## Is Alcohol Putting Your Health at Risk?

Drinking too much can harm your physical and mental health. Below are health risks associated with alcohol when used above the recommended daily/weekly limits.

## Heavy drinking can put you at risk for the following:

#### **Cancer risk**

- Breast
- Mouth
- ThroatLiver
- Colon

#### **Risk for chronic diseases**

- High blood pressure
- Heart disease
- Stroke
- Liver disease
- Painful nerves (numbness and tingling in hands and feet)

## Work and family life

- Work: increased absence, accidents, lower performance, unemployment
- Family: marital conflict, infidelity, higher risk of emotional issues in children, financial strain

# Sexual and reproductive health issues

- Male: impaired sexual performance
- Female: infertility, risk of birth defects



- Blackouts
- Dementia

Legal troubles

Poor school or work
 performance

• Impaired driving

Car accidents

• Loss of custody of children

## Worsening mental health issues Anxiety

- Depression
- Insomnia or sleep issues
- Anger & violence
- Suicide risk

## Increased stomach and digestive issues

- Stomach problems
- Heartburn
  - Vitamin deficiencies
  - Bleeding
  - Ulcers
  - Malnutrition

## Feeling sick or having infections

- Frequent colds
  - Lower ability to fight off infections like bronchitis or penuemonia



## What counts as one drink?



\*ABV = Alcohol by Volume





## **Discussing Recommended Alcohol Limits with Veterans**





## Step 2. Offer a brief intervention and/or treatment based on AUDIT-C score

Provide at least one 5-minute brief intervention for Veterans with moderate-high risk drinking (AUDIT-C 4-7)<sup>3-5</sup>

RECOMMENDATIONS	EXAMPLE LANGUAGE
<ul> <li>Raise the subject</li> <li>Ask Veteran about thoughts around alcohol use</li> <li>Ask permission to talk about alcohol use; and if, permission is granted: <ul> <li>Share that you are concerned about drinking above the recommended limits.</li> <li>Reflect the Veteran's responses that are consistent with changing drinking behavior.</li> </ul> </li> </ul>	"As your provider, I want to make sure you have all of the information you need to make decisions related to your wellbeing. What have you already heard about the effects of alcohol?" "What do you know about how alcohol can impact your health?" "Would it be okay if I tell you about some of the other risks we know about? Drinking above the recommended limits can have both short- and long-term effects on our physical and mental health."
<ul> <li>Express concern and provide feedback</li> <li>Identify links between alcohol use and Veteran's co-occurring health conditions, if present (e.g., diabetes, mood disorders, insomnia, sexual dysfunction).</li> <li>Educate on safe limits of alcohol consumption and provide clear advice to cut down.</li> </ul>	"I am concerned about the amount you are drinking and that it is putting you at risk of or going to lead to you [developing or worsening illness/ symptoms or getting injured]. You can reduce this risk/improve your [health/ symptoms/condition] by cutting down what you drink. But only you can decide if that is something you want to do." [Personal responsibility]
<ul> <li>Enhance motivation</li> <li>Ask the Veteran about what he/she thinks about the information you just shared.</li> <li>Enhance motivation to change and decrease or abstain from alcohol use.</li> <li>Reflect the Veteran's responses that are consistent with changing drinking behavior.</li> </ul>	"What does this mean for you? What are your next steps?" "What do you see as the possible benefits of cutting down?" "What would be a reason to you that change would be worth considering?" If a Veteran expresses ambivalence, assure them that you can help when they are ready.
<b>Negotiate a plan</b> Set a feasible drinking goal and arrive at a shared decision. Encourage specificity (e.g., drinks per day).	"What changes are you willing to make to reach this goal?"
Offer pharmacotherapy to patients with AUDIT-C $\geq$ 8 or $\geq$ 6 and current alcohol use disorder diagnosis	
<b>Refer to treatment</b> Advise treatment with pharmacotherapy (e.g., naltrexone, topiramate) or suggest referral, if appropriate.	"Veterans sometimes struggle to quit or reduce their drinking. There are several medications and therapies that may help you. Would it be okay if I share more about these treatments?"

#### AUDIT-C is found in the mental health assistant in CPRS; 15-30 min brief intervention CPT code: 99408

1. Willenbring ML, Massey SH, Gardner MB. Helping patients who drink too much: an evidence-based guide for primary care clinicians. Am Fam Physician. 2009;80(1):44-50.

2. Rubinsky AD, Kivlahan DR, Volk RJ, Maynard C, Bradley KA. Estimating risk of alcohol dependence using alcohol screening scores. Drug Alcohol Depend. 2010;108(1-2):29-36.

- 3. Kaner EF, Beyer FR, Muirhead C, et al. Effectiveness of brief alcohol interventions in primary care populations. Cochrane Database Syst Rev. 2018;2(2):Cd004148.
- 4. Veterans Health Administration, Department of Defense. VA/DoD practice guideline for the management of substance use disorders. Version 3.0. Washington (DC): The Management of Substance Use Disorders Working Group; 2009 January.
- 5. Veterans Health Administration, Department of Defense. VA/DoD practice guideline for the management of substance use disorders. Version 4.0. Washington (DC): The Management of Substance Use Disorders Working Group; 2021 August.