

Putting Prevention into Practice

An Evidence-Based Approach

Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse

KAREN C. LEE, MD, MPH, *Medical Officer, U.S. Preventive Services Task Force Program, Agency for Healthcare Research and Quality*

ANH PHAM, MD, *General Preventive Medicine Residency, Uniformed Services University of the Health Sciences*

► See related U.S. Preventive Services Task Force Recommendation Statement at <http://www.aafp.org/afp/2014/0615/od1.html>.

CME This clinical content conforms to AAFP criteria for continuing medical education (CME). See CME Quiz Questions on page 942.

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The case study and answers to the following questions are based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), an independent panel of experts in primary care and prevention that systematically reviews the evidence of effectiveness and develops recommendations for clinical preventive services. More detailed information on this subject is available in the USPSTF Recommendation Statement and the evidence report on the USPSTF website (<http://www.uspreventiveservicestaskforce.org>). The practice recommendations in this activity are available at <http://www.uspreventiveservicestaskforce.org/uspstf/uspdrin.htm>.

A collection of Putting Prevention into Practice quizzes published in *AFP* is available at <http://www.aafp.org/afp/ppip>.

Case Study

A 22-year-old man presents for a routine physical examination. While you are taking his history, he states that he “goes out drinking” every weekend with his friends.

Case Study Questions

1. According to the U.S. Preventive Services Task Force (USPSTF), which of the following tools are considered instruments of choice for screening for alcohol misuse in the primary care setting?

- A. The Alcohol Use Disorders Identification Test (AUDIT).
- B. The abbreviated AUDIT-Consumption (AUDIT-C).
- C. Single-question screening.
- D. The Cut-Down, Annoyed, Guilty, and Eye-Opener (CAGE) questionnaire.

2. Based on recommendations from the USPSTF, which one of the following statements about screening for alcohol misuse is correct?

- A. There is high certainty that screening for alcohol misuse has substantial net benefit.
- B. Adolescents should be screened for alcohol misuse.
- C. Adults should be screened for alcohol misuse and, if they engage in risky or hazardous drinking, they should receive brief behavioral counseling interventions.
- D. The recommendations for screening apply to persons actively seeking treatment for alcohol misuse.

3. After screening this patient, you determine that he engages in hazardous drinking. According to the USPSTF, which level of behavioral counseling has the best evidence of effectiveness and should be recommended for this patient?

- A. Very brief single contact (five minutes or less).
- B. Brief single contact (six to 15 minutes).
- C. Brief multicontact (each contact is six to 15 minutes).
- D. Extended multicontact (each contact is longer than 15 minutes).

Answers appear on the following page.

