A theory-based implementation program of alcohol screening and brief interventions (ASBI) in general practices in The Netherlands.

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON27337

Source
NTR

Brief title
ASK-Study

Health condition

implementation, alcohol, screening, brief interventions, general practice

Sponsors and support

Primary sponsor: Maastricht University
Source(s) of monetary or material Support: Mondriaan mental health care institute and CAPHRI School for Public Health and Primary Care

Intervention

Outcome measures

Primary outcome

Screening rate: The screening rate will be expressed as the proportion: patients screened divided by the total amount of patient consultations involving patients with early signs with respect to risky alcohol use.

Rate of brief intervention delivery: The brief intervention rate is expressed as the proportion patients who receive a brief advice or referral to another provider for brief intervention divided by the total amount of screen positives.
Patient alcohol consumption is expressed as the following proportion: patients who score ¡Ý 5 for men or ¡Ý 4 for women on the AUDIT-C who reduced their levels of alcohol consumption to low-risk level divided by the total amount of patients who score ¡Ý 5 for men or ¡Ý 4 for women on the AUDIT-C.

Secondary outcome

Knowledge: about the Dutch ¡®NHG Standaard¡¯ guideline recommendations, early signs, risk groups, ASBI methodology and referral possibilities.

Cognitive and interpersonal skills: knowing how to address the topic in a neutral manner.

Attitude: beliefs about consequences of ASBI (e.g. effectiveness, antagonizing the patient, difficulty in working with problem drinkers) .

Self-efficacy: beliefs about personal ASBI capabilities (e.g. confidence in performing ASBI).

Stigma.

Environmental context & resources: are the facilities/resources available to facilitate ASBI?

Study description

Study objective

We hypothesize that:

(1) GPs who receive the ASBI implementation
program will increase screening and brief intervention delivery rates relative to GPs in the control condition;

(2) GPs involved in the ASBI implementation program will have a higher proportion of patients with problematic alcohol use who reduce their alcohol consumption to low-risk levels compared with GPs in the control group.

Study design

Screening rate, rate of brief intervention delivery and secondary outcomes will be measured at the following timepoints: week 1, 2, 6, 7. Patient alcohol consumption will be measured at the following timepoints: week 8 (baseline measurement), week 13 (one-month post-measurement) & week 21 (three-month follow-up).

Intervention

The ASBI implementation program consists of
three parts, targeting previously found barriers: lack of knowledge, lack of skills, negative attitude and a lack of a supportive environment. GPs in the implementation program condition, will be referred to a 2-hour accredited E-learning module ¡°Learning how to discuss alcohol use with patients¡± to address lack of knowledge and/or skill concerning alcohol assessment. The 2-hour accredited E-learning module is an acknowledged
product consistent with the Dutch ¡®NHG Standaard¡¯ guideline recommendations for problematic alcohol use. An additional short feedback module will be given to general practitioners to address motivational factors such as attitude and beliefs about discussing alcohol use with patients. The third component of the ASBI implementation program consists of supportive environmental materials such as screening questionnaires, a referral scheme, reminder cards as well as contact information of local addiction prevention centres for support for GPs.

GPs in the control condition will not receive the ASBI implementation program and will continue to deliver care as usual.

Contacts

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Eligibility criteria

Inclusion criteria

In order to be eligible to participate in this study, general practitioners must meet the following criteria:

- Working in general practice.

- Working in co-operation with a practice nurse mental health.

- Situated in the Netherlands.

In order to be eligible to participate in this study, patients must meet the following criteria:

- Being over 18 years of age.

- Registered with the practice.

- Having an AUDIT-C score of ¡Ý 4, as assessed and registered by the GP during a consultation.

Exclusion criteria

GP exclusion criteria

- x

A potential patient who meets any of the following criteria will be excluded from participation in this study:

- Patients with a DSM diagnosis of alcohol abuse or dependence, or those for whom the primary care team consider it would be clinically inappropriate to participate in this study (e.g., complex psychiatric or physical comorbidity).

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-02-2016
Enrollment:	58
Type:	Anticipated

Ethics review

Positive opinion

Date:	07-12-2015
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL5422

Register	ID
NTR-old	NTR5539
Other	METC azM/UM Maastricht : (METC 15-4-161)

Study results