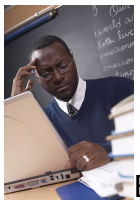 Excess alcohol consumption is a growing public health problem, causing around 5.3 percent of deaths in those aged under 60 years worldwide.

In England, about one in four adults aged 16-65 (about seven million people) drink hazardously or harmfully. Alcohol accounts for 10 percent of disability adjusted life years (DALYs) and costs to the NHS of around $4.8 billion each year.

High alcohol consumption is one of the top modifiable risk factors for premature morbidity and mortality, along with smoking and hypertension, yet much less research has been done on alcohol use disorders than on smoking or hypertension. The publication of Kaner and colleagues' linked paper, which reports the findings of the SIPS (Screening and Intervention Program for Sensible drinking) trial in primary care, is therefore welcome.

Although screening and brief intervention reduce alcohol consumption by 15-30 percent for at least 12 months, it is unclear what the "brief intervention" should comprise and how "brief" it can be and still be effective. Kaner and colleagues' large well conducted pragmatic cluster randomized controlled trial aimed to determine the effectiveness of different brief intervention strategies in reducing hazardous or harmful drinking in primary care.

The trial compared the effectiveness of three interventions, each of which built on the previous one. These consisted of a patient information leaflet control group, the addition of five minutes of structured brief advice, and the extra addition of 20 minutes of brief lifestyle counseling based on motivational interviewing techniques. The outcome was the proportion of participants who scored less than 8 on the alcohol use disorders identification test (AUDIT) at six months. This proportion increased in all three arms, with no difference between arms. Participants allocated to the most intense intervention reported slightly greater satisfaction with treatment and slightly increased readiness to change than those in the other two arms. The importance of this is unclear, given that reported readiness to change does not seem to correlate with subsequent behavior change.

Source: The BMJ Group.

For millions of individuals and family members, alcohol is a source devastating pain and loss. Alcohol is addictive and the state of addiction to alcohol is known as the disease of alcoholism. Click here to gain a greater Understanding of Alcohol and Alcoholism.