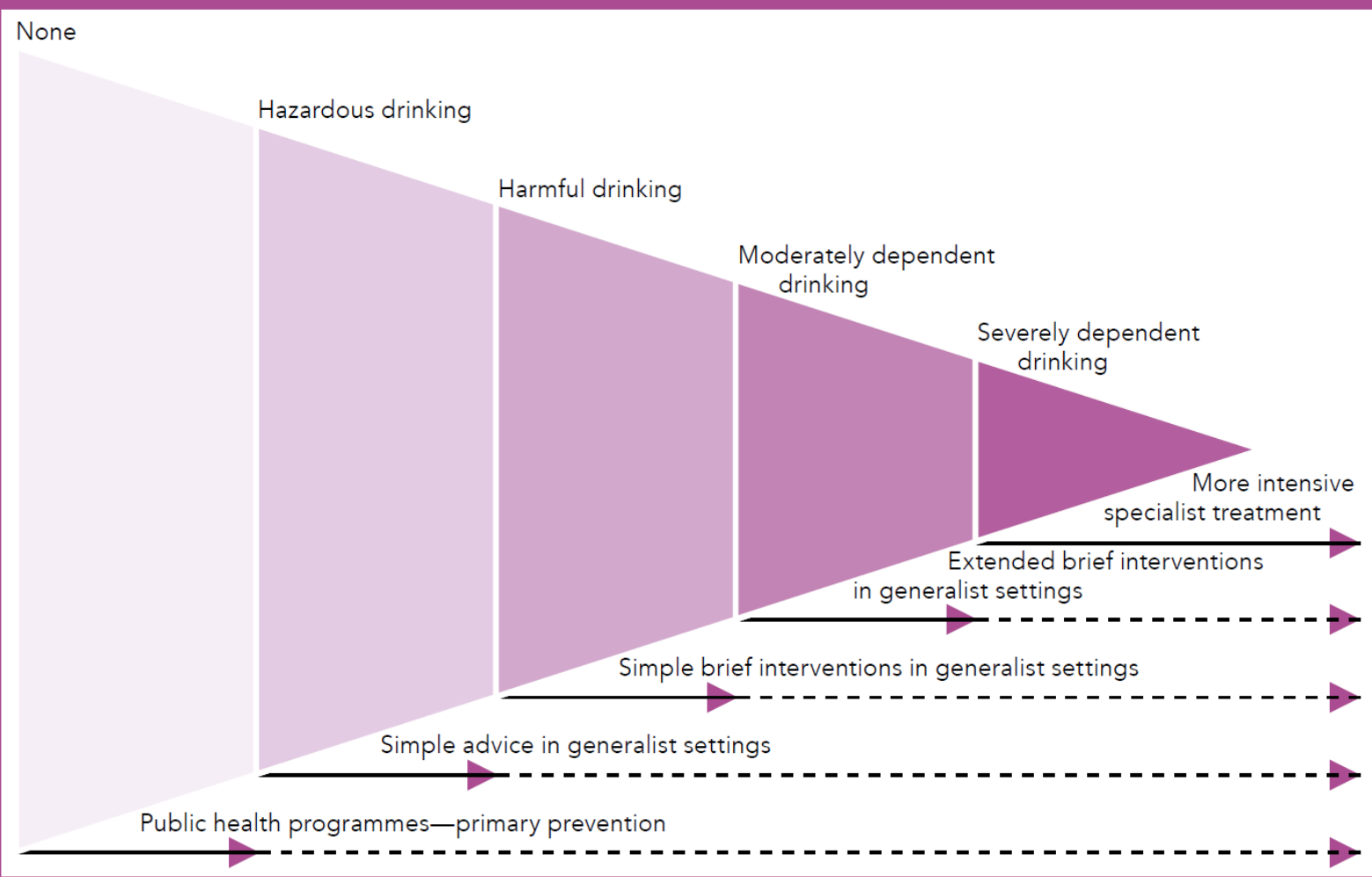


Alcohol Dependency, Red flags to look out for

Stephen Willott

GP & Clinical Lead for Alcohol
& Drug Misuse, Nottingham

Figure 1: A spectrum of responses to alcohol problems¹⁷



Importance of recognising dependence:

- Guide to severity of alcohol use and risk of complications
- To assess the risks of suddenly stopping drinking
- Whether an “assisted” alcohol withdrawal is needed

Identification of alcohol dependence

Structured questionnaires:

- AUDIT and related questionnaires
- SADQ
- Clinical assessment (ICD 10 criteria)

Examination:

- Alcohol measurement (breathalyser)
- Signs of withdrawal
- Signs of alcohol related disease

History: most useful

Red flags for alcohol problems



In Denial:

- high-functioning drinkers
- Driving/employment
- Domestic violence and safeguarding

Admitting there's a problem :

- Sudden stopping of drinking
- Mental health issues
(Depression / suicide risk / confusion)

high-functioning drinkers



- High BP / depression can be ways in
- Fibroscan may be useful
- Explore any cognitive dissonance

Driving



- 16% of all Road Deaths in Britain are Caused by Drink Driving
- England almost the only European country to have a BAC limit $>50\text{mg}/100\text{ ml}$
- Confidentiality: good practice in handling patient information (GMC 2017)

Alcohol misuse (DVLA)

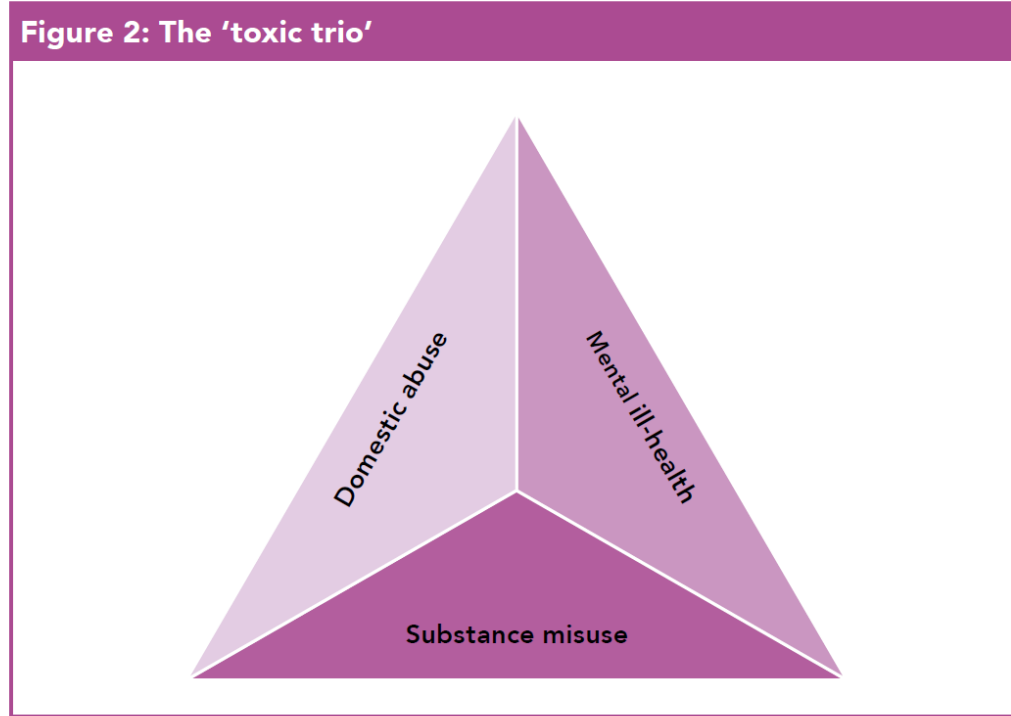
“Disturbance of behaviour, related disease or other consequences of alcohol likely to cause the patient, their family or society present or future harm and that may or may not be associated with dependence.”

	Group 1 car and motorcycle	Group 2 bus and lorry
Persistent alcohol misuse confirmed by medical enquiry and/or evidence of otherwise unexplained abnormal blood markers	<p>✗ - Must not drive and must notify the DVLA.</p> <p>Licence will be refused or revoked until after:</p> <ul style="list-style-type: none">■ a minimum of 6 months of controlled drinking or abstinence, and■ normalisation of blood parameters.	<p>✗ - Must not drive and must notify the DVLA.</p> <p>Licence will be refused or revoked until after:</p> <ul style="list-style-type: none">■ a minimum of 1 year of controlled drinking or abstinence, and■ normalisation of blood parameters.

Domestic violence and safeguarding



Figure 2: The 'toxic trio'



Intimate Partner Abuse

- In 2/3 incidents at least one of the couple was 'under the influence' of alcohol.
- peaks at times of heavy drinking
- those convicted of domestic abuse were more risky drinkers
- “victim blaming” if women drinking vs “accused excusing” if men were drinking

Sudden stopping of drinking



- When is it safe?
- When to advise to continue drinking...

Timing of alcohol withdrawals

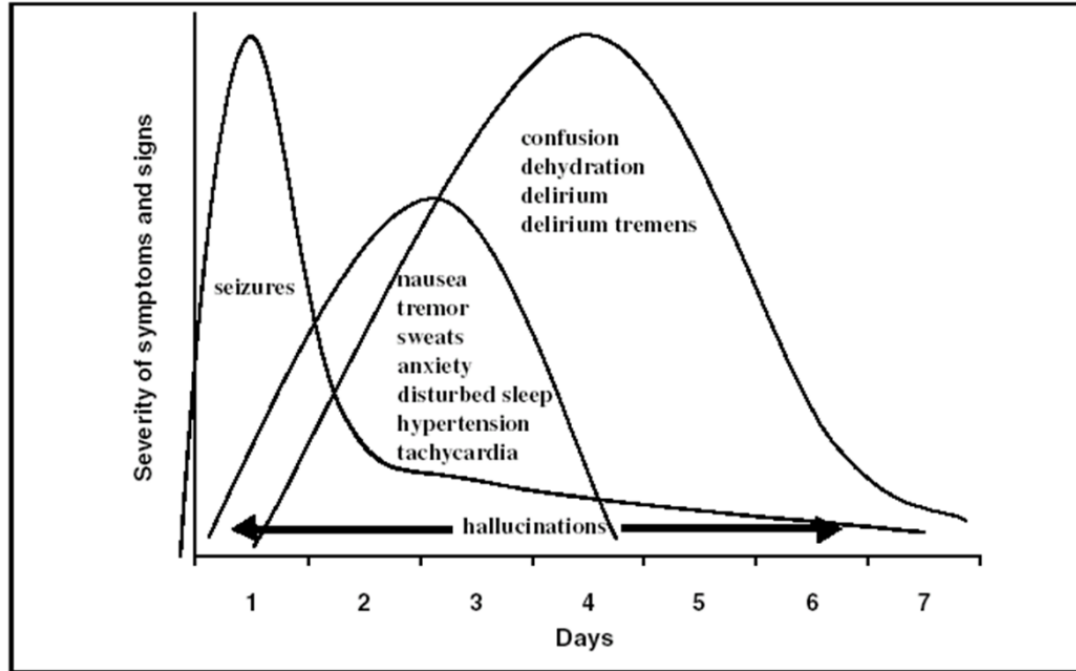


Figure 5.1: The progression of the alcohol withdrawal syndrome.

Source: Frank & Pead (1995). Reproduced with permission [129]

High risk background factors

- Older patients
- Marked withdrawal symptoms after short periods without alcohol
- Previous severe withdrawal states
- Severe chronic mental/ physical illness

Mental health issues



- Depression
- suicide risk
- confusion

Mental health

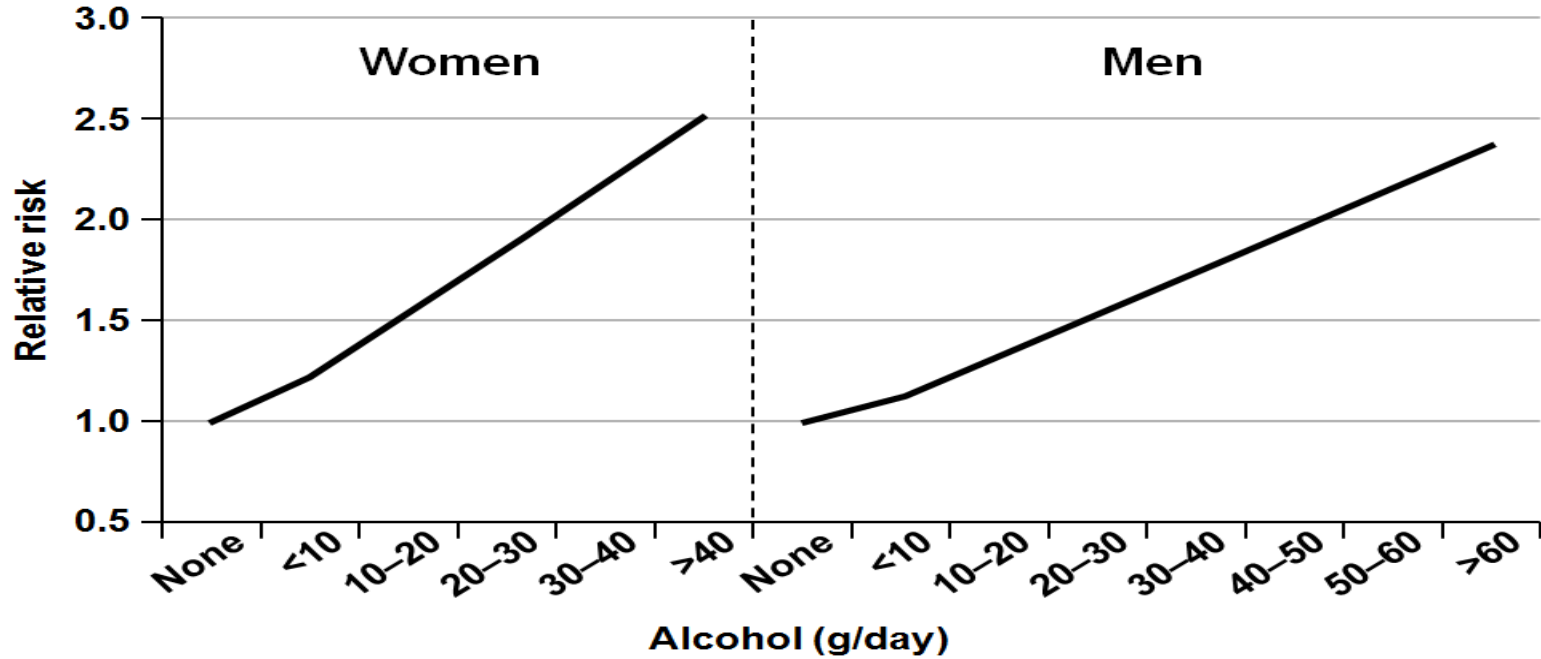
Alcohol causes mood and anxiety issues :

- Alcohol is a central depressant so direct contribution
- Excessive drinking is associated with greater life stresses so indirect effect
- Alcohol interacts with medication to treat mood and anxiety, reducing their effectiveness and increasing their side-effects

Combination of alcohol and mental health problems

- Huge correlation, esp anxiety & depression (present in up to 2/3 of dependent drinkers)
- Likely causal link between AUD (Alcohol use disorders) and depression
- presence of either AUD or depression doubles the risk of the second disorder

Suicide risk with Alcohol



Alcohol and mental health problems

20 yr **National Confidential Inquiry into Suicide and Homicide** by people with mental illness (NCISH 2016) :

- Deaths by suicide: 47% had history of alcohol misuse, only 7% were under alcohol services
- Homicide offenders: 74% had history of alcohol misuse

How to manage Depression in Drinkers

- Avoid antidepressants in dependent drinkers
- Those who stop or cut down get >60% benefit in their mood / anxiety
- So only prescribe if symptoms persist over 6 weeks after reduction
- Can still refer to IAPT if F<35u / M<50u per week

Older drinkers



*'It would be too optimistic to suppose that the relative under-representation of subjects in the older age groups ... is just explained by older people having got the treatment they required ... it seems likely that this finding is in part **a hint of the diminished life expectancy of the alcoholic.**'*
(Prof Griffith Edwards, 1967)

“I take my tablets with the whisky”

- Qualitative study of alcohol and medication use in mid to later life
- consider older patients' alcohol consumption prior to prescribing
- monitor subsequent drinking
- inform of the dangers of concurrent alcohol and medication use



Diagnosis of alcohol-related dementia

(Oslin et al, 1998)

- Evidence of cognitive impairment
- Significant alcohol use
(minimum average of >52 units per week for men or >42 units for women)
 - for a period of greater than 5 years
 - within 3 years of onset of impairment

Meet Ray

- Fits criteria for ARBI
- Frequent ED attendances
- Fragile tenancy
- Hard to help

- Need to find long term solutions



Beware the confused,
alcohol free patient...

Wernicke's encephalopathy

- Acute brain disease associated with Thiamine deficiency
- Important cause of longer term brain damage.
- **Difficult to diagnose:** classical triad of confusion, ataxia and ophthalmoplegia only present in 1 in ten cases.
- Results from vitamin deficiency in chronic alcoholism from poor intake and malabsorption
- Stopping drinking precipitates it

NICE guidelines on parenteral Thiamine

Offer prophylactic parenteral thiamine followed by oral thiamine to dependent drinkers if:

- they are malnourished or at risk of malnutrition
- they have severe chronic liver disease

(NICE, 2010)

Hepatitis C & Alcohol harm

- Lots of early identification left to do to help reduce end stage liver disease
- Primary care ideally placed but good liaison with all other partners essential
- Vigilance for late presenters

Resources



Public Health
England

Protecting and improving the nation's health

**The Public Health Burden of
Alcohol and the Effectiveness
and Cost-Effectiveness of
Alcohol Control Policies**
An evidence review



Public Health
England

Protecting and improving the nation's health

Hepatitis C in England 2019

Working to eliminate hepatitis C as a
major public health threat

Other Resources

- Find drug & alcohol services near you using www.nhs.uk/service-search/
- Contact FRANK on 0300 123 6600 or talktofrank.com
- Alcoholics Anonymous 0800 9177 650
- Mobile Apps eg One You (phe)



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General

Alcohol Change UK

The national organisation campaigning for effective alcohol policy and improved services for people whose lives are affected by alcohol-related problems.

Drink and Drug News (DDN)