 279 moderate or high risk patients who got a brief intervention (+77% increase).
- From 34% to 60% for 35 high risk patients who received a brief intervention plus brief therapy or CD treatment (+75% increase).

*p < .05

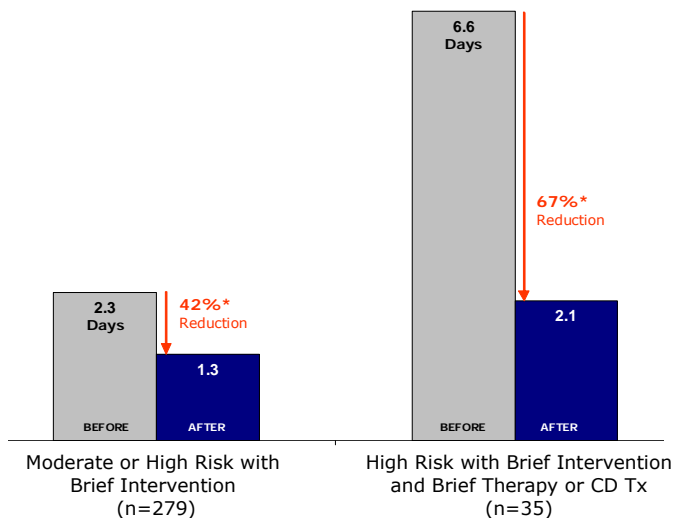


Binge drinking in the past 30 days declined significantly in high risk groups

Binge drinking was counted as having five or more drinks in one sitting in the last 30 days. Average days of binge drinking dropped significantly:

- From 2.3 to 1.3 days (42% decrease) for 279 moderate or high risk patients who received a brief intervention.
- From 6.6 to 2.1 days (67% decrease) for 35 high risk patients who received a brief intervention plus brief therapy or CD treatment.

*p < .05



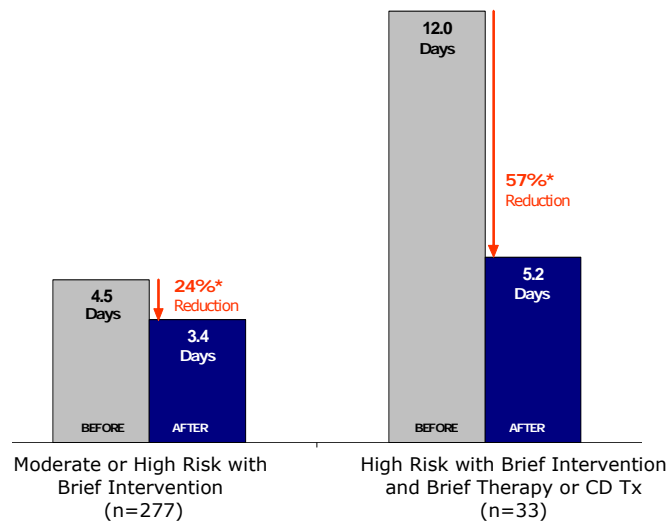
Drug Use Outcomes

Average days of drug use in the past 30 days declined significantly

The average number of days of drug use in the past 30 days:

- Dropped from 4.5 to 3.4 days (24% decrease) for 277 moderate or high risk patients who received a brief intervention.
- Dropped from 12.0 to 5.2 days (57% decrease) for 33 high risk patients who received a brief intervention plus brief therapy or CD treatment.

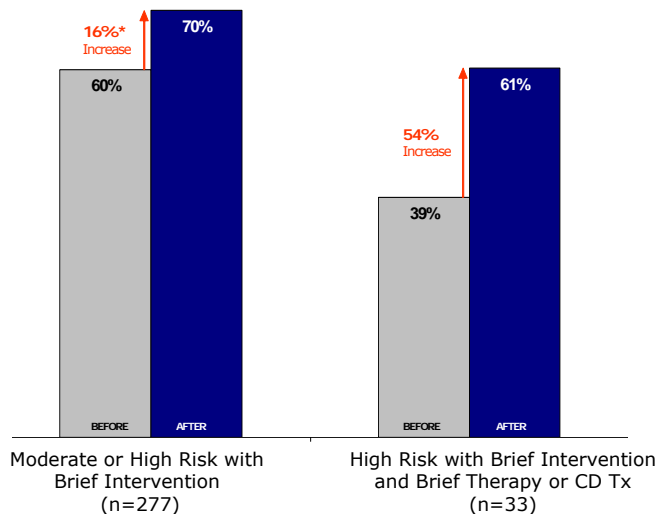
*p < .05



Abstinence from drug use in the past 30 days increased significantly

- Abstinence from drug use increased significantly from 60% to 70% for 277 moderate or high risk patients who received a brief intervention (+16% increase).
- The apparent change in abstinence from 39% to 61% for 33 high risk patients who received a brief intervention plus brief therapy or CD treatment did not reach statistical significance, perhaps due to the small size of this group. Future analyses will monitor drug use patterns as the number of patients in this category increases.

*p < .05



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 2,431 Tacoma General and Allenmore patients with moderate or high risks for substance use disorders, a sample of 413 patients was selected for the follow-up survey. Interviews were completed with 333 of them—an 81 percent response rate (excluding three people who died before the interview was due).

Analyses were based on 314 participants with complete data on alcohol use and binge drinking questions and 310 with complete information on drug use questions. Analyses exclude 16 cases (5%) because of inconsistencies between the person's screening scores and the level of intervention received or because the person did not give permission for the use of administrative records that were used to determine who entered chemical dependency treatment.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing of advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- Used any alcohol?
- Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)
- Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)

Classification of Risk and Intervention Groups

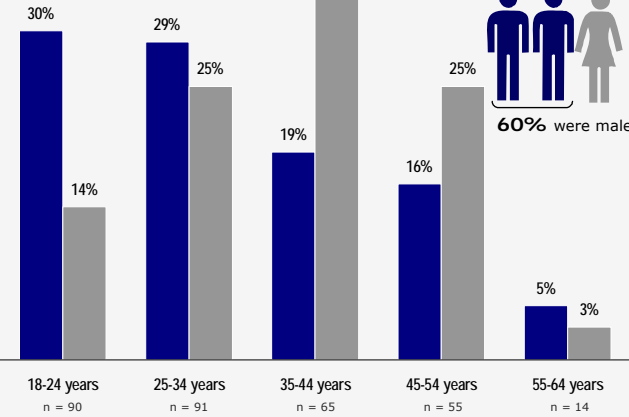
Participants were divided into risk levels based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Risk level (low, moderate, or high) equaled the highest level of risk from AUDIT or DAST score, bingeing, or indicators of chemical dependency on the AUDIT. Two groups were formed: (1) moderate or high risk and received only a brief intervention and (2) high risk and received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records, Division of Alcohol and Substance Abuse's treatment data (TARGET), or the Medicaid Management Information System for the 326 participants who gave permission for the use of administrative records.

| | Low Risk with Screen Only (not in follow-up) | Moderate or High Risk with Brief Intervention | High Risk with Brief Intervention Plus Brief Therapy or CD Treatment |
|------------------------------|--|---|--|
| Average scores | | | |
| AUDIT | 1 | 8 | 18 |
| DAST | 0 | 2 | 6 |
| Screening scores | | | |
| AUDIT - Female | Less than 7 | 7 – 40 | 16 – 40 |
| AUDIT - Male | Less than 8 | 8 – 40 | 16 – 40 |
| DAST | 0 | 1 – 10 | 3 – 10 |
| Additional criteria | | | |
| Binge drinking | | X | |
| Alcohol dependence condition | | X | X |

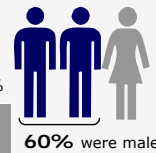
Demographics

Age Distribution

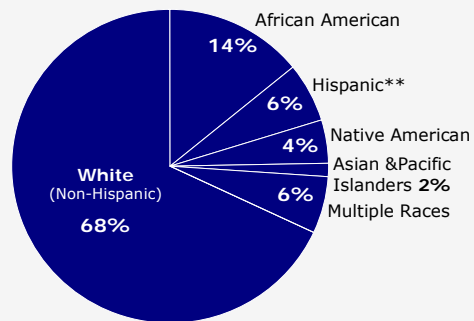
TOTAL = 317*



Gender



Race | Ethnicity*



* Race/ethnicity is shown for the total sample since the counts in some intervention categories are too small to distribute by race.
 ** Persons of Hispanic Origin are counted only under the "Hispanic" category.

Legend:
 ■ Moderate or High Risk and Brief Intervention Only, Average Age = 33
 ■ High Risk and BI Plus Brief Therapy or CD Treatment, Average Age = 37
 * Includes 2 people aged 65 or above

Additional copies of this paper may be obtained from: <http://www1.dshs.wa.gov/RDA/> or <http://www1.dshs.wa.gov/dasa/> or through the Washington State Alcohol|Drug Clearinghouse by calling 1-800-662-9111 or 206-725-9696 (within Seattle or outside Washington State), by e-mailing clearinghouse@adhl.org, or by writing to 6535 Fifth Place South, Seattle, Washington 98108-0243.

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