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BISTAIRS Project

Effectiveness of brief interventions
for alcohol in primary health care
settings: A rapid review of reviews

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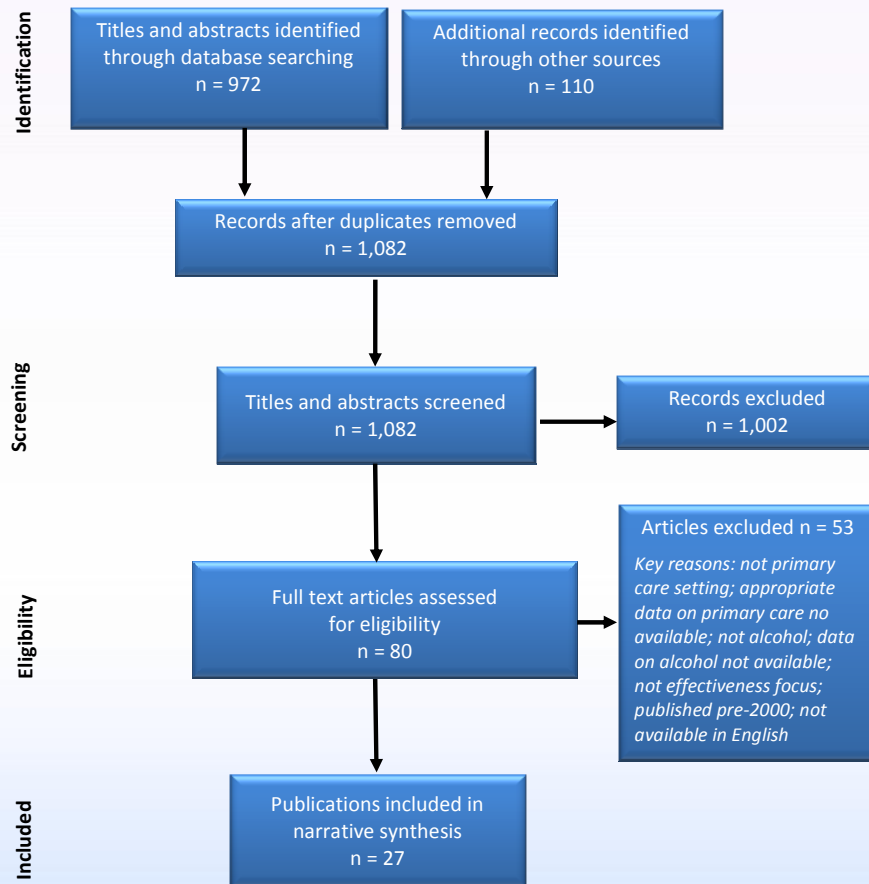
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Aim and search strategy

- Rapid narrative review of reviews (RoR) on the effectiveness of brief interventions for alcohol in primary health care (PHC).
- Inclusion criteria:
 - systematic reviews and/or meta-analyses;
 - patients with excessive alcohol consumption and / or experienced alcohol-related harm as result of their drinking behaviour;
 - primary care settings;
 - brief interventions for alcohol;
 - Published 2000+ and in English language.
- Exclusion criteria:
 - dependent users;
 - emergency settings;
 - unpublished literature, not in English language.
- Range of eligible outcome measures considered.
- Searched electronic databases, key websites, consulted experts in field.

Results



- 27 eligible papers
- Data extraction complete
- Quality assessment ongoing using R-Amstar
- First draft brief report complete

Findings (1)

What we know:

- Alcohol BI effective in addressing harmful drinking in PHC;
- Reduces weekly consumption by 38g (Kaner et al, 2009) to approx. 23-49g (Jonas et al, 2012);
- Can be delivered by a range of practitioners;
- Short, simple interventions as effective as longer, more intensive input.

But:

- Barriers to implementation.

Findings (2)

The evidence gaps:

- Low-middle income countries;
- Studies in languages other than English;
- Gender, particularly pregnant women;
- Younger and older drinkers;
- 'Control' question;
- Longer-term effectiveness of brief interventions.

Conclusions

- Further evidence of effectiveness of alcohol BI in primary health care.
- But:
 - How many more reviews do we need?
 - What are the unanswered questions?
 - What should future research focus on?
- Any questions?

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