



Massachusetts SBIRT News



Winter 2017 **Number 1**

Screening, Brief Intervention, Referral and Treatment

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Clinical Preventive Services Ranking Updates Still Include Alcohol SBI

An update of clinical preventive services rankings was published in the January/February 2017 issue of *Annals of Family Medicine*. This ranking process started with the Committee on Clinical Preventive Service Priorities in 2001, and was followed up in 2006 with National Commission on Prevention Priorities (NCPP) rankings.

The NCPP is a panel composed of health care clinicians, health plan leaders, employers, academics and government representatives.

The 2006 NCPP ranking prioritized relative health impact and cost-effectiveness of 28 clinical preventive services that the US Preventive Services Task Force found to have strong evidence. The top 3 preventive services had combination scores that were tied and after those, alcohol SBI was recognized as the next most effective clinical preventive service.

Services considered for the [2016 update](#) had an A or B recommendation from the US Preventive Services Task Force (USPSTF), were general population recommendations from the Advisory Committee on Immunization Practices, or were USPSTF recommended services for people at increased risk of cardiovascular disease (CVD) or sexually transmitted infections.

The 2016 rankings used the same two measures: '...clinically preventable burden as a measure of the health impact of a preventive service and cost effectiveness as a measure of efficiency.' Each measure could receive a score between 1 and 5, with 1 having the least health impact or effectiveness and 5 having the most health impact or effectiveness. The top combined score could be 10.

The top three preventive services each had a score of 10. They were:

- childhood immunization series;
- tobacco use, brief prevention counseling, youth;
- tobacco use screening and brief counseling, adults.

These services each had combined score of 8:

- alcohol misuse SBI,
- aspirin chemoprevention for those at higher risk of CVD,
- cervical cancer screening and
- colorectal cancer screening.

(Note: The USPSTF recommends alcohol misuse SBI for all adults and pregnant women.)

[#StateWithoutStigma](#)



www.mass.gov/dph/bsas

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New for 2017

The BIG SBIRT Webinar series



**National SBIRT ATTC
Monthly Webinars**



SAVE THE DATE

Wednesday, June 7, 2017

**College of the Holy Cross
Worcester, MA**

Aging with Dignity

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



SAVE THE DATE

Thursday- Friday, September 14-15, 2017

Convening in the US for the 3rd time

INEBRIA 2017
in New York

INEBRIA

International Network on
Brief Interventions for
Alcohol & Other Drugs



**Screening and Brief Intervention at the Intersection
of Research, Policy and Practice:
Advancing Knowledge and Meeting New Challenges**

*Jointly provided by the
NYU Post-Graduate Medical School
and*

*International Network on Brief Interventions for
Alcohol and Other Drugs (INEBRIA)*

Kimmel Center

60 Washington Square South, New York, NY 10010

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; and
- ◆ Identification and development of resources for patients who need specialty care, including medication assisted treatment for alcohol and opioids.

617-414-3749

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MASSACHUSETTS
**SUBSTANCE ABUSE INFORMATION
AND EDUCATION HELPLINE**

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To learn more contact:

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Surgeon General's Report on Substance Use

The Surgeon General, also known as the Nation's Doctor, provides Americans with the best scientific information available on ways to improve health and reduce the risk of illness and injury.

Vice Admiral Vivek H. Murthy, MD, MBA, our 19th Surgeon General, has produced the first report from his office on alcohol and drug use issues.

[Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health](#) states that alcohol and drug misuse and related disorders are major public health challenges that are taking an enormous toll on individuals, families, and society.

Substance misuse can have immediate, direct consequences for health ranging from effects on heart rate and regulation of body temperature to psychotic episodes, overdose, and death.

Alcohol and drug misuse can also impair judgment, leading to risky behaviors including driving under the influence (DUI), unprotected sex, and needle/syringe sharing.

The report refers to longer term consequences from heavy drinking which can lead to hypertension, liver disease and cancer; regular marijuana use which is connected with chronic bronchitis and cocaine use which can lead to heart disease.

The report also discusses the impact of prenatal substance use which can lead to fetal alcohol spectrum disorders or neonatal abstinence syndrome.

Some longer term societal consequences of misuse can include reduced productivity, higher health care costs, unintended pregnancies, spread of infectious disease, drug-related crime, interpersonal violence, stress within families, and many other direct and indirect effects on communities, the economy, and society as a whole.



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SCHOOL NURSES & SCHOOL HEALTH TEAMS

Have your team check out upcoming February and March SBIRT Trainings while there are still openings

at
SHIELD (School Health Institute for Education and Leadership Development)



Check out SBIRT in Schools Resources at MASBIRT Training and Technical Assistance



Don't forget to order FREE materials on alcohol and drugs for parents and students from: Massachusetts Health Promotion Clearinghouse



Alcohol SBI Rankings

from p 1

The total score for alcohol misuse SBI ranked above cholesterol screening, influenza vaccinations, and breast cancer screenings, along with several other services.

Though the evidence base for these services has changed since the earlier rankings only 6 of the 28 services in the 2016 ranking had changed their scores by more than one point.

While acknowledging that clinicians have priorities beyond health impact and cost effectiveness, the authors state:

"Across the list, preventive services that address health behaviors – including alcohol misuse, diet, physical activity and tobacco use – provide great opportunities to improve population health even while our estimates account for realistic levels of nonadherence with targeted behavior changes."

Maciosek, MV et al. Updated Priorities among Effective Clinical Preventive Services. *Ann Fam Med* 2017;15:14-22. <https://doi.org/10.1370/afm.2017>.

Surgeon General's Report

The report's chapters focus on the neurobiology of substance use, misuse and addiction; prevention programs and policies; early intervention, treatment and management of substance use disorders; recovery; the many paths to wellness; and health care systems and substance use disorders

The report states that our health care system has not given the same level of attention to substance use disorders as it has to other health concerns that affect similar numbers of people. Identification of risk and intervention to reduce harm have been promoted with limited acceptance over the last decade. Substance use disorder treatment in the US remains largely segregated from the rest of health care and serves only a fraction of those in need of treatment.

One summary sheet, [Facts and Recommendations for Health Professionals and Health Care Systems](#), may be of particular interest to health care providers.

Buzz vs. Perceived Drunkenness

The term 'buzzed' has been used to make people aware of risks of impaired driving and other activities. The term, though, is not concrete and can mean different things to different people.

A study published in the American Journal of Public Health reports that researchers merged data from several nighttime studies in 'natural drinking environments' for college students in 4 different states. They interviewed students in bars, near student housing and on sidewalks near parties, and asked whether students felt no buzz, slightly buzzed, a little drunk and very drunk. Student impressions were compared with their Blood Alcohol Concentrations (BrAC).

Researchers found that close to 40% of students who said they were 'slightly buzzed' were legally impaired for driving. In addition they found that 16% of those who felt 'no buzz' were also legally impaired. This finding was more common among the men tested.

Almost one-third of those who were legally intoxicated with a BrAC at or above 0.08 grams per deciliter felt either 'no buzz' or only 'slight buzz.'

Authors suggested that clear advice about no driving after drinking should be developed.

This study focused on students in only a few locations, so further research is warranted.

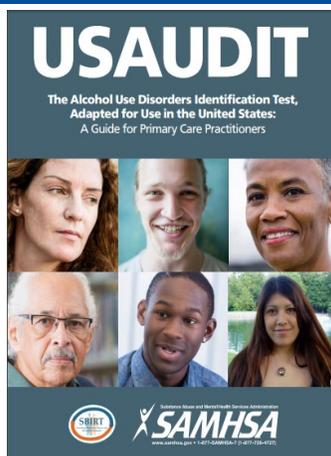
Nonetheless sharper messaging about drinking and driving (or other activities requiring motor control) may be warranted.

<http://ajph.aphapublications.org/doi/abs/10.2105/>

NEW



Adapted from the
**WHO Screener for
Use in the US**



Patient/Consumer information:

Medicines To Treat
Alcohol Use Disorder
A Review of the Research for Adults



[Medicines to Treat Alcohol Use Disorder: A Review of the Research for Adults](#)

Now available in Spanish

[Medicamentos para tratar el trastorno por consumo de alcohol: Revisión de la investigación para adultos](#)

Medicamentos para tratar el
trastorno por consumo de alcohol:
Revisión de la investigación para adultos



Prevent • Treat • Recover • For Life