

Primary care residents unlikely to detect hazardous alcohol use

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When it comes to detecting alcohol misuse, newly minted primary care physicians ask the wrong questions at the wrong times, according to a study led by researchers at Wake Forest Baptist Medical Center.

The study, published in the current online issue of the *Journal of General Internal Medicine*, surveyed 210 resident physicians in three family medicine and three internal medicine programs at medical centers in the Southeast. The researchers found that these doctors rarely perform [alcohol screening](#) and brief intervention - asking patients questions to detect [hazardous drinking](#) and discussing alcohol misuse, its consequences and ways to address it with at-risk drinkers.

"Binge drinking among American adults is four times more common than chronic [alcohol dependence](#) but physicians often fail to detect [binge drinking](#), despite its prevalence," said Kristy Barnes Le, M.D., assistant professor of [internal medicine](#) at Wake Forest Baptist and lead author of the study. "We know that alcohol screening and brief intervention detects and reduces unhealthy alcohol use, and the U.S. Preventive Services Task Force has recommended that it be used in all [primary care](#) settings. Unfortunately, that's not being done often enough. "

Binge drinking can result in accidents leading to acute-care visits. However, only 17 percent of the physicians in the study asked patients about hazardous drinking at this type of visit. Most of the residents (60 percent) said they "usually" or "always" screen patients for [alcohol misuse](#) at initial clinic visits, but over 80 percent reported using

questions incapable of picking up binge drinking.

Not surprisingly, only one in five of the residents surveyed expressed confidence in their ability to help at-risk drinkers, and just one in six thought they had been successful in doing so in the past. And more than half of the study's participants cited lack of adequate training as a significant obstacle in dealing with hazardous drinking.

"Our study reveals a clear need to improve alcohol-related training and screening processes in primary care residencies," Le said. "Medical school curricula have traditionally focused on alcohol dependence, not binge drinking, so it's up to residency programs to provide the training and clinical systems that can effectively address the widespread problem of hazardous drinking among American adults."

Provided by Wake Forest University Baptist Medical Center

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