

New guidelines say doctors should screen all adults for 'risky' drinking

May 13 2013, by Amy Norton, Healthday Reporter



One simple question is all it takes, expert task force finds.

(HealthDay)—Primary care doctors should screen all adults for drinking problems, and offer them counseling if needed, new guidelines from the U.S. Preventive Services Task Force suggest.

Based on years of research, there is enough evidence that a quick screen at the doctor's office can spot "risky" drinking, according to the [task force](#), an independent panel of [medical experts](#) that makes recommendations on screening and other preventive health services.

The new guidelines, published online May 14 in the *Annals of Internal Medicine*, are the panel's "final" recommendations on screening for problem drinking. The last recommendations came out in 2004.

Since then, more research has been conducted, explained task force member Dr. Michael LeFevre, a professor of family and community medicine at the University of Missouri School of Medicine in Columbia.

In particular, LeFevre said, there's evidence that doctors can catch risky drinking by asking just one question: How many times in the past year have you had five or more drinks in a day (if you're a man), or four or more drinks (if you're a woman or older than 65)?

If a patient acknowledges drinking that much, the doctor can ask more questions to see how deep the problem goes.

An alcohol abuse expert not involved in the recommendations said the advice to screen all adults is "right on."

"It's very well-supported by the literature," said Dr. Marc Schuckit, a professor of psychiatry at the University of California, San Diego, and editor of the *Journal of Studies on Alcohol and Drugs*.

The updated recommendations also clarify what doctors should be looking for: the full range of what the task force calls alcohol "misuse."

That ranges from "risky" drinking, where people down more alcohol than they should, to the more severe problems of alcohol abuse and alcohol dependence. Dependence involves a physical addiction to alcohol, while [alcohol abuse](#) means that drinking causes problems in people's personal and work lives.

LeFevre said there's good evidence that brief counseling from a primary care doctor—even a single session of five to 15 minutes—can be enough to get people to cut down on their drinking.

"Brief interventions are effective for people who are at the risky-

drinking stage," LeFevre said. However, people with more serious drinking problems will likely need more help, or referral to a specialist program, he added.

[Alcohol misuse](#) is a common problem, Schuckit said. An estimated 21 percent of U.S. adults admit to risky drinking, while about 4 percent are thought to have full-blown [alcohol dependence](#), according to the task force. Problem drinking is also blamed for more than 85,000 deaths each year in the United States, which makes it the third-leading cause of preventable deaths behind smoking and obesity.

"In my opinion, all clinicians should be screening for [alcohol](#) problems and offering brief interventions," Schuckit said.

He and LeFevre said any primary care doctor can learn brief counseling techniques. These might include helping patients find healthy ways to reduce stress or set goals for curbing their drinking.

When it comes to teenagers, though, the task force said there is not enough evidence to recommend routine screening.

"We don't know enough," LeFevre said. "We can't assume that what we've found to work for adults also works for kids." There's no agreement, for example, on whether there's a "safe" level of drinking for a teenager, he said. So would doctors have to intervene with all teens who admitted to any amount of drinking?

"We are not saying that adolescent drinking is an issue doctors should ignore. It is a problem," LeFevre said. "This is really a call to the research community that we need more evidence [on screening teenagers]."

The American Academy of Pediatrics disagrees, however. It

recommends that [doctors](#) ask all adolescent patients about their drinking habits.

More information: Learn more about [problem drinking](#) from the U.S. National Institute on Alcohol Abuse and Alcoholism.

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