

SBIRT Across the Lifespan

Diane Snow, PhD, RN, PMHNP-BC, CARN,
FAANP
University of Texas at Arlington
Susie Adams, PhD, RN, PMHNP-BC, FAANP
Vanderbilt University

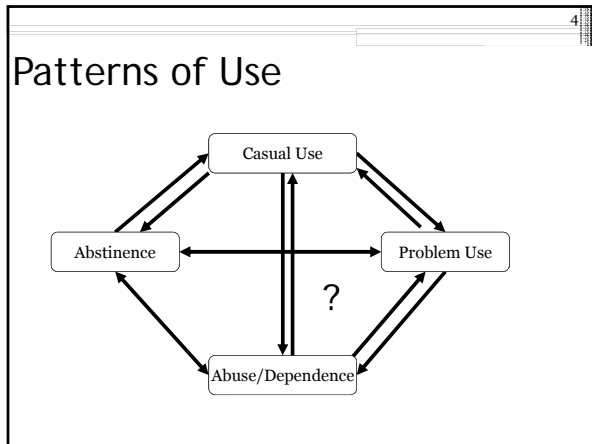
Key Healthy People 2020 Substance Abuse Objectives

- Reduce adolescent driving with someone who has been drinking
- Increase number of teens who have never used substances
- Reduce the proportion of people who binge drink alcohol
- Reduce the past year non medical use of prescription drugs

Addiction is...

a chronic, often relapsing, brain disease that causes compulsive drug seeking and use despite harmful consequences to the individual who is addicted and to those around them.

<http://www.nida.nih.gov/NIDAHome.html>



SBIRT

- **Screening** for alcohol abuse
- **Brief Interventions** for harm reduction
- **Referral to Treatment** for specialized care

SAMHSA/CSAT SBIRT Resource Site: <http://sbirt.samhsa.gov>
NIAAA Clinician Guidelines for Screening & Brief Intervention: http://pubs.niaaa.nih.gov/publications/Practitioner/Clinicians_Guide2005/clinicians_guide.htm
NIAAA Videos on how to teach SBIRT: http://www.niaaa.nih.gov/Publications/EducationTrainingMaterials/CME_CE.htm

Screening and assessment

Age specific, evidence based, easy to use tools are available

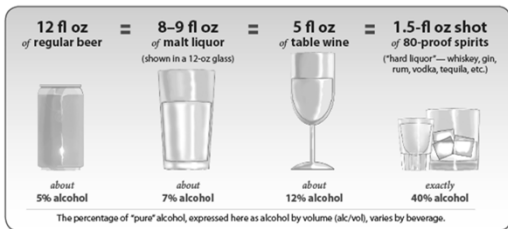
Brief interventions (SBI)

Patient centered counseling tools focused on changing behavior and assessing readiness for change.
Culbertson (2006)

Referral to Treatment

Refer to detox center, rehab program , 12 step program, IOP, PHP, RTC

What counts as a drink?



How many drinks are in common containers?

regular beer	malt liquor	table wine	80-proof spirits or "hard liquor"
12 fl oz = 1	12 fl oz = 1.5	5-fl oz glass = 1	a shot (1.5 oz) = 1
16 fl oz = 1.3	16 fl oz = 2	25 fl oz = 5	750 ml (a "fifth") = 17
40 fl oz = 3.3	40 fl oz = 4.5	(a regular 750-ml bottle)	1.75 L (a "handle") = 39

Pregnancy

Prevent Fetal Alcohol Syndrome (FAS) and harmful effects of drug use.

Screening during pregnancy

- **All pregnant women should be screened for alcohol abuse.**
- **Rec: abstain from alcohol before conception & throughout pregnancy**
- **12.9% pregnant women drink**
- **4.6% binge drink**
- **Advise all women of detrimental effect of any alcohol can have on fetus**
 - **Growth retardation**
 - **Damage to brain development**
 - **Cardiac defects**
 - **Fetal alcohol syndrome**

Fetal Alcohol Spectrum Disorders

- Most preventable cause of mental retardation
- 2 drinks during pregnancy may kill some developing brain cells (2004)
- Damage to nerve cells in arms and legs
- Screen-ask about mother's alcohol use during pregnancy
- Usually not diagnosed until school age, present with ADHD or learning disability
- Need case manager, wrap around services

NIAAA: SBIRT Resources for Pregnant Women
http://pubs.niaaa.nih.gov/publications/DrinkingPregnancy_HTML/pregnancy.htm

Here are some questions you may have about alcohol and drinking while you are pregnant.

- 1. Can I drink alcohol if I am pregnant?**
 No. Do not drink alcohol when you are pregnant. Why? Because when you drink alcohol, so does your baby. Think about it. Everything you drink, your baby also drinks.
- 2. Is any kind of alcohol safe to drink during pregnancy?**
 No. Drinking any kind of alcohol when you are pregnant can hurt your baby. Alcoholic drinks are beer, wine, wine coolers, liquor, or mixed drinks. A glass of wine, a can of beer, and a mixed drink all have about the same amount of alcohol.
- 3. What if I drank during my last pregnancy and my baby was fine?**
 Every pregnancy is different. Drinking alcohol may hurt one baby more than another. You could have one child that is born healthy, and another child that is born with problems.
- 4. Will these problems go away?**
 No. These problems will last for a child's whole life. People with severe problems may not be able to take care of themselves as adults. They may never be able to work.
- 5. What if I am pregnant and have been drinking?**
 If you drank alcohol before you knew you were pregnant, stop drinking now. You will feel better and your baby will have a good chance to be born healthy. If you want to get pregnant, do not drink alcohol. You may not know you are pregnant right away. Alcohol can hurt a baby even when you are only 1 or 2 months pregnant.
- 6. How can I stop drinking?**

Youth

Annual screening recommended for teens

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Screening

Have you ever used alcohol, cigarettes or any other drugs (including misuse of Rx)?

Has anyone ever offered these to you?

Concerns about parents' use?

**** At risk kids 10 and older ****



1 in 3 children starts drinking by the end of 8th grade ... and of them, half report having been drunk.

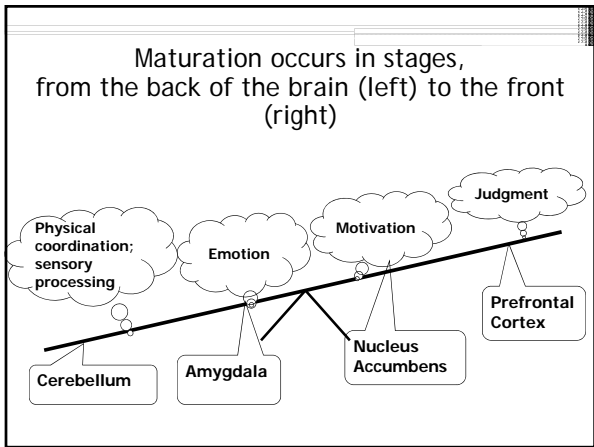
Why screen for underage drinking?

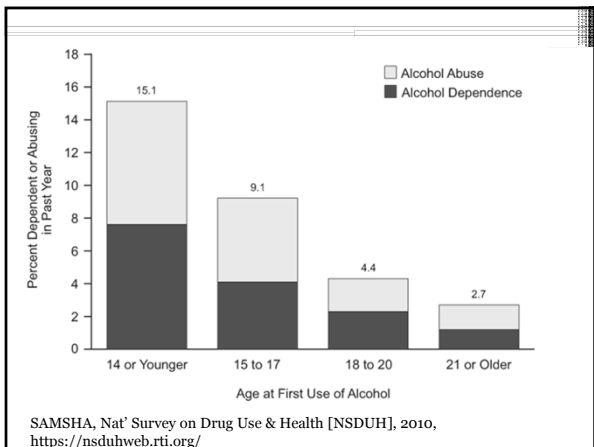
- It's common
- It's risky
- Younger brain, more at risk
- It's a marker for other unhealthy behaviors
- Risk of developing addiction
- It often goes undetected

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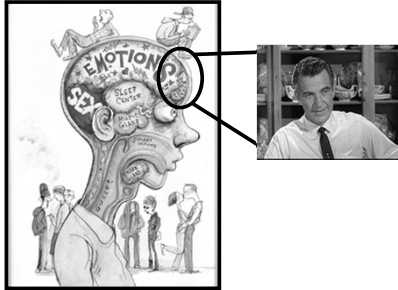
Age of first alcohol use matters:

Odds of alcoholism
↓ 14% per year
after age 14





Inside the Adolescent Brain



Source: US News & World Report,

Pedigree Assessment and addiction

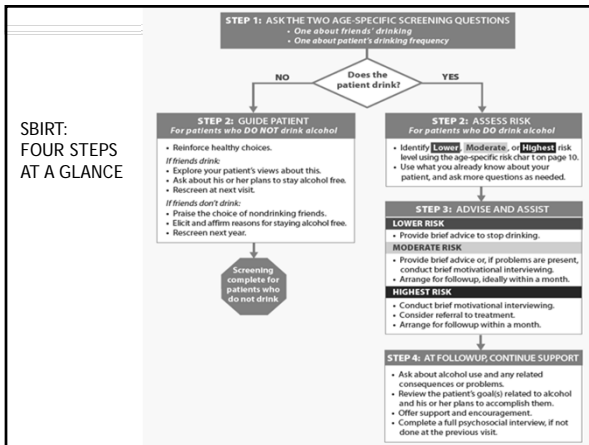
- Family History alcohol and drug abuse, gambling, eating disorders, rage/violence, sex addiction
- Family History Depression, anxiety, bipolar, ADHD in family members
- 1st and 2nd degree family members
- Look for treatment, recovery, early onset, antisocial behavior, functionality

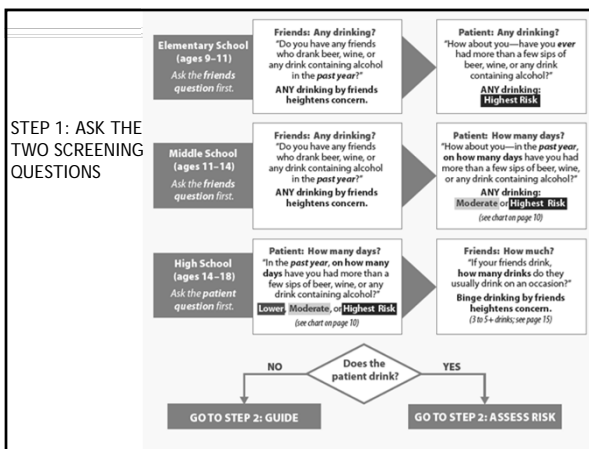
When is it appropriate to break confidentiality?

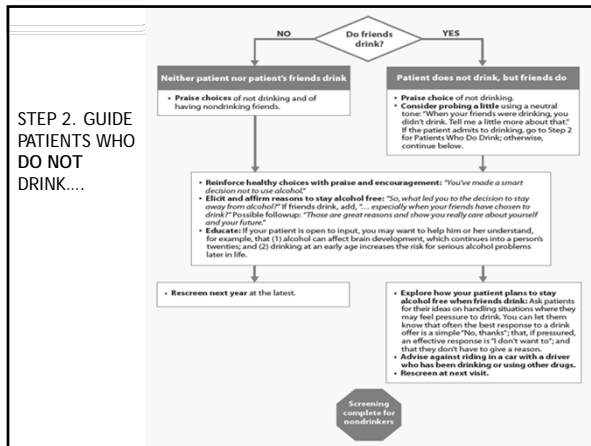
	Any Alcohol Use	Some Mild Problems	Significant Problems or Probable Dependence
Elementary School (ages 9-11)	Yes	Yes	Yes
Middle School (ages 11-14)	Maybe	Yes	Yes
High School (ages 14-18)	Maybe	Maybe	Yes

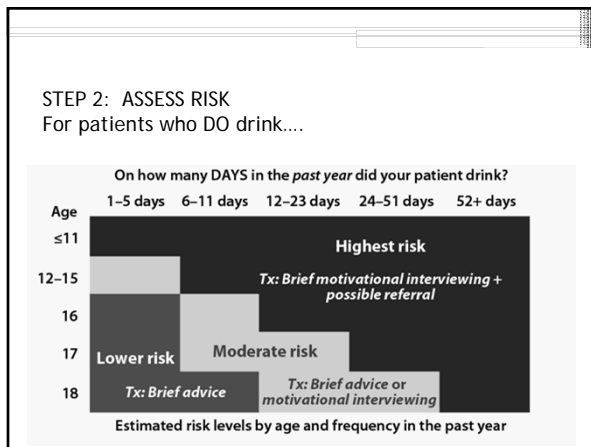
CRAFTT

Have you ever driven a CAR while using?
 (OR ever ridden with an intoxicated driver)
 Do you ever use to RELAX?
 Do you ever use ALONE?
 Do you ever FORGET things done while using?
 Do your FRIENDS/FAMILY worry about your use?
 Have you gotten into TROUBLE due to use?
 Score >1 → needs further evaluation



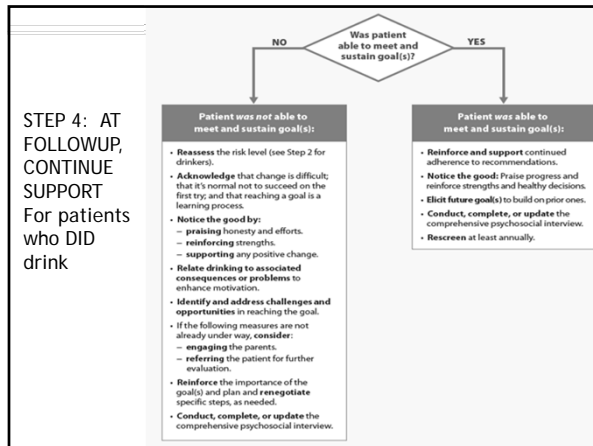






STEP 3: ADVISE & ASSIST For patients who DO drink....

Lower Risk	Moderate Risk	Highest Risk
<ul style="list-style-type: none"> Provide brief advice: "I recommend that you stop drinking, and now is the best time. Your brain is still developing, and alcohol can affect that. Alcohol can also keep you from making good decisions and make you do things you'll regret later. I would hate to see alcohol interfere with your future." Notice the good: Reinforce any strengths and healthy decisions. Explore and troubleshoot the potential influence of friends who drink or binge drink. 	<ul style="list-style-type: none"> Does the patient have alcohol-related problems? <ul style="list-style-type: none"> If no, provide brief advice: Start with the brief advice for Lower Risk patients (at left) and add your concern about the frequency of drinking. If yes, conduct brief motivational interviewing to elicit a decision and commitment to change (see page 29). Ask if parents know: See suggestions for Highest Risk patients (at right). Arrange for followup, ideally within a month. 	<ul style="list-style-type: none"> Conduct brief motivational interviewing to elicit a decision and commitment to change, whether or not you plan to refer (see page 29). Ask if parents know: If so, ask patient permission to share recommendations with them. If not, take into account the patient's age, the degree of acute risk posed, and other circumstances, and consider breaking confidentiality to engage parent(s) in follow-through. Consider referral for further evaluation or treatment based on your estimate of severity (see page 23). Arrange for followup within a month.
<p>FOR ALL PATIENTS WHO DRINK</p> <ul style="list-style-type: none"> Collaborate on a personal goal and action plan for your patient. Refer to page 31 for sample abstinence, cutting back, and contingency plans. For some patients, the goal will be accepting a referral to specialized treatment. Advise your patient not to drink and drive or ride in a car with an impaired driver. Plan a full psychosocial interview for the next visit if needed. 		
<p>If you observe signs of acute danger, such as drinking and driving, high intake levels per occasion, or use of alcohol with other drugs, take immediate steps to ensure safety (see page 21).</p>		



What age do kids start drinking?

Past-year drinking
(more than one or two sips) is reported by:

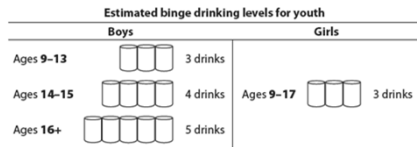
- 1 in 15** 12-year-olds
- 1 in 4** 14-year-olds
- 1 in 2** 16-year-olds
- 2 in 3** 18-year-olds

How much do kids drink?

Having five or more drinks on at least one occasion in the past 30 days is reported by about:

- Half** of 12- to 15-year-olds who drink
- Two-thirds** of 16- to 20-year-olds who drink

What's a "child-sized"
or
"teen-sized" binge?



Among youth *who drink*, what proportion will be in the "lower," "moderate," & "highest" risk categories?

Approximate distribution of young drinkers at lower, moderate, and highest risk levels



Use Pocket Guide which contains the risk estimator chart to know risk cut points.

Highest risk past-year drinking begins at:

- Age 11: 1 day
- Ages 12-15: 6 days (about every other month)
- Age 16: 12 days (about monthly)
- Age 17: 24 days (about twice monthly)
- Age 18: 52 days (about weekly)

Learn high risk cut points, first;
then the moderate risk cut points.

Moderate risk past-year drinking begins at:

Ages **12-15:** **1** day
Ages **16-17:** **6** days (about every other month)
Age **18:** **12** days (about monthly)

Teens need structured screening test

- Providers missed those with problem
- CRAAFT : good sensitivity and specificity substance related problems /disorders
- Express concern about positive screen and ask them to return
- Follow up all positive screens : age of first use, pattern of use, specific consequences
- Agreement to cut down, or refer to treatment
- Know prevention and treatment resources

Adult SBIRT

Alcohol/ drug screening

When to screen?

- **Effective if detects illness earlier than without screening**
- **NIAAA guidelines for when to screen**
 - **Part of routine examination annually**
 - **Before prescribing meds that interact with alcohol**
 - **In response to potential alcohol related problems**

CAGE/CAGE AID

- Ever felt the need to Cut down your drinking/drug use?
- Have you felt Annoyed by others criticism of your drinking/drug use
- Have you ever felt Guilty about your drinking/drug use?
- Ever felt the need to have an Eye Opener?
- Score 2 may indicate problem use
- 1 for elders over 65

CUGE

- Ever felt the need to Cut down your drinking/drug use?
- Have you ever driven Under the influence of alcohol?
- Have you ever felt Guilty about your drinking/drug use?
- Ever felt the need to have an Eye Opener?
- Score 2 may indicate problem use
- 1 for elders over 65

SCREENING SUPPORT MATERIALS – AUDIT (English)

SCREENING SUPPORT MATERIALS

PATIENT: Because alcohol use can affect your health and can interfere with certain medications and treatments, it is important that we ask some questions about your use of alcohol. Your answers will remain confidential as shown to others.

Place an X in one box that best describes your answer to each question.

Questions	0	1	2	3	4
1. How often do you have a drink (anything alcohol)?	Never	Monthly or less	2 or 3 times a month	4 or more times a week	5 or more times a week
2. How many drinks containing alcohol do you have on a typical day that you are drinking?	1 or 2	3 or 4	5 or 6	7 or 8	10 or more
3. How often do you have five or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often during the last year have you had five or more drinks on one occasion? (If you have not been able to keep drinking since you had alcohol)	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
5. How often during the last year have you woken up in the morning or get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
6. How often during the last year have you made a flat drink in the morning or get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
7. How often during the last year have you had a shaking of glass or similar while drinking? (If you have not been unable to continue because of your drinking)	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often during the last year have you been unable to continue because of your drinking?	No	Yes, but not in the last year	Yes, during the last year	Yes, during the last year	Yes, during the last year
9. How often during the last year have you been unable to continue because of your drinking?	No	Yes, but not in the last year	Yes, during the last year	Yes, during the last year	Yes, during the last year
10. How often during the last year have you been unable to continue because of your drinking or happened over one drink?	No	Yes, but not in the last year	Yes, during the last year	Yes, during the last year	Yes, during the last year
Total					

AUDIT TOOL

Self report

5 minutes

Score 0-40

± 8 for men

± 4 for women, adolescents and men over 60

NIAAA recommendations for screening Step one (if you have not done the AUDIT)

- Use CAGE, CAGE-AID, CRAAFT, RAPS
- Or, ‘do you sometimes drink beer, wine or other alcoholic drinks?
 - if yes,
- How many times in the past year have you had...
 - 5 or more drinks a day (men)
 - 4 or more drinks a day (women)
- Is screening positive? (1 or more heavy drinking days or
 - Audit score of ±8 for men, ±4 for women

If Screening Negative

- Advise about drinking limits
 - **Healthy men-no more than 2 drinks a day or more than 14 drinks/wk**
 - **Healthy women- no more than 1 drink per day or 7 drinks per week**
 - Healthy men & women over 65 -
 - No more than 1 drinks a day or 7 in a week
- Recommend lower limits or abstinence if medically indicated
 - Meds interact
 - Health problems exacerbated by alcohol
 - Pregnant -abstinence
- Be Open to talk about it!

If Screening positive..

- How many days do you have an alcoholic drink?
- On a typical drinking day, how many drinks do you have?
- Use form on p.22
- <http://pubs.niaaa.nih.gov/publications/Practitioner/CliniciansGuide2005/guide.pdf>

Step 2 Assess for AUDS -Alcohol Abuse

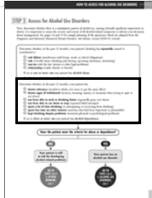
- Determine whether, in the past 12 months, your patient's drinking has **repeatedly** caused or contributed to
- **risk** of bodily harm (drinking and driving, operating machinery, swimming)
- **relationship** trouble (family or friends)
- **role failure** (interference with home, work, or school obligations)
- **run-ins** with the law (arrests or other legal problems)
- If yes to **one or more your patient has alcohol abuse**. *In either case, proceed to assess for dependence symptoms.*

HOW TO ASSESS FOR ALCOHOL USE DISORDERS- STEP 2 (continued)

STEP 2: Assess for AUDs
Determine whether, in the past 12 months, your patient has

- Shown tolerance
- Shown signs of withdrawal
- Not been able to stick to drinking limits
- Not been able to cut down or stop (repeated failed attempts)
- Spent a lot of time drinking (or anticipating/recovering from drinking)
- Spent less time on other matters (activities that had been important)
- Kept drinking despite problems

Yes to 3 or more in past year **Alcohol Dependence**



Lab values as biological markers for harmful levels of alcohol use

- ↑GGT-
 - Raised after 4 or more drinks for 4-8 wks
 - Non alcoholic liver disease false positive
- ↑AST & ALT
- ↑MCV after 4- 8 wks heavy alcohol
- Ethyl glucuronide (EtG) –show up for 80 hrs in urine after alcohol use!
- CDT: Detects 5 or more drinks a day over past 2 weeks or longer; Detect slips, monitor treatment, prevent relapse
 - Drinking causes transferrin molecule to be deficient in sugar side chains (carb deficient)
 - 2.6% or higher indicates heavy drinking (normal is 1-2%) shows up in 50-60% of heavy drinkers

Toxicology Screens-recent use

- Urine-related to half life
- Hair testing
 - 1.5 inch hair sample shows drug use in past 90 days
 - Not for drug use 5-7 days before test
- Sweat testing
 - Collect in patches worn on skin
 - For up to 2-4 weeks
 - Shows drug use during time patch is on
- Saliva testing
 - Recent ingestion
 - Nicotine –thiocyanate; cotinine
 - Salivary cotinine used for general screening

Primary Care and SBIRT

- 19 trials of brief alcohol interventions reviewed
- 1/2 trials had significant benefit
- Overall average reduction of 4 drinks per week per individual receiving the treatment vs standard treatment
- Brief interventions can ↓ alcohol consumption at 6 and 12 months follow up

Bertholet et al, 2005; Arc Int Med.

Project TrEAT
Trial for Early Alcohol Tx in Primary Care

- RCT of brief MD advice for treatment of problem drinking
- 48 month study of efficacy and benefit-cost analysis
- Adults 18-65 yrs
- Control n=382 Intervention n=392
- Intervention: 2 MD visits, 2 nurse follow-up phone calls
Review normative drinking, patient specific ETOH effects
Worksheet
- Findings: Intervention group had ↓ in 7-day ETOH use, ↓ # binge drinking episodes, ↓ ED visits, ↓ hospital days than control group.
↓ \$43,000 for every \$10,000 invested.

Fleming, Mundt, French, Manwell, Stauffacher, Barry. (2002). Brief physician advice for problem drinkers: Long-term efficacy and benefit-cost analysis. *Alcoholism: Clinical and Experimental Research*, 26(1), 36-43.

Older Adult
SBIRT

Benefits of drinking in older adult??

- 1-6 drinks a week associated with decreased risk of dementia and diabetes mellitus
- Helps cardiovascular functioning, stroke prevention and all cause mortality.

Elderly

- Increased peak alcohol concentration due to decreased lean body mass & decreased liver and kidney function
- Less alcohol=greater effect
- ↑Drug drug interactions
- Risks high-need to be screened & evaluated

Screening in the older adult

- AUDIT lower sensitivity in the older adult
- SMAST-G (10 item) –high sensitivity & specificity (consequences of drinking) past and present not separated; no quantity asked
- CARPS –more sensitive (long)
- CAGE- past and present not separated
- Single question: Did you drink alcohol in the past 3 months?

Screening in the Older Adult

- 5-10% have drinking problem
- Up to 50% with psychiatric problem are alcohol abusers
- 2-4% misuse drugs
- Often not assessed- may be higher!
- Misuse prescription drugs when multiple providers and different pharmacies.
- CAGE Modified (add “drugs”) identifies 9/ 10
- Dropping to the “AGE” increases specificity
- Hinkin et al (2001)

Older Adult in Primary Care

- Computerized Alcohol Related problems survey (CARPS) (10 minute) for older adults
- 21% harmful drinkers, 26% hazardous at baseline
- Provide older primary care patients with reports of their drinking classification
- Reduced harmful drinking by 23%
- Provider reports + education : 1 drink less per week and improved their classification

• Fink, Elliott, Tsai & Beck, 2005)

Older Adult in Primary Care

- Assess impact on overall health
- Assess meds that interact adversely with alcohol
- May not be prepared to screen or use brief interventions
- May not address needs of older adults
- Older adults can modify their own consumption.
- Shared decision making important!
- Screening adults for problem drinking is among the highest-ranked preventive services

(Fink, Elliott, Tsai & Beck, 2005)

Brief alcohol interventions with older adults

- Future goals for health, activities, relationships
- Customized feedback on screening
- Discuss types of older drinkers, compare
- Define standard drinks
- Pros and cons of drinking
- Explore coping with loss, loneliness, pain
- Consequences of drinking
- Reasons for cutting down
- Strategies for reducing or stopping drinking
- Drinking agreement, signed by both
- Solutions for risky situations
- Rehearse reaction to social isolation, boredom, family problems
- Summary

• Bifow and Barry Geriatrics

Summary

Age and developmentally appropriate screening, brief interventions and referral to treatment when needed is evidence based treatment

SBIRT Coding

Payer	Code	Description	Fee Schedule
Commercial Insurance	CPT 99408	Alcohol and/or substance abuse structured screening and brief intervention services, 15 to 30 minutes	\$33.41
	CPT 99409	Alcohol and/or substance abuse structured screening and brief intervention services, greater than 30 minutes	\$65.51
Medicare	G0396	Alcohol and/or substance abuse structured screening and brief intervention services, 15 to 30 minutes	\$29.42
	G0397	Alcohol and/or substance abuse structured screening and brief intervention services, greater than 30 minutes	\$57.69
Medicaid	H0049	Alcohol and/or drug screening	\$24.00
	H0050	Alcohol and/or drug service, brief intervention, per 15 minutes	\$48.00
