

Almost three-quarters of weekend emergency care caseload linked to booze

December 21 2015

Almost three quarters of the weekend emergency care caseload is linked to excess alcohol intake, finds an activity analysis of one large inner city hospital in England, and published online in *Emergency Medicine Journal*.

Each case costs between £250 and £850 to treat, or £1 million every year, the analysis shows, indicating substantial costs for urban emergency care departments across the UK faced with similar demand, say the researchers.

They reviewed the case notes of attendees requiring treatment associated with excess [alcohol](#) at one large inner city A&E department in the north east of England, over a period of 4 separate weeks in February-March, July, October and December during 2010-11. They also tracked additional episodes of related care over the subsequent 12 months.

The team carried out breath testing of A&E attendees during the same 4 weeks in 2012-13 to find out who had been drinking.

Some 12% (636) of the 5121 A&E attendances over the four weeks of 2010-11 were linked to alcohol; in 2012-13, this figure had risen to 15% (720 out of 6526 attendances).

In 2012-13, the alcohol related attendance rate during the specified four weeks varied substantially from 4% to 60% on week days, but rose to 70% at weekends.

Attendance patterns were similar over both timeframes, with young men aged between 18 and 24, pitching up in the early hours of the morning, making up the bulk of the weekend caseload. Traumatic injuries and mental health issues were the most common reasons for seeking care.

Some 498 people tested positive for alcohol on the breath test: people who didn't live in the city were significantly more likely to test positive than local residents, suggesting that city centres attract revellers from elsewhere, while hospitals and other public services in city centres pick up the tab, say the researchers.

They calculated the costs of treating alcohol related cases, based on the tests, procedures, outpatient appointments and inpatient stays detailed in the patients' hospital records.

These ranged from an average of £250 up to £850, if admission to hospital was required. That adds up to an annual bill of £1 million, and this figure excludes ambulance service and police costs.

"This indicates a significant NHS burden if all such emergency departments in the UK are sustaining similar demands associated with alcohol related attendance," write the researchers.

"Although older people may cost more per patient, younger people as a group are more costly to the NHS because they have more alcohol related attendances," they add.

"Our results suggest that emergency departments would benefit from routinely providing staff to cover the night and early morning shifts, particularly at weekends, to cope with the high proportion of alcohol related attendances at these times," they conclude.

In a linked editorial, Dr Clifford Mann, emergency care consultant at

Taunton and Somerset NHS Foundation Trust, points out that in England alone, 1 million hospital visits every year are related to alcohol, at a cost to the NHS of £3.5 million. Hospital admissions for disease and injuries associated with alcohol rose 100% between 2003 and 2013.

"Current national and international data describing the financial burden of alcohol are dramatic, yet the response of governments has been woefully inadequate," he writes.

Alcohol is too cheap and too readily available, he says, reiterating the call made by the Royal College of Emergency Medicine and many other medical organisations for a minimum unit pricing for alcohol of £0.50.

"Currently it is perfectly feasible to purchase a volume of alcohol that represents a safe weekly maximum for less than £10. Alcohol at this price is cheaper than bottled water," he insists.

"The economic, social, and medical consequences of current alcohol strategies create a compelling argument for improved legislation and regulation of alcohol sales," he writes. Public Health England estimates that the total annual cost to society of alcohol is £21 billion, which compares with the total cost of £2 billion for running every A&E in the UK, he points out.

More information: Prevalence of alcohol related attendance at an inner city emergency department and its impact: a dual prospective and retrospective cohort study, [DOI: 10.1136/emered-2014-204581](https://doi.org/10.1136/emered-2014-204581)

Editorial: The burden of alcohol, [DOI: 10.1136/emered-2014-205295](https://doi.org/10.1136/emered-2014-205295)

Provided by British Medical Journal

Citation: Almost three-quarters of weekend emergency care caseload linked to booze (2015, December 21) retrieved 20 April 2024 from <https://medicalxpress.com/news/2015-12-three-quarters-weekend-emergency-caseload-linked.html>

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