

Basic Alcohol Counseling Strategies

Low-risk Drinking Education

Hi, I'm Ed Boudreaux. I'm a clinical psychologist and behavioral health consultant; and I'm Archie Hamilton, a licensed professional counselor and G.1 Task Lead with atom Alliance. We'd like to welcome you to this enhanced bite-size learning. This presentation is the first in a three-part series on basic alcohol counseling strategies. Today we'll be focusing on educating patients on low-risk drinking guidelines.

This presentation will highlight the following performance elements: Number 1: Review of low-risk drinking guidelines: Reviewing low-risk drinking guidelines can help clarify the concept of low-risk drinking and provide specific measurable targets for the individual. Many people have no idea that such guidelines even exist, and this is an opportunity to help them understand how their drinking relates to the guidelines. Two: Non-judgmental educational approach. We will demonstrate a non-judgmental, educational approach that can help minimize resistance while remaining time sensitive and efficient to fit within the time constrained primary care visit. In the presentation we will show two case examples. Both start with the assumption that risky drinking already has been identified through clinical assessment or structured alcohol use screening. We will not review the screening procedures per se because this is covered in previous presentations. We'll begin the role-play now.

Doctor: Okay Mr. Hamilton, I just have a final thing I wanted to talk with you about. The screening information you completed before your visit suggests that you might be drinking above lowest drinking guidelines and I have just a little bit of information I wanted to share with you about this. Is that okay?

Patient: Yeah sure Doc.

D: Okay great, so this shouldn't take too long. I wanted to briefly review what experts are recommending as low-risk drinking guidelines. Have you ever heard of this low restricting guideline?

P: Well, no not really.

D: Okay, that's fine that many people haven't. So these guidelines are based on a ton of research studying alcohol use and bad outcomes like heart disease or drunk driving accidents or other health problems. I know you don't seem to have any serious medical problems related to your alcohol use right now, which is great, but we really want to keep it that way, so if you keep your drinking below these guidelines I'm about to share with you. It will help to reduce the chance that you develop problems in the future. So for a man who is 67 years old, the recommendation is to have no more than seven drinks a week and to drink no more than three drinks on a given occasion. So let's break it down to the two parts. Let's take the first one; so on average no more than seven drinks a week. What do you think? Does that sound like something you could consider?

P: Well sometimes I already do that but sometimes I don't, especially on big game weekends or holidays.

D: Okay yeah I get it. So sometimes it might be feasible but sometimes it might not be. So I think that the most important thing here is to recognize that it's a goal to keep in mind. The more often you go over the target, the more likely you are to eventually have problems. So let's take the second component. What about the maximum of three drinks on a given occasion?

P: It's the same thing might be tough on some days, but most days it wouldn't be a problem. Might be especially hard if we are at a party that lasts a while. Kind of hard to nurse a beer for hours, you know?

D: Yes I totally get that. So it might not be feasible to stick to these limits 100% of the time especially if it's a long party. So here's what I recommend. Try and pay closer attention to how much you're drinking and see if you can limit your drinking to these recommendations as much as possible. You might not be perfect but if you can do it most of the time, that would help you to move closer to the goal; and I'll check in with you again next time you come in. Does that sound good?

P: Sure yeah you got it.

D: Okay great. There's this one more small but important piece. So to stick within low-risk drinking guidelines, there are some times when you shouldn't drink at all. Most people know this but it's important to state it if you're going to be driving or operating machinery or doing anything that requires coordination or sustained attention you really shouldn't be drinking. Does that sound okay?

P: Yeah that sounds fun.

D: Alright, great so we'll check in next time on this.

P: Okay sounds good.

Okay this concludes our first role-play. We will now transition to our second role-play of a slightly different approach.

D: Alright we're almost finished Archie. We just have one more topic. You remember the questionnaire you filled out in the waiting room?

P: Yeah I do.

D: Okay good, so I review those questionnaires and all my patients before I come in to see them, and I noticed that you reported drinking alcohol above the level that is recommended for low-risk drinking on the screening form. In these situations I typically review low-risk drinking guidelines because many people don't even know they exist, and they don't know about the latest science related to how much alcohol intake is okay for you. So this only takes a few minutes is that okay?

P: Yeah sure I guess.

D: Okay great so the guidelines are pretty straightforward but I'd like to see what you feel about them and how realistic they are for you. So you probably know there's a lot of controversy over whether drinking alcohol can be good for you or bad for you or somewhere in between. So a lot

of research has gone into this area to create some guidelines to help people stay in a safe zone to avoid various kinds of bad outcomes, like you know liver disease or heart disease or drunk driving accidents. So it's kind of like when we take certain blood tests you know many of these tests won't tell me if you have a certain disease, they simply tell me if you have risk for developing a disease so we can keep an eye on it; or you know so then we know that we might need more testing. So a positive screen on the screeners just tells me that I simply need to ask you a few more questions. So let's see the first can you tell me what kind of alcohol you usually drink?

P: Well, Doc, I'm a beer guy. Sometimes I'll drink wine if we're at a nice restaurant and sometimes mixed drinks at a party but put mostly beer.

D: Alright a beer drinker. So first let's review what a standard drink is in beer terms. I know this may be obvious but sometimes it's not so I like to make sure we're all on the same page a standard beer is one 12 ounce bottle or can of beer that has five percent alcohol content or less. Is that the kind of beer you usually drink?

P: Kind of. I like craft beer stuff so sometimes they come in bigger bottles sometimes they have a real kick, especially those double IPAs.

D: Okay so that's good to know. I'm glad I checked in with you. So it's important to keep that in mind when we're talking about these guidelines. In some cases a single beer that you drink might actually count as more than one standard drink. The guidelines suggest that on average you should try to drink no more than seven standard drinks a week so no more than seven 12 ounce beers of around five percent alcohol content. What do you think? Does that sound realistic?

P: Honestly Doc, I'm not sure. I mean that would be tough to stick to all the time. Many weeks I'll have two or three beers on Thursdays through Sunday, and a lot of those are IPAs. So I could go over especially if it's at a party or you know dinner with friends.

D: Okay I get it. So sometimes it might be feasible and other times it might not be. I think the most important thing here is to recognize that it's a goal to keep in mind, to help check your drinking levels. The more often you drink less than seven drinks a week, the less likely you are to eventually have problems. So try to keep it below that line. What about the max drink, maximum of three drinks on a given occasion. What do you think about that one?

P: Yeah I guess typically I don't drink more than three on an occasion during a typical week; but like I said Doc, I do if I'm hanging out with my friends or a party or on vacation. So I guess I go over that limit pretty regularly, but of course some days, many days, I don't drink anything at all.

D: Okay so it might be hard to stick to everyday. Here's an experiment I sometimes recommend to people in these situations. So try to stick to these limits for four weeks and see how it feels. Many people are surprised that it's not as hard as they thought. With just a little bit of attention, they can do it; and many people actually finally they feel better when they drink less. So if you do this and you find that's true and you want to stick with it, then keep sticking with drinking below the guidelines. If it's not for you because you really don't find that it's that much of a

benefit for you. Maybe you can try and see if you can get your drinking a little closer to the limits more frequently. So what do you think about that?

P: Sure I'd be willing to try that.

D: Okay great, so I'll just check in on this next time we see each other. Sound good?

P: Yeah that sounds fine.

D: Alright thanks!

P: Thank you.

Alright this is the end of the role play. These role-plays show two examples of using a low-risk drinking guideline to educate the patient because we didn't ask a lot of questions about their use and simply started with the lowest drinking and went fairly quickly.

This strategy might be particularly good for patients who are generally healthy, not our already experiencing alcohol-related problems and who do not report very high rates of alcohol use.

Thank you very much.