

## Research Article

# Knowledge, Attitudes and Practice of Primary Care Professionals about the Approach of Alcohol: Preliminary Results

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**Abstract**

**Objectives:** To evaluate the knowledge, attitudes and practices of physicians and nurses of Primary Care (PC) in the implementation of preventive interventions of the Program of Preventive Activities and Health Promotion (PAPPS) regarding to patients with excessive alcohol consumption.

**Methods:** A descriptive, cross-sectional observational study conducted in health centers of the Spanish National Health System (SNS).

**Results:** From January 2014 to December 2014, 1116 health professionals (86% graduates in medicine and 14% nursing graduates) have completed an online survey, with an average age of 45 years (SD 9.3). 81% of all claims to know the recommendations described in the PAPPS, although only 67% of them recognized they had received specific training in the management of patient with excessive alcohol consumption in the last 5 years. 65% of professionals assured to do a systematic examination quantifying alcohol consumption through questionnaires, with a follow-up rate after detection of 72%.

**Conclusions:** Our preliminary results indicate that the level of specific training that health professionals have received in the last 5 years about the approach to patients with excessive alcohol consumption is low. The diffusion of the recommendations outlined by the PAPPS on the clinical practice that health professionals have to perform in primary care setting about alcohol consumption detection and management is critical and is a priority for the Spanish health authorities.

**ABBREVIATIONS**

**PC:** Primary Care; **PAPS:** Program of Preventive Activities and Health Promotion; **SNS:** Spanish National Health System; **DALYs:** Disability Adjusted Life; **AGES:** Household Survey on Alcohol and Drugs; **USPTF:** US Preventive Service Task Force; **semFYC:** Spanish Society of Family and Community Medicine; **SD:** Standard Deviation; **WHO:** World Health Organization; **SEMERGEN:** Spanish Society of Primary Care Physicians; **SEMG:** Spanish Society of General Physicians; **FAECAP:** Federations of Associations of Community Nursing and Primary Care; **ASANEC:** Andalusian Association of Community Nursing; **UK:** Unit of Alcohol.

**INTRODUCTION**

Alcohol is the third most important risk factor for premature death and disability [1], contributing to 4.5% of total years of disability-adjusted life (DALYs) and is associated with the risk of

developing more than 200 directly or indirectly linked diseases [2]. Considered drug abuse, alcohol was responsible for 3.6% of deaths in Spain in 2014, according to the latest Household Survey on Alcohol and Drugs (AGES) conducted nation wide.

Currently it is estimated that 15-20% of the cases treated in Primary Care (PC) [3] are attributable to alcohol and other drugs. Therefore, the role of health professionals in relation to excessive alcohol consumption is considered paramount to perform an educational intervention in the general population, as well as active case finding and follow-up of patients presenting a pattern of excessive alcohol consumption.

According to the US Preventive Service Task Force [4] (USPTF, 2013) PC interventions in patients from 20 to 75 years old are useful to reduce alcohol consumption 3-9 (30-90 g) U/week. In Spain, the PAPPS of the Spanish Society of Family and Community Medicine-semFYC echoes these recommendations and adapt it to

the Spanish Population. However, there are no cross-sectional studies that indicate the level of training and clinical skills that PC professionals have on preventive activities related to excessive alcohol consumption [5].

Therefore, through this study we pretend to show more comprehensively the current situation that physicians and nurses have regarding to this issue [6], in order to promote strategies to strengthen the approach to patients with excessive alcohol intake and increase transmission of such councils in the clinic, thus increasing the current applications of the preventive recommendations done by the patients in their daily lives [7]. In this article we provide a preview of our preliminary results.

## MATERIALS AND METHODS

A descriptive, cross-sectional multicenter observational study was performed with the participation of health professionals of several Health Centers of the Spanish National Health System, which completed a questionnaire designed ad-hoc by members of the Teaching Unit of Family and Community Medicine of Cordova, Group assessment and health education group of PAPPS.

To perform the study, at least 1068 professionals were needed to recruit in order to obtain an alpha error of 5%, an accuracy of 3% and a 50% estimated range of professionals who know the PAPPS (maximum uncertainty). This study population was recruited in several ways: through professionals involved in a previous study, the CECC-AP study (Péruña LA, 2015) [8]. Secondly, sending an e-mail to the members of semFyC. In a third phase (still running), we are obtaining a representative sample using stratified random sampling of SNS health centers, sending an e-mail to the director of the center, inviting him to take part as a researcher in charge of the center and through him, other members of the PC team.

Recorded data were treated statistically using SPSS software. A descriptive and inferential analysis was performed of each statistical variables. This study was approved by the Research Ethics Committee of Reina Sofia University Hospital in Cordova, Spain. Written consent of voluntary participation was requested.

## RESULTS

A total of 1,116 health PC professionals (86% graduates in Medicine and 14% of nursing graduates) answered the questionnaire in the first phase of the study. The mean age of PC professionals was 45 years old (SD 9.3) and 65% were women. Differences were observed analyzing the gender of these professionals; 24.3% of men reported consuming 4 or more times a week, compared with 6.2% of women (Chi-square: 106.53,  $p < 0.001$ ).

Taking as a reference the alcohol recommendations described in PAPPS, 28% of the professionals were assigned to this program and 71% recognized to know the preventive recommendations described on it, although only 67% of them reported to have received specific training in management in alcohol consumption in the past 5 years.

Considering the level of knowledge about alcohol consumption, 53.7% of the PC professionals claim to know the unit of Alcohol, 52.1% of them assure to know the concept of risk

alcohol consumption and 36% the term binge drinking. Taking into account the questionnaires that professionals can use to detect the degree of alcohol dependence and hazardous drinking, the best known are CAGE test (46%), followed by AUDIT (33%) and MALT (21%).

When asked about the clinical practice of primary care professionals, 65% usually performed a systematic exploration about alcohol consumption, 77% quantify excessive alcohol consumption, 86% recognized register this data in charge in the Health Center and 40% considered necessary to refer to a specialist or a drug addiction center. 72% of the PC professionals perform a follow-up of the patients after the detection of hazardous alcohol consumer. 70% of the professionals considered that their patients took practice their recommendations about alcohol consumption.

## DISCUSSION

The preliminary results show that the knowledge of Spanish health professionals on the preventive recommendations described in PAPPS is high (71%); this data contrasts with the percentage of the approach of patients with binge drinking in the last 5 years of clinical practice, due to the fact that 67% of the professionals recognize not have received specific training in this field [9].

Currently the level of the professionals assigned to PAPPS is low (28%), which differs with the percentage of professional registered to the medical and nursing societies, such as semFyC (78%), Spanish Society of Primary Care Physicians-SEMERGEN (23.6%), Spanish Society of General Physicians-SEMG (8%) Federation of Associations of Community Nursing and Primary Care-FAECAP (4.1%) and Andalusian Association of Community Nursing-ASANEC (0.7%). This difference might be used as a possible setting to boost the implementation of preventive recommendations on alcohol consumption in Primary Care, by promoting continuous training programs of alcohol consumption on the management of patients with excessive alcohol consumption.

Considering the current relevance of alcoholism [10] and the different consumption patterns described in the last national study of the Spanish population (Galán I, 2014) [11], the pattern of alcohol consumption of male health professionals is higher than women, as it occurs in the general population. On the other hand, differences between doctors and nursing regarding alcohol consumption screening in clinical setting were no analyzed in the present study.

Analyzing the basic concepts of alcohol consumption, the percentage of health professionals who assured to know the alcohol quantification measures can be improved. About half of the PC professionals surveyed (53.7%) claims to know the unit to quantify the amount of alcohol consumption (UK) [12], the concept of consumer of risk or the term binge drinking [13]. Therefore, the implementation of a nationwide education program on alcohol consumption screening and management in PC is paramount.

It also notes a variety of important opinions about what the questionnaire recommends PAPPS to quantify alcohol consumption (in the last update is the AUDIT-C [14]). Although

the AUDIT questionnaire is a relevant tool recommended by WHO for alcohol consumption screening in PC setting [15], our results show that a significant percentage of PC professionals consider the CAGE test a helpful tool for alcohol consumption assay in their clinical practice, followed by AUDIT and MALT test. Pérula et al. have indicated in a previous study the utility MALT test for detection of alcoholism in women [16] and Bradley et al. have remarked the superiority of AUDIT questionnaire in comparison to CAGE test for detection of risk alcohol consumption in clinical practice [17], indicating that CAGE test asks about alcohol problems ever experience and may do not detect an active alcohol consumption. Therefore, we think is outstanding to promote the knowledge of AUDIT test in the frame of an education program on alcohol consumption detection and management in Primary Care in the SNS.

Taking into account the clinical practice that health professionals usually carry out about alcohol consumption, our results indicate that this key aspect of clinical practice should be improved, since only 65% of respondents usually performed a systematic examination focus on alcohol consumption, somewhat lower than the percentage of these professionals who recognized to register in the computerized clinical chart of their Health Center this topic. In addition, a significant contrast in data in the monitoring of patients with risk alcohol consumption (72%) and those who ultimately end up being referred to another specialist (40%) is observed [18]. This could be explained by the lack of knowledge than health care professionals have on the approach to these patients in the area of primary care.

## CONCLUSION

In conclusion, our preliminary results indicate that the level of specific training that health professionals have received in the last 5 years about the approach to patients with excessive alcohol consumption is low. This makes the figures recorded about case detection of high risk alcohol consumption and the number of referral to specialized center are very low and should be improve, taking into account the recommendations outlined by the PAPPS program. For this reason, the diffusion of the recommendations outlined by the PAPPS on the clinical practice that health professionals have to perform in primary care setting about alcohol consumption detection and management is critical and is a priority for the Spanish health authorities, expert medical societies and related organizations.

## CONFLICT OF INTEREST

Authors declare that there are any financial interests or any conflict of interest exists.

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### Cite this article

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