

Family Members of Individuals suffering from addiction: a target group for Brief interventions?

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C.O.I.



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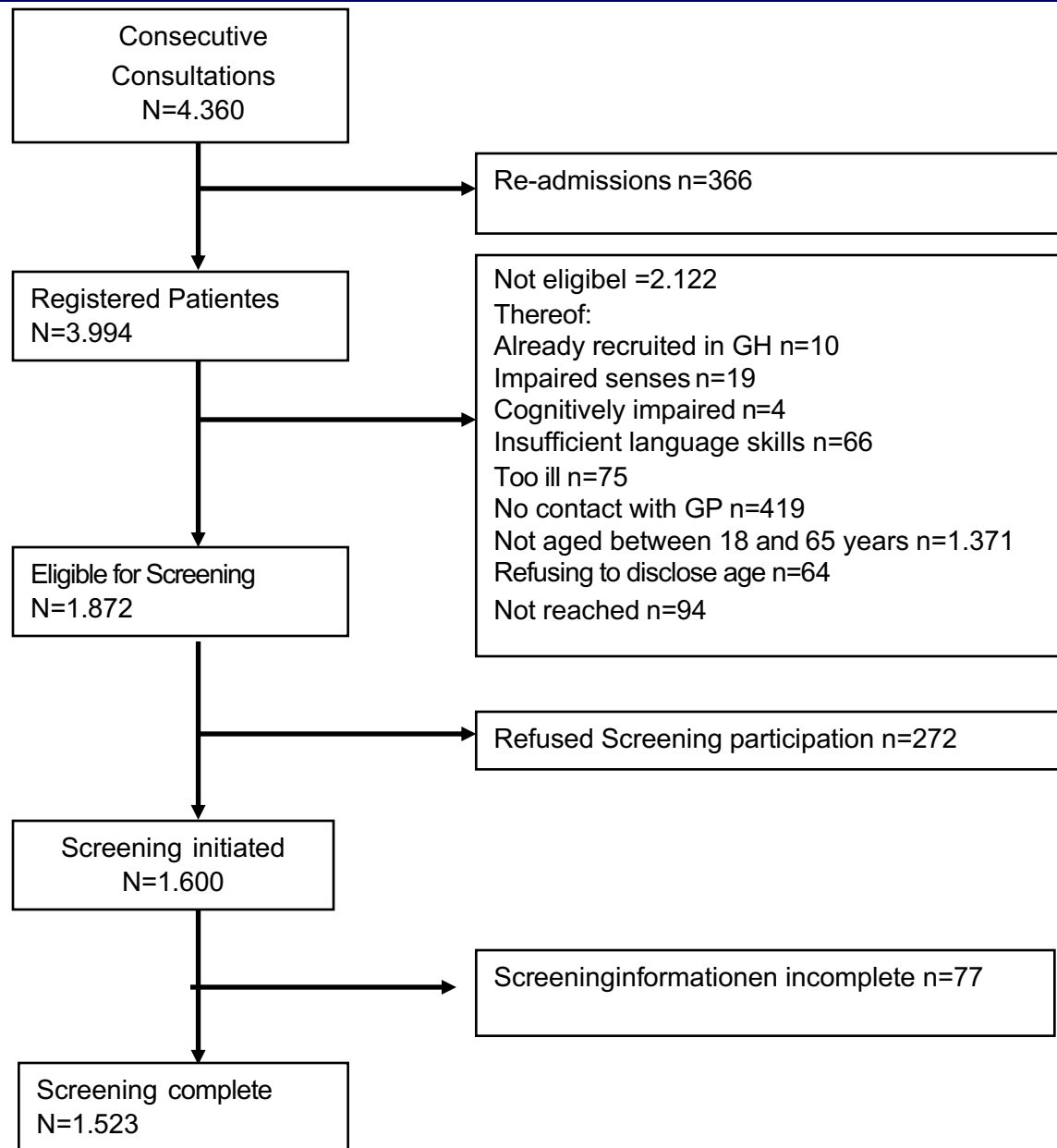
Background

- Relatives of individuals with addictive disorders (RIAD) show elevated health-related morbidity but rarely seek help in the addiction treatment system
- Aim: to estimate the prevalence of the problem and the level of impairment in RIAD identified via pro-active screening in primary care settings.

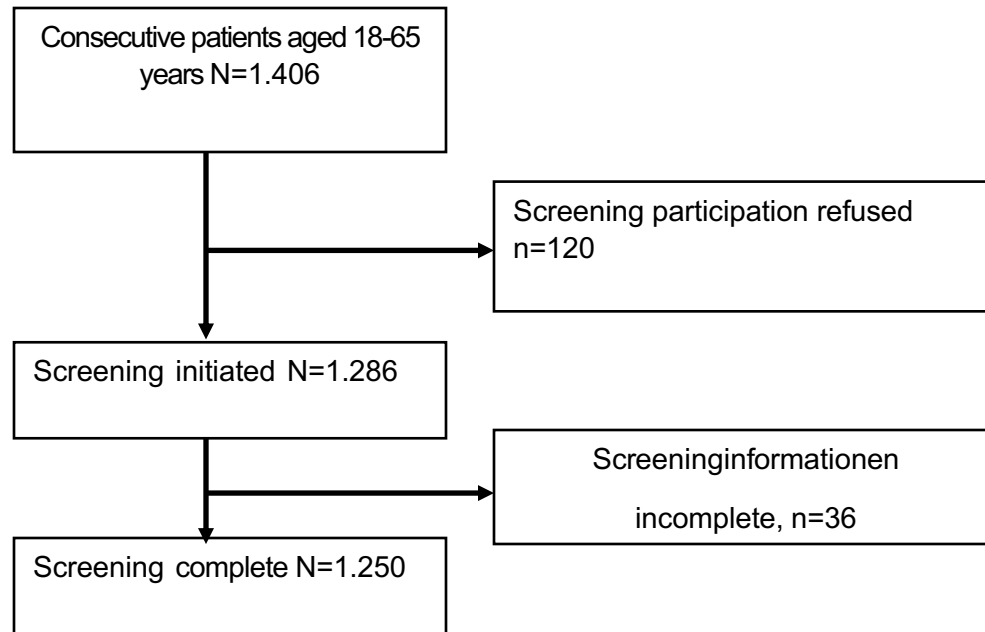
Method

- Systematic Screening of consecutive Patients aged 18-64 yrs. in general hospital wards and general practices
- Screening questions on addiction problems in the family were embedded in a larger Screening-questionnaire consisting of health-related behaviour including the AUDIT

Recruitment: General Practices



Recruitment: General Hospitals



Operationalization HTO

1. Do you have a relative who you would judge having an addiction problem (except tobacco):

1. No
2. Yes, addiction was present in the last 12 months
3. Yes, but addiction was not present in the last 12 months

2. How would you classify the addiction?

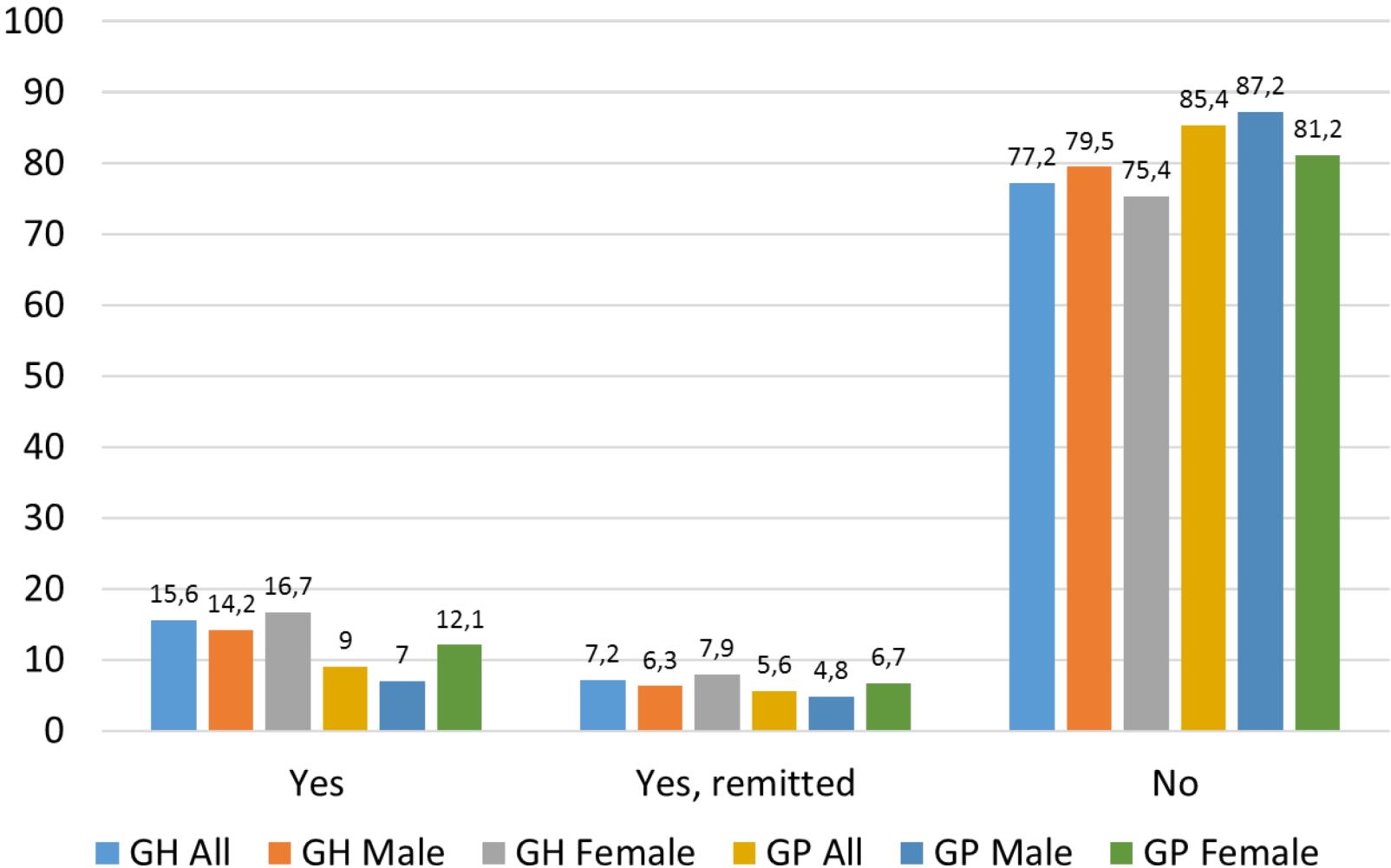
1. Alcohol
2. Cannabis
3. Other drugs
4. Prescription drugs
5. Pathological gambling
6. Other

3. Please specify your relationship to this individual

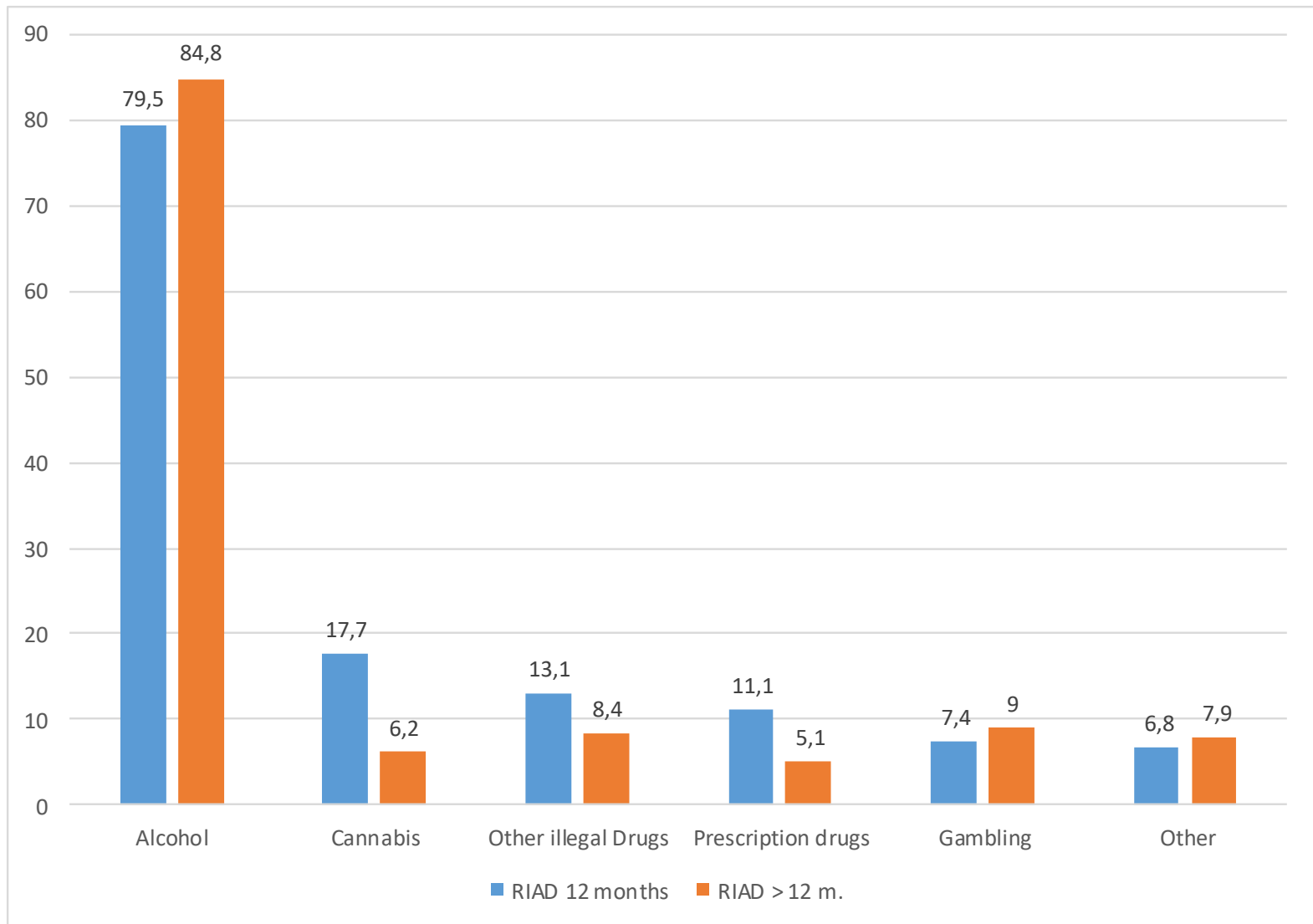
1. Partner
2. Parent
3. Child
4. Sibling
5. Other

Results HTO: GEDA

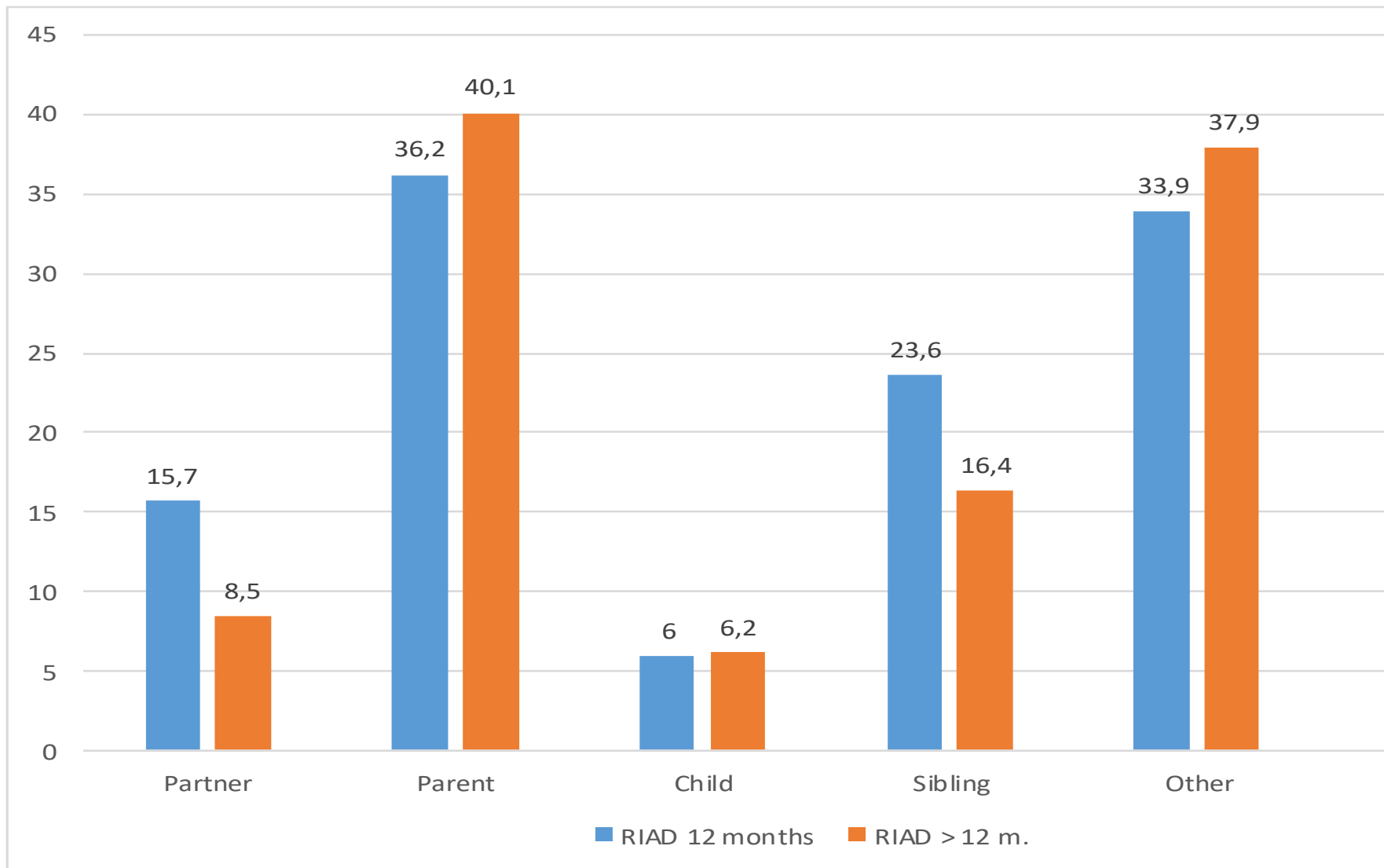
Prevalence Addiction in Family members



RIAD & Type of addiction



RIAD & Type of relationship



Characteristics of RIAD

Variable	RIADac N=351	RIADrem N=180	RIADno N=2.242	Sig*
Females (%)	59,5	57,8	48,2	.000
Unemployed (%)	10,0	9,4	8,3	n.s.
Max. 10 yrs. schooling (%)	62,1	50,6	62,0	.010
Stable Partnership (%)	68,9	62,2	72,8	.005
Age (SD)	39,2 (13,5)	40,6 (14,3)	44,2 (13,8)	.000
Min. mild depression (%)	25,6	26,7	15,6	.000
Health status (SD)	3,2 (0,9)	3,2 (0,9)	3,2 (0,9)	n.s.
Smoker (%)	38,5	33,3	24,5	.000
At-risk drinking (%)	8,5	5,0	2,8	.000
BMI (SD)	25,5 (5,5)	26,2 (5,4)	26,8 (6,2)	.023
At-risk physical exercise (%)	32,5	34,4	35,9	n.s.
At-risk fruit/vegetable intake (%)	89,5	87,8	89,6	n.s.

Characteristics of RIAD

	RIADno (ref) vs. RIADac			RIADno (ref) vs. RIADrem			RIADrem (ref) vs. RIADac		
	RRR ²	95%-CI	p	RRR	95%-CI	p	RRR	95%-CI	p
Female	1.66	1.31-2.11	<.001	1.47	1.07-2.01	.019	1.13	.778-1.65	.516
Stable Partnership	1.02	.789-1.32	.882	.706	.510-.977	.036	1.44	.980-2.13	.063
Age	.975	.966-.984	<.001	.988	.976-1.00	.056	.986	.972-1.00	.057
School max. 10 yrs.	1.11	.856-1.44	.430	.641	.458-.897	.010	1.73	1.16-2.59	.007
BMI	.993	.973-1.01	.486	1.00	.976-1.03	.858	.990	.960-1.02	.548
Smoker	1.82	1.41-2.34	<.001	1.71	1.21-2.41	.002	1.06	.714-1.58	.766
At-risk drinking	2.86	1.82-4.51	<.001	1.62	.803-3.25	.179	1.77	.833-3.76	.138
Health status	1.03	.894-1.19	.487	.988	.811-1.20	.905	1.04	.823-1.31	.746
Min. mild depression	1.67	1.26-2.22	<.001	1.75	1.21-2.53	.010	.956	.622-1.47	.847

Summary

- Relatives of individuals with addictive disorders (RIAD) are a vulnerable population and highly prevalent among patients in primary care.
- Data suggest RIAD are also overrepresented in the target population for SBI concerning alcohol/tobacco
- Evidence-based treatment including brief interventions exist and might have a public-health impact.
- Interventions for RIAD might support treatment entry of addicted individuals (e.g. CRAFT)

Thank you for listening!

