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Decision-making in alcohol use disorder

Submission date	Recruitment status	[X] Prospectively registered
09/04/2025	No longer recruiting	[X] Protocol
Registration date	**Overall study status**	[_] Statistical analysis plan
10/04/2025	Completed	[X] Results
Last Edited	**Condition category**	[_] Individual participant data
10/09/2026	Mental and Behavioural Disorders	

Plain English summary of protocol

Background and study aims
The overarching aim of this study is to understand how people make decisions about alcohol and other types of enjoyable, rewarding or meaningful activities, and how this differs between people with alcohol use disorder (AUD), people who had an AUD in the past but are now in recovery, and people who consume alcohol but do not have an AUD.

Who can participate?
Healthy adults aged 21 years old and over. Additional inclusion criteria, which relate to current and historical alcohol consumption and problems, apply to different subgroups of participants

What does the study involve?
Participants complete computerised decision-making tasks in which they choose between different types of images (pictures depicting alcoholic drinks, non-alcoholic drinks, and enjoyable or rewarding activities that do not involve alcohol). Participants will also complete a battery of self-report measures

What are the possible benefits and risks of participating?
Benefits: This work will contribute to tailoring treatments and advice for people who want to reduce their alcohol consumption. People who take part in the study will also receive Prolific credits to compensate them for their time.

Risks: For people who are invited to take part in the study after initial screening, completion of the study procedures is low-risk. Participants who are in recovery from alcohol use disorder also have the option to skip blocks of the decision-making tasks that involve making decisions about pictures of alcohol, which further reduces the risk.

Other aspects of the study procedures including answering questions about current and historical alcohol consumption may cause distress for some participants.

Where is the study run from?
The University of Sheffield (UK)

When is the study starting and how long is it expected to run for?
October 2022 to August 2025

Who is funding the study?
Medical Research Council (UK)

Who is the main contact?
Prof Matt Field, matt.field@sheffield.ac.uk

Contact information

Type(s)
Public, Scientific, Principal investigator

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Additional identifiers

Protocol serial number
Protocol / serial number: MR/W028476/1, ethics ref 066869

Study information

Scientific Title
Identifying the value-based decision-making profiles that distinguish people with alcohol use disorder, people in recovery from alcohol use disorder, and non-dependent alcohol consumers, using an observational case-control design

Acronym
DMCCAUD

Study objectives
1. Drift rates for alcohol should be highest for problem drinkers who are not seeking treatment, intermediate for low-risk drinkers, and lowest for people in recovery, whereas response thresholds for alcohol should be highest among people in recovery, intermediate for low-risk drinkers, and lowest for problem drinkers.
2. Drift rates for alcohol-free reinforcement should be lowest for problem drinkers who are not seeking treatment, intermediate for low-risk drinkers, and highest for people in recovery, whereas response thresholds for alcohol-free reinforcement should be lowest among people in recovery, intermediate for low-risk drinkers, and highest for problem drinkers.

3. Percent alcohol choice should be lowest among people in recovery, intermediate for low-risk drinkers, and highest for problem drinkers who are not seeking treatment.

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 24/03/2025, Department of Psychology Research Ethics Committee (Department of Psychology, ICOSS building, University of Sheffield, Sheffield, S1 4DP, United Kingdom; +44 (0) 114 222 6533; psy-ethics@sheffield.ac.uk), ref: 066869

Primary study design
Observational

Study design
Cross-sectional observational case-control study

Study type(s)
Other

Health condition(s) or problem(s) studied
Alcohol use disorder

Interventions
Participants complete computerised decision-making tasks in which they choose between different types of images (pictures depicting alcoholic drinks, non-alcoholic drinks, and enjoyable or rewarding activities that do not involve alcohol). Participants will also complete a battery of self-report measures.

Intervention Type
Behavioural

Primary outcome(s)
Measured at a single timepoint:
1. Evidence accumulation rates for alcohol and alcohol-free reinforcement (inferred from value-based decision-making task)
2. Response thresholds for alcohol and alcohol-free reinforcement (inferred from value-based decision-making task)
3. Percentage alcohol choice (inferred from concurrent choice task)

Key secondary outcome(s)
Measured at a single timepoint:
Self-report measures including the Brief Measure of Non-Drug Reinforcement

Completion date
31/08/2025

Eligibility

Key inclusion criteria

All participants: Access to an internet-connected computer

By group:

1. Current Alcohol Use Disorder:
1.1. Endorse 6 or more symptoms on the Alcohol Symptom Checklist over the past year.
1.2. Self-reported consumption of 28 units of alcohol (or more), per week.
1.3. Score of 15 or higher on the Alcohol Use Disorders Identification Test.

2. In recovery from Alcohol Use Disorder (abstinent subgroup):
2.1. Endorse 6 or more symptoms on the Alcohol Symptom Checklist in the past (not including the past year).
2.2. Endorse 2 or fewer symptoms on the Alcohol Symptom Checklist over the past year.
2.3. Self-reported current abstinence from alcohol (as determined by first item of the AUDIT).
2.4. Answer “yes” to either of these two questions: “Do you consider yourself to be in recovery, or recovered, from an alcohol problem?” OR “Do you consider yourself to have taken care of, got over, or resolved a previous drinking problem?”
2.5. Score of 47 or higher on the Brief Assessment of Recovery Capital.

3. In recovery from Alcohol Use Disorder (non-abstinent subgroup):
3.1. Endorse 6 or more symptoms on the Alcohol Symptom Checklist in the past (not including the past year).
3.2. Endorse 2 or fewer symptoms on the Alcohol Symptom Checklist over the past year.
3.3. Self-reported consumption of 7 or fewer units of alcohol per week.
3.4. Score of 7 or lower on the Alcohol Use Disorders Identification Test.
3.5. Answer “yes” to either of these two questions: “Do you consider yourself to be in recovery, or recovered, from an alcohol problem?” OR “Do you consider yourself to have taken care of, got over, or resolved a previous drinking problem?”
3.6. Score of 47 or higher on the Brief Assessment of Recovery Capital.

4. Light drinkers:
4.1. Endorse 2 or fewer symptoms on the Alcohol Symptom Checklist over the past year and in the past (not including the past year).
4.2. Self-reported consumption of 7 or fewer units of alcohol per week.
4.3. Score of 7 or lower on the Alcohol Use Disorders Identification Test.

Participant type(s)
Healthy volunteer

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
21 Years

Upper age limit
120 Years

Sex
All

Total final enrolment
0

Key exclusion criteria
Answer YES to “Are you currently receiving support or treatment for your drinking?”

Date of first enrolment
14/04/2025

Date of final enrolment
31/08/2025

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
University of Sheffield
Western Bank
Sheffield
England
S10 2TN

Sponsor information

Organisation
University of Sheffield

ROR
https://ror.org/05krs5044

Funder(s)

Funder type
Research council

Funder Name
Medical Research Council

Alternative Name(s)
Medical Research Council (United Kingdom), UK Medical Research Council, Medical Research Committee and Advisory Council, MRC

Funding Body Type
Government organisation

Funding Body Subtype
National government

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan
The datasets generated during and analysed during the current study will be stored in a publicly available repository.

Upon publication of results from this study in a peer-reviewed journal, or before the 31st December 2025 (whichever is sooner), aggregated, anonymised data selected for long-term preservation and sharing will be deposited in the UK Data Service. The UK Data Service is openly accessible and searchable and will guarantee the preservation of these data for ten years or more.

Metadata records describing these data will also be stored in ORDA (https://orda.shef.ac.uk/), the University of Sheffield research data registry and repository. The anonymised data may also be uploaded to other publicly accessible repositories such as ResearchBox or the Open Science Framework.

Governance of access: Data will be made available through shared research platforms (UK Data Archive and ORDA) with the relevant permissions in place.

The study team’s exclusive use of the data: The project group (including Project Partners) will have exclusive use of the data until the main research findings are published.

Regulation of responsibilities of users: External users will be bound by data-sharing agreements as specified by the MRC Data Sharing Policy. These will include provisions that data are not shared with third parties without permission, and that credit is given to the research group that produced the data. Anybody who wishes to access the data from the UK Data Service will be required to sign a license agreement that permits the UKDS to perform its curatorial functions and make the data available via a Creative Commons Licence.

Participants provided their informed consent for sharing their anonymised data.

IPD sharing plan summary

Stored in publicly available repository

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Other unpublished results			10/09/2026	No	No
Protocol (other)			10/04/2025	No	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes