Critiquing Existing Alcohol Screening Forms for a Unique Population
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Problem:
The purpose of this project is to examine the various forms available to screen individuals for alcohol misuse to determine if any of these forms are appropriate to use with individuals with multiple health conditions. Given the serious issue of alcohol and medication interactions, and the time restraints of physicians, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) has suggested the use of one screening question. This suggestion needs further investigation.

Evidence:
Medical practitioners have yet to distinguish a standardized method in screening for alcohol misuse (Bradley, et al., 2001). Furthermore, time constraints often prevent the inclusion of proper screening and intervention within a primary care setting (Smith, Schmidt, Allensworth-Davies, & Saitz, 2009).

Strategy:
A review of the existing forms in the literature, the CAGE questionnaire, the Alcohol Use Disorders Identification Test (AUDIT) and the Michigan Assessment Screening Test (MAST) is necessary in determining the most effective instrument in assessing drinking behavior in individuals with co-morbid health conditions.

Practice Change:
Appointing a professional, other than the primary care physician, such as a nurse or a behavioral professional, may assist in accurately identifying and appropriately addressing problem drinking.

Evaluation:
A review of the limitations of a single-question screening tool as compared to the CAGE, AUDIT and MAST questionnaires was conducted.

Results:
After a full review of the instruments that have been utilized it was determined that none of the instruments were sensitive to identify occasional drinking for individuals who are utilizing numerous medications.

Recommendations:
It is imperative that a sensitive instrument is developed to identify drinking that could adversely affect patients with multiple chronic conditions. It would also be beneficial to enlist clinical professionals to administer the assessments, thus freeing physicians for treatment of acute and chronic conditions.
**Lessons Learned:**
Due to possible interactions with medications, individuals with multiple chronic illnesses require assessments that are more sensitive and comprehensive regarding alcohol use than those currently available.

**Bibliography:**


