



Massachusetts SBIRT News



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Winter, 2016 Number 1

Screening, Brief Intervention, Referral and Treatment (SBIRT)

In This Issue

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Drinking Patterns

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More on the AUDIT



<http://helpline-online.com>

OR

800-327-5050

Male and female drinking patterns becoming more alike in the U.S.

In the US, and throughout the world, men drink more alcohol than women. But a recent analysis by scientists at the National Institute on Alcohol Abuse and Alcoholism (NIAAA), part of the National Institutes of Health, indicates that longstanding differences in alcohol consumption and alcohol-related harms between US men and women might be narrowing.

Researchers led by Aaron White, PhD, NIAAA's senior scientific advisor to the director, examined data from yearly national surveys conducted between 2002 and 2012.

"We found, over that period of time, differences in measures such as current drinking, number of drinking days per month, reaching criteria for an alcohol use disorder, and driving under the influence of alcohol in the past year, all narrowed for females and males," says Dr. White. "Males still consume more alcohol, but the differences between men and women are diminishing."

A report of the study by Dr. White and his colleagues is online in the journal *[Alcoholism: Clinical and Experimental Research](#)*.

"This study confirms what other recent reports have suggested about changing patterns of alcohol use by men and women in the US," notes NIAAA Director George F. Koob, PhD. He adds that the evidence of increasing alcohol use by females is particularly concerning given that women are at greater risk than men of a variety of alcohol-related health effects, including liver inflammation, cardiovascular disease, neurotoxicity and cancer.

Continued on p 4

#StateWithoutStigMA

The stigma of drug 'misuse' keeps people from seeking treatment. Words like "junkie," "addict" and "druggie" can hurt, damaging self-image and standing in the way of recovery. Addiction is not a choice. It's a chronic disease similar to diabetes, heart disease and arthritis.

Get the facts and embrace a community that needs our support.

Help make Massachusetts a #StateWithoutStigMA.



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It's the Same Risk for Every Pregnant Woman Everywhere.



Rack Cards and other free materials on alcohol & drug use for consumers and professionals available from [Massachusetts Health Promotion Clearinghouse](#)

See Massachusetts Department of Public Health **Health Advisory:**

'No alcohol during pregnancy is the safest choice'

ALCOHOL SCREENING.ORG



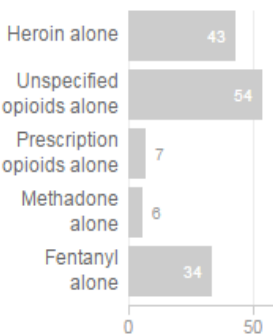
Most Overdose Deaths In Massachusetts Involve Multiple Drugs

Number of overdose deaths in Massachusetts, January through June 2014

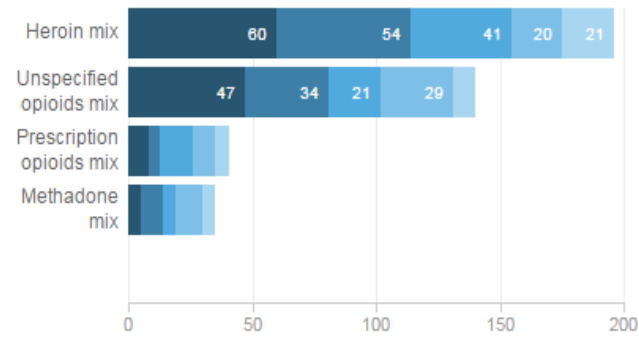
Drugs combined with:

None Fentanyl Cocaine Alcohol Benzodiazepines
Miscellaneous prescribed opioids

CASES IMPLICATING A SINGLE DRUG



CASES IMPLICATING MULTIPLE DRUGS



Notes

Drug combinations are classified in pairs of drugs only. Cases involving more than two drugs are counted in each category they fall under.

Source: Vaughan W. Rees and Christopher D. Knapp, Harvard T.H. Chan School of Public Health

Credit: Katie Park/NPR

From [Kaiser Health News](#) – Click [here](#) for full story

AAP Says No Amount of Alcohol Considered Safe During Pregnancy

A new clinical report from the American Academy of Pediatrics (AAP) identifies prenatal exposure to alcohol as the leading preventable cause of birth defects and intellectual and neurodevelopmental disabilities in children.

The report, [Fetal Alcohol Spectrum Disorders](#), in the November 2015 issue of *Pediatrics* stresses that no amount of alcohol should be considered safe to drink during any trimester of pregnancy.

'Fetal alcohol spectrum disorders (FASDs)' is an all-encompassing term for the range of effects that can occur in someone whose mother drank alcohol during pregnancy. Neurocognitive and behavioral problems from prenatal alcohol exposure are lifelong, but early recognition, diagnosis and therapy for any FASD condition can improve a child's health.

Unfortunately, a lack of uniformly accepted diagnostic criteria for fetal alcohol-related disorders has critically limited efforts that could lessen the impact of FASDs, says Janet F. Williams, MD, FAAP, one of the report's lead authors.

"Even though fetal alcohol spectrum disorders are the most commonly identifiable causes of developmental delays and intellectual disabilities, they remain significantly under-recognized," said Dr. Williams.

Resources

Mini Guide to Screening, Brief Intervention and Referral to Treatment: An Overview of SBIRT and Resources January 27 3-4:30pm ET

The acronym "SBIRT" is used more and more often. This free webinar provides an overview of the SBIRT model.

[Register](#)



2016 SBI Webinar series BIG Hospital Initiative

[Learn more](#)



ASAM Annual Conference April 14-17 Baltimore MD


Who should attend: Physicians and Clinicians; Researchers and Academics; Counselors and Students; Other Health Care Professionals

[Learn more/Register](#)



SAVE THE DATE — June 8 Aging with Dignity

A conference on Preventing and Responding to Substance Use and Related Problems in Older Adults



Central resource for anyone involved in preventing, intervening, treating, and supporting recovery from addictions in Massachusetts.

Look for career information, upcoming trainings around the state, links to professional organizations and more.

New: Job postings

www.careersofsubstance.org
Supporting the Massachusetts Substance Use and Addictions Workforce

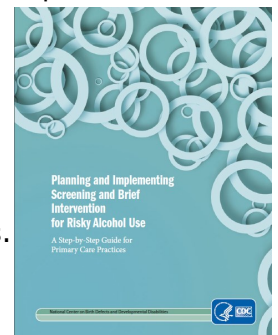
More on the AUDIT — [and errata](#)

Our last edition included what we thought was the update on the AUDIT questions for US use. **Not so!**

We have been re-directed to the CDC's [***Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use: A Step-by-Step Guide for Primary Care Practices***](#). Authors put the updates and corrections in one place, with revisions that can be immediately used.

Appendices **G** and **H** of this excellent document provide the **new AUDIT 1-3 (US) and AUDIT (US)**, adjusted in the best, most complete ways for use in the American market.

AUDIT (US) is sensitive to a broad spectrum of drinking problems, from early excessive use to severe dependence. It has been extensively validated and performs well with a variety of cultural and ethnic groups. It is available in Spanish and many other languages. It provides information about the three major domains used in screening for alcohol problems—alcohol consumption, alcohol-related harm, and dependence symptoms, all of which are valuable in conducting an intervention.



To learn more contact:

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Male and female drinking patterns

From p 1

Dr. White and his colleagues found that the percentage of people who drank alcohol in the previous 30 days increased for females from 44.9 percent to 48.3 percent, but decreased for males from 57.4 percent to 56.1 percent between 2002 and 2012. Over that time, the average number of drinking days in the past month also increased for females, from 6.8 to 7.3 days, but decreased slightly for males, from 9.9 to 9.5 days.

Among 18 to 25 year olds not in college, there was a significant increase in binge drinking among females and

a significant decrease among males, effectively narrowing the gender gap in binge drinking in this age group. Binge drinking by 18 to 25 year olds in college did not change during the decade under study.

The authors say reasons for the converging patterns of alcohol use are not clear and do not appear to be easily explained by recent trends in employment, pregnancy, or marital status, as their analyses controlled for these variables.

Study authors suggest that additional studies are needed to identify the psychosocial and environmental contributors to these changes and to assess their implications for prevention and treatment efforts.

[White A, Castle IJ, Chen CM, Shirley M, Roach D, Hingson R. Converging Patterns of Alcohol Use and Related Outcomes Among Females and Males in the United States, 2002 to 2012. Alcohol Clin Exp Res. 2015 Sep;39\(9\):1712-26](#)



No Alcohol During Pregnancy

From p 3

Prenatal alcohol exposure is a frequent cause of structural or functional effects on the brain, heart, bones and spine, kidneys, vision and hearing. It's associated with a higher incidence of attention-deficit/hyperactivity disorder and specific learning disabilities such as difficulties with mathematics and language, visual-spatial functioning, impaired impulse control, information processing, memory skills, problem solving, abstract reasoning and auditory comprehension.

In surveys, about half of all childbearing age women in the United States report consuming alcohol within the past month, and nearly 8 percent of women said they continued to consume alcohol during pregnancy. A recent study found increased risk of infant growth retardation even when a pregnant woman's consumption was limited to 1 alcoholic drink per day (a 1.5-ounce shot of distilled spirits, 5 ounces of wine, or 12 ounces of beer).

First-trimester drinking, compared to no drinking, results in 12 times the odds of giving birth to a child with FASDs. First- and second-trimester drinking increased FASDs odds 61 times, and women who drink during all trimesters increased the likelihood of FASD odds by a factor of 65.

"The research suggests that the smartest choice for women who are pregnant is to just abstain from alcohol completely," said Dr. Williams.

The AAP offers several resources for on prenatal alcohol exposure, including an [FASD Toolkit](#) for physicians and a set of frequently asked questions for parents on [Fetal Alcohol Syndrome Disorders](#).

Note: *Protecting Women and Babies from Alcohol and Drug Affected Births: Tools and Resources*, a toolkit for Massachusetts OB/Gyns and other professionals is available at [MA Health Promotion Clearinghouse](#).

MASBIRT Training and Technical Assistance



MASBIRT TTA can provide your site with:

- ◆ Training and on-going skills coaching for all staff levels: professional and administrative; train-the-trainer;
- ◆ Guidance with clinical protocol development; screening instruments and methods, brief intervention strategies;
- ◆ Grand Rounds on the intersection of alcohol, drugs and health, and importance of early identification;
- ◆ Help with administrative aspects, such as data collection strategies, documentation protocols;
- ◆ Identification and development of resources for patients who need specialty care, including medication assisted treatment for alcohol and opioids; and
- ◆ Expert guidance for work with special populations.
- ◆

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