



AESOPS

ALCOHOL – EVALUATING STEPPED CARE FOR OLDER POPULATIONS STUDY

Dr. Ruth McGovern

Simon Coulton, Jude Watson, Martin Bland, Colin Drummond, Eileen Kaner, Christine Godfrey, Alan Hassey, Veronica Morton, Dorothy Newbury-Birch, Steve Parrott, Tom Phillips, Duncan Raistrick, Daphne Rumball and Gillian Tober

Background

- AUD prevalence in ≥ 55 years is thought to be between 15-25%
- Hazardous and harmful drinking in those aged ≥ 55 years is associated with a wide range of physical, psychological and social problems
- ≥ 55 years are less likely to seek advice or intervention for alcohol, tend not to be asked about their drinking and alcohol related presentations tend to be masked by co-morbid conditions
- Only 5% of people aged ≥ 55 years with AUD are identified in primary care settings

Research Aims

- To estimate the prevalence of AUDs in an older, primary care setting
- To evaluate the acceptability and validity of opportunistically screening for AUDs in older primary care attendees
- Evaluate the effectiveness and cost-effectiveness of stepped care interventions for older hazardous alcohol users in primary care

Hypotheses

- **Primary hypotheses:** stepped care interventions for older hazardous alcohol users will be more effective in reducing alcohol consumption compared with a minimal intervention
- **Secondary hypotheses:** Stepped care is more cost-effective, will reduce alcohol related problems and increase health related quality of life compared with minimal intervention. Opportunistic screening will identify more hazardous alcohol use than usual practice

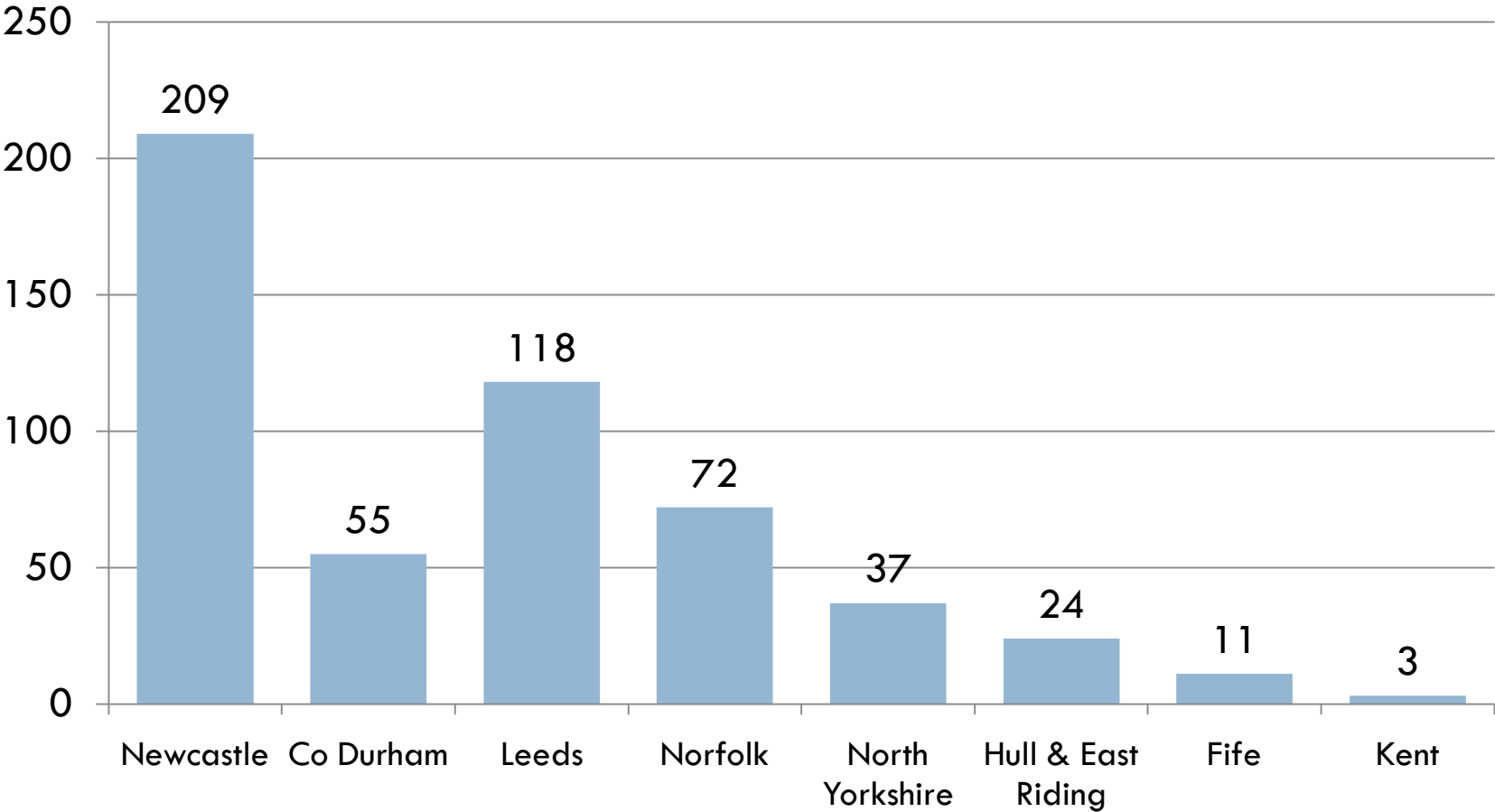
Research Design

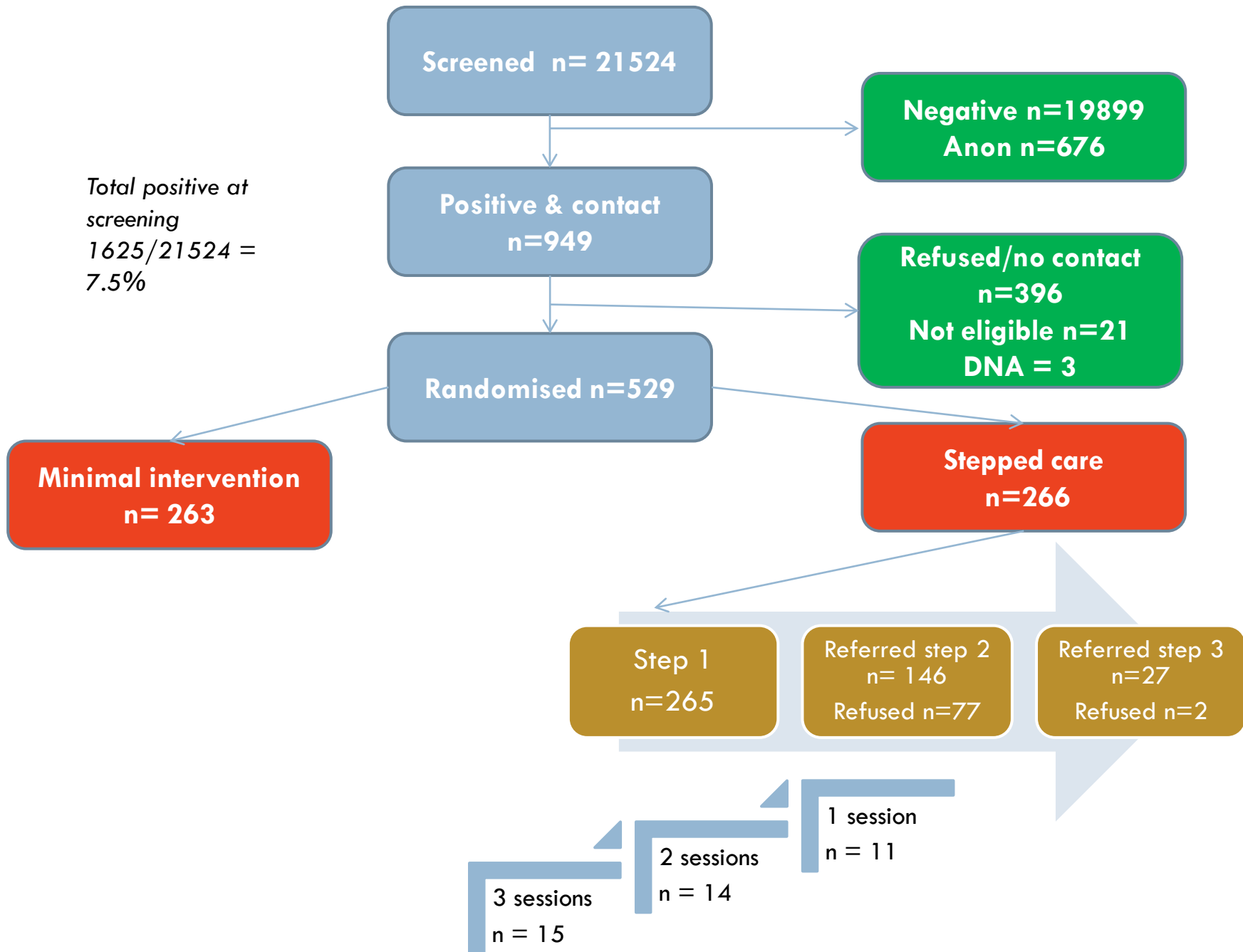
- Prevalence study
- Individual randomised controlled trial
- Multi-centre
- Followed up at 6 & 12 months
- Primary outcome measure – average drinks per day (AUDIT – C)
- Secondary outcome measure – alcohol-related problems (DPI), quality of life (SF-12) and health utility (EQ-5D)

Interventions

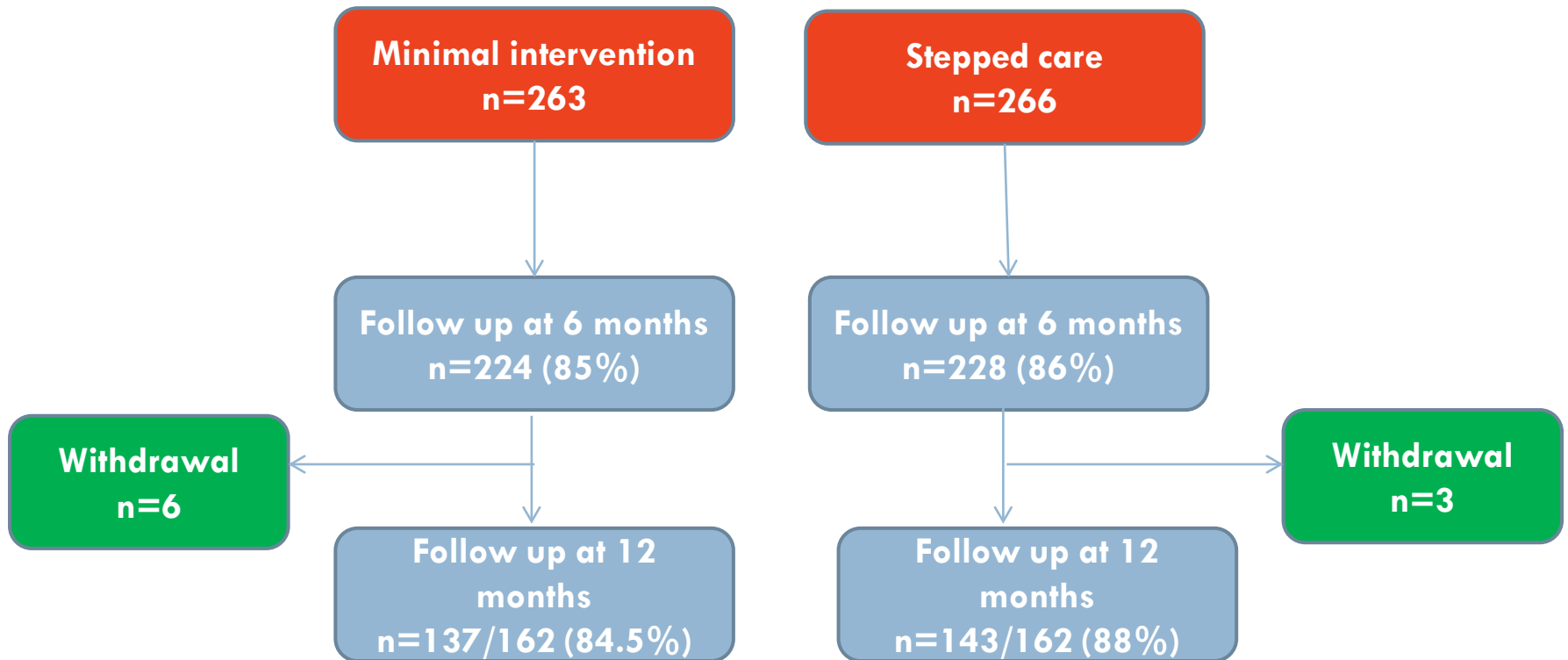
- Delivered by PHC staff and research staff
- Minimal intervention
- Stepped care
 - ▣ Step 1 brief lifestyle counselling
 - ▣ Step 2 Motivational Enhancement Therapy
 - ▣ Step 3 Specialist treatment

Recruitment





Follow-up (6 & 12 month)



Results to date

- 78,260 questionnaires distributed
- 21,524 (28%) were returned
- 8% screened positive for AUD
- 56% of eligible participants were randomised
- 99.6% of those randomised received an intervention
- High follow-up rates

What next?



- Complete follow-ups
- Analyse data
- Estimate date for results early 2012

Reference

Coulton et al (2008) “The effectiveness and cost effectiveness of opportunistic screening and stepped care interventions for older hazardous alcohol users in primary care (AESOPs) – a randomised controlled protocol.” *BMC Health Services Research* 8(129).