

An evaluation of the brief intervention for problem drinkers among inpatients

Submission date 05/04/2008	Recruitment status No longer recruiting	☐ Prospectively registered
		☐ Protocol
Registration date 01/05/2008	Overall study status Completed	☐ Statistical analysis plan
		☒ Results
Last Edited 04/06/2019	Condition category Mental and Behavioural Disorders	☐ Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
DOH93-TD-1050

Study information

Scientific Title

Effects of Brief Intervention for general hospital inpatients with unhealthy alcohol use in Taiwan: A randomised, controlled trial

Acronym

BI

Study objectives

Compared with control participants at post-intervention follow-ups, unhealthy drinkers who receive the screening and brief intervention will report 1) reduced alcohol consumption and 2) reduced alcohol-related problems and health care utilization.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Mackay Memorial Hospital Institutional Review Board. Date of approval: 07/02/2003 (ref: MMH-I-S-0174)

Study design

Randomised controlled trial.

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Alcohol abuse/ alcohol dependence.

Interventions

Patients receive at least one session of the 30-minute brief intervention treatment, according to the severity of drinking problems. For heavier drinkers and patients with alcohol use disorders (abuse/dependence), one booster session was provided either during admission or after discharge. For dependent drinkers who required provision of specified advice and referral to specialty care for alcohol assessment and treatment, interventionist could provide the third booster session. The brief intervention drew on the FRAMES model, whereby each of the six elements of feedback, responsibility, advice, motivation, empathy and self-efficacy were incorporated into the intervention. Advice was supplemented with a self-help booklet at the first session of brief intervention.

Control group: Patients in the control group received treatment as usual (that is, no intervention was given; no comment was made about the content of the baseline assessment). Psychiatrists were available by referral during admission. The physician in charge, however, may have advised the patient to modify his alcohol consumption or referred patient to psychiatrist, according to his normal practice.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Number of drinks per week at 4, 9 and 12 month.

Key secondary outcome(s)

1. Outcomes related to alcohol consumption (past 30 days):

1.1. Days abstinent

1.2. Number of heavy drinking episodes (≥ 5 drinks/ occasion)

1.3. Proportions of patients with risky drinking (>14 drinks per week) and heavier drinking (>20 drinks per week)

2. Alcohol-related outcomes:

2.1. Alcohol-related problems (problems at work/ school; problems with family and friends; legal consequences; and alcohol-related injuries)

2.2. Health care utilisation (number of days in hospitalisation and emergency department visits)

3. Other outcome measures:

3.1. Self-reported receipt of alcohol assistance by patients with alcohol dependence during 12 months. Assistance included outpatient specialty treatment, residential treatment, or mutual-help groups (for example, Alcoholics Anonymous)

Completion date

31/12/2005

Eligibility**Key inclusion criteria**

1. Men aged 18-65 admitted to medical or surgical wards in a medical centre in Taipei

2. Unhealthy alcohol users defined as men who currently (past 3 months) drink risky amounts, >168 g alcohol per week, or usually drank more than 32 g per occasion

3. Patients who provide written informed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Upper age limit

65 years

Sex

Male

Total final enrolment

616

Key exclusion criteria

1. Psychotic disorders or symptoms
2. Bipolar disorder
3. Major suicide risk
4. Serious medical illness
5. Currently being treated in psychiatric clinics/ or alcohol treatment program

Date of first enrolment

01/01/2004

Date of final enrolment

31/12/2005

Locations

Countries of recruitment

Taiwan

Study participating centre

Department of Psychiatry

Taipei County

Taiwan

25115

Sponsor information

Organisation

Department of Health (Taiwan)

ROR

<https://ror.org/0225asj53>

Funder(s)

Funder type

Government

Funder Name

Department of Health (Taiwan)

Results and Publications

Individual participant data (IPD) sharing plan**IPD sharing plan summary**

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/05/2011	04/06/2019	Yes	No