

# Development and evaluation of the efficacy of a brief motivational intervention among young adults admitted in the Emergency room while being alcohol intoxicated

<b>Submission date</b> 26/11/2016	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 30/11/2016	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 30/01/2026	<b>Condition category</b> Injury, Occupational Diseases, Poisoning	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Current plain English summary as of 08/08/2018:

### Background and study aims

Harmful alcohol use among young adults is a major public health concern and accounts for a significant portion of disease burden in Switzerland and worldwide. In Switzerland, Emergency Room admissions for alcohol intoxication have increased substantially over the past decade, particularly among adolescents and young adults. Brief motivational interventions (short programs which aim to motivate people to change their behaviour) for young adults conducted in the Emergency Room have shown promising but inconsistent results. The aim of this study is to test the effectiveness of a new motivational intervention model for young adults admitted in the ER with alcohol intoxication.

### Who can participate?

Patients aged 18-35 who have been admitted in the Lausanne University Hospital Emergency Room for any cause and having alcohol intoxication.

### What does the study involve?

At the start of the study, participants are asked to complete a 10 minute questionnaire, participate in an interview with a research clinician to discuss alcohol use, as well as change in alcohol use if they wish so, and complete a short feedback questionnaire about the interview (3 minutes). They are then randomly allocated to one of two groups. Those in the first group take part in the brief motivational intervention. The programme is delivered while in the ER by a qualified research clinician and takes between 20 and 60 minutes. The programme aims to help participants to help change their drinking behaviour by looking at the discrepancies between their current behaviour and where their broader life goals. After the session, they are sent a letter summing up the discussion (i.e., context, discussion, aims and encouragements). Based on participant's agreement, booster session by phone is conducted after 1 week, 1 month, and 3 months. Those in the second group receive 5-10 minutes of brief advice in the ER to cut down on drinking. Participants in both groups are contacted by phone 1, 3, 6 and 12 months later in order

to complete another questionnaire on alcohol use and related consequences. Each contact lasts for around 15 minutes. In addition, a sample of hair is collected and tested for alcohol use at the start of the study and then again after 6 and 12 months. Medical records are also reviewed after 12 months to find out if any participants have been readmitted to hospital while intoxicated with alcohol.

What are the possible benefits and risks of participating?

There may be no direct benefit to participants. That being said, potential benefits to participants include the possibility to reduce alcohol consumption and related problem; participants also may benefit from clinical assessment, monitoring and referrals as necessary. They might also take advantage of an interview with a trained psychologist to think about their behaviors and their life values and better get to know themselves. The risks of serious adverse consequences as a result of study participation are relatively low. It is possible that some participants will find the interviewing tiresome. They might also have concerns about confidentiality of sensitive information addressed during the intervention. The sensitive nature of some of the questions (e. g., alcohol-related) may cause participants discomfort.

Where is the study run from?

Lausanne University Hospital (Switzerland)

When is the study starting and how long is it expected to run for?

December 2016 to August 2020 (updated 17/06/2019, previously: May 2019)

Who is funding the study?

Swiss National Science Foundation (Switzerland)

Who is the main contact?

Dr Jacques Gaume

[jacques.gaume@chuv.ch](mailto:jacques.gaume@chuv.ch)

Previous plain English summary:

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Health Technology Assessment Programme, National Institute for Health Research (UK)

Who is the main contact?

Dr Jacques Gaume

## Contact information

### Type(s)

Scientific

### Contact name

Dr Jacques Gaume

### Contact details

Lausanne University Hospital  
Avenue de Beaumont 21 bis – P2  
Lausanne  
Switzerland  
1011

# Additional identifiers

## Protocol serial number

Grant 105319\_163123, Swiss National Science Foundation

# Study information

## Scientific Title

A Process study and Randomized controlled trial examining the Efficacy and Mechanisms of Motivational interviewing for alcohol Intoxicated young adults admitted to the Emergency Room

## Acronym

PREMMIER

## Study objectives

The primary aim of this trial is to test the efficacy of a brief motivational intervention model (developed in the first part of the PREMMIER project) by comparing it to a control condition receiving a minimal intervention (structured brief advice).

### Null hypothesis:

Both interventions have comparable effects in reducing

1. The number of Heavy drinking days (HDD, i.e. the number of days with 6 standard drinks or more, equivalent to 60 grams of pure alcohol or more, over the last month)
2. Alcohol-related problems as measured by the Short Inventory of Problems (SIP) total score over 3 the follow-up times (3, 6, and 12 months after intervention)

### Alternative hypothesis:

Participants in the Brief motivational intervention group (experimental condition – intervention model developed in the first phase of the project) reduce

1. The number of Heavy drinking days (HDD, i.e. the number of days with 6 standard drinks or more, equivalent to 60 grams of pure alcohol or more, over the last month)
2. Alcohol-related problems as measured by the Short Inventory of Problems (SIP) total score, more then participants in the control group (structured brief advice) over the 3 follow-up times (3, 6, and 12 months after intervention)

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Commission cantonale d'éthique de la recherche sur l'être humain (Ethics Committee of Canton Vaud), 01/11/2016, ref: 2016-01476

## Study design

Single-center two-arm randomized controlled trial

## Primary study design

Intentional

## Study type(s)

Prevention

## **Health condition(s) or problem(s) studied**

Alcohol intoxication

## **Interventions**

Participants will be randomised to one of two groups using an algorithm implemented in the same software used to collect baseline assessment (secuTrial).

**Intervention group:** The experimental treatment will be a brief motivational intervention (BMI) developed and pre-tested in the first phase of project PREMMIER. BMI will be delivered while in the ER by a qualified research clinician (psychologist, clinical social worker, or nurse) and will last between 20 to 60 minutes. The intervention will use 3 main ingredients, in particular:

1. Relational factors (e.g., empathy, acceptance, collaboration, avoidance of confrontation)
2. Evoking participants' change talk and strengthening their ability and commitment to change
3. Providing information while supporting participants' autonomy.

Overall, the intervention aims at increasing participants' motivation to change their drinking behaviours by enhancing discrepancy between their current behaviour and their broader life goals and values. The intervention focuses on helping participants to resolve the latter discrepancy through evoking and planning behaviour change. When necessary, interventionist will discuss and facilitate referral to alcohol treatment. After the session, the interventionist sends a letter summing up the discussion (i.e., context, discussion, aims and encouragements) to the participant. Based on participant's agreement, booster session by phone will be conducted after 1 week, 1 month, and 3 months.

**Control group:** The control intervention will be a minimal intervention - Brief advice. Brief advice will be delivered in approximately 5 to 10 minutes. It will be led by the same research clinicians and will consist of a standardized brief structured feedback and advice to cut down drinking, with referral to specialist services for the more severe patients (based on the Alcohol Use Disorders Identification Test score included in the baseline assessment).

Participants will complete a short post-session questionnaire while in the ER, and will then be contacted for follow-up assessments at 1, 3, 6, and 12 months post-baseline. Research assistants will conduct follow-up interviews by phone, using a computer assisted program directly recording data electronically in the eCRF (secuTrial). The interview will last 15 to 30 minutes.

## **Intervention Type**

Behavioural

## **Primary outcome(s)**

Number of Heavy drinking days over the last month (HDD, i.e. the number of days with 6 standard drinks or more, equivalent to 60 grams of pure alcohol or more) measured using a 30-day Timeline Follow-back technique (TLFB) and the Short Inventory of Problems (SIP) total score at 3, 6 and 12 months post-intervention.

## **Key secondary outcome(s)**

1. Weekly drinking amount (i.e. number of drinks per week) derived from the Timeline Follow-back technique (TLFB) at 3, 6 and 12 months post-intervention
2. Frequency of alcohol-related consequences will be derived from 4 alcohol-related consequences at 3, 6 and 12 months post-intervention
3. Alcohol-related problems are assessed using SIP sub-dimension scores (Physical, Social, Intra-personal, Inter-personal, and Impulse control) at 3, 6 and 12 months post-intervention
4. Proportion of patients with hazardous or harmful drinking status is assessed using the Alcohol

use disorder identification test (AUDIT) at baseline and 12 months

5. Proportion of patients who started alcohol treatment and of patients readmitted to the ER over the 12-month follow-up period will be measured by specific self-report questions at 3, 6 and 12 months post-intervention

6. Proportion of patients who started alcohol treatment and of patients readmitted to the ER is measured using Lausanne University Hospital medical records at 12 months post-intervention

7. Heavy drinking is assessed by measuring to Ethyl glucuronide (EtG) concentration in head hair at baseline, 6 and 12 months post-intervention

**Completion date**

31/08/2020

## **Eligibility**

**Key inclusion criteria**

1. Aged between 18 and 35 years
2. Admitted in the Lausanne University Hospital ER (for any cause) and having alcohol intoxication (>0.5 gram/liter BAC or clinical indication of alcohol intoxication)
3. Informed consent as documented by signature

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Upper age limit**

35 years

**Sex**

All

**Total final enrolment**

344

**Key exclusion criteria**

1. Life threatening conditions
2. Detainees or medico-legal admissions
3. Not being fluent in French
4. Currently receiving another alcohol or substance use treatment
5. Psychiatric or medical contra-indications preventing patients understanding informed consent, fulfilling questionnaires, and participating in the intervention (evaluated using an adaptation of the University of California, San Diego Brief Assessment of Capacity to Consent)

**Date of first enrolment**

01/12/2016

**Date of final enrolment**

31/08/2019

## Locations

**Countries of recruitment**

Switzerland

Thailand

**Study participating centre**

**Lausanne University Hospital**

Rue du Bugnon 46

Lausanne

Thailand

1011

## Sponsor information

**Organisation**

Lausanne University Hospital

**ROR**

<https://ror.org/05a353079>

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

Swiss National Science Foundation

**Alternative Name(s)**

Schweizerischer Nationalfonds, Swiss National Science Foundation, Fonds National Suisse de la Recherche Scientifique, Fondo Nazionale Svizzero per la Ricerca Scientifica, Fonds National Suisse, Fondo Nazionale Svizzero, Schweizerische Nationalfonds, The Swiss National Science Foundation (SNSF), SNF, SNSF, FNS

## Funding Body Type

Private sector organisation

## Funding Body Subtype

Trusts, charities, foundations (both public and private)

## Location

Switzerland

# Results and Publications

## Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Data sharing statement to be made available at a later date

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>		03/10/2022	24/10/2022	Yes	No
<a href="#">Other publications</a>	Secondary analysis	28/03/2024	02/04/2024	Yes	No
<a href="#">Other publications</a>	Young adults' change talk within brief motivational intervention in the emergency department and booster sessions is associated with a decrease in heavy drinking over 1 year	01/05/2024	03/05/2024	Yes	No
<a href="#">Other publications</a>	Developing a brief motivational intervention for young adults admitted with alcohol intoxication in the emergency department – Results from an iterative qualitative design	08/02/2021	30/01/2026	Yes	No