

BRIEF INTERVENTION IN A SECONDARY ATTENTION SERVICE OF PATIENTS WITH PROBLEMS RELATED TO ALCOHOL AND OTHER DRUGS: EXPERIENCE REPORT

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INTRODUCTION

Brief Intervention (BI), are simple procedures, based on cognitive-behavioral concepts, aimed at education and patient motivation for changes in attitudes and habits, which has evidence-based efficacy.

It can be applied in different contexts and realities, by different professionals, with effectiveness in reducing consumption and problems related to alcohol and other drugs. It is a tool for systematizing its care and qualification.

The BI can be divided into two stages: "Screening and Intervention." In screening, the individual's consumption patterns are tracked, and the intervention consists of a motivational interview and cognitive-behavioral therapy.

After clinical evaluation, it is important to evaluate the patient's degree of motivation for treatment: **pre-contemplation stages; contemplation; preparation; determination; action; maintenance.**

The FRAMES Structure is the basis of BI: **F = feedback; R = accountability; A = Counseling, M = Menu, E = empathy; S = self efficacy.**

OBJECTIVE

To demonstrate the practice of BI in the process of attention to a user of psychoactive substances, in the decision making of their care and in the reduction of damages.

METHOD

This is a "Report of Experience" of a user of psychoactive substances (tobacco, alcohol and cocaine), a specialized service in alcohol and other drug problems (UNIPRAD), a field of practice for undergraduate and postgraduate students of a university hospital in the city of Rio de Janeiro.

Characterization of the case: male, 42 years old, married, Catholic, incomplete elementary school, painter and bricklayer. He has no comorbidities, drug use for more than 15 years, denies use of medications, found the service to improve family relations.

-Steps for the intervention: Five (05) consecutive consultations were carried out and systematized with nurses, following the **FRAMES**:

-1st consultation: general evaluation, ASSIST application, motivational rule, diary and measure consumption, negotiation, goals, request for exams, educational material; Menu, accountability.

2nd consultation: daily review of consumption, goals, difficulties, reinforcement of goals, advantages and disadvantages chart, renegotiation;


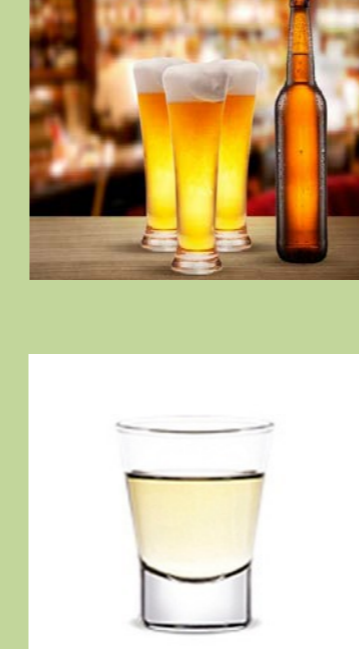

3rd consultation: evaluation of the chart, daily consumption, results of examinations, renegotiation;

-4th consultation : consumption reevaluation, difficulties and goals, coping strategies, evaluation progress, referral to other Service professionals, renegotiation;

-5th consultation: review of goals, empowerment, preparation for discharge, follow-up.

RESULTS

FRAME1: Drug use, follow-up of weekly consultations and results of interventions.

Drugs	1 ^a Cons. 5/04	2 ^a Cons. 12/04	3 ^a Cons. 19/04	4 ^a Cons. 26/04	5 ^a Cons. 3/05
Cocaine 	4 g (4 pinos) Weekend	0 consumption	0 consumption	0,5 g (1/2 pino)	0 consumption
Alcohol 	5 doses (200 ml) distilled ED	3 doses (120 ml) distilled EW	600 ml de BEER (Friends) EW	3 Beers de 600 ml EW	S (600 ml) Beer ; (40 ml) distilled holiday(473 ml) beer (on the beach
	1 pack / day	2 packs/ day	2 packs / day	2 packs / day	2 packs / day
ASSIST Points	21 tobacco; 28 alcohol 28 cocaine	-	-	-	24 tobacco 16 alcohol 15 cocaine

Subtitle : Pinos = Eppendorf (1 g); ED= every day; EW= every weekend; S= saturday; T= Tuesday; Cons.= consultation.

CONCLUSION

The BI applied in attention to the user of psychoactive substances was a fundamental tool to trigger actions and interventions, which promoted the final result, as well as the establishment of behaviors that qualified care, motivated reduction of consumption, and reduction of damages. Currently, the user attends service as treatment maintenance, has resumed family and social life, is working and following his routine, communicating frequently with the staff, giving feedback.

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Academic coordinator and undergraduate and graduate students discussing the cases of the Service



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