

Screening for Alcohol Problems in VA Primary Care Clinics

VISN 1 MIRECC researchers have documented a low yield from routine annual alcoholism screening in VA primary care clinics. In a survey of records from over 15,000 VA medical outpatients, only 1.7% of those screened were subsequently found to have a new previously undetected alcoholism diagnosis. Researchers excluded 9% of the sample because these medical patients already had a VA chart diagnosis of alcoholism. Taken together, these numbers suggest that around 11% of VA medical patients have current alcoholism. On the positive side, nearly three-quarters of all patients had a chart-documented alcohol screening, indicating generally high compliance by clinicians with this relatively newly instituted quality measure. Alcoholism treatment experts have placed heavy emphasis on alcoholism screening in primary care because current alcoholism and harmful drinking are estimated to be found in nearly 20% of primary care patients. Of this group, most are not currently receiving specialty treatment for alcoholism. Hence, primary care alcoholism screening appears to be an ideal way to make alcoholism treatment more available. Despite these considerations, the current VA study found comparatively few **new** cases and the estimated cost of screening and evaluation was \$428 for each new detected case. Notably, this study suggests that VA clinicians are doing a good ongoing job at detecting alcoholism because the great majority of alcoholic patients had already been diagnosed **prior** to the screening. The researchers suggest that alcoholism screening in the VA system may not be needed on an annual basis or may be targeted to high risk groups. MIRECC researchers Mayur Desai and Robert Rosenheck were joined by VA researcher Thomas Craig in conducting this study.