

To the Editors:

Detection and management of alcohol misuse by general practitioners

I read the article on “Detection and management of alcohol misuse by general practitioners” [1] with concern. The impact of socially unacceptable behavioural patterns on family health and well being following substance misuse, particularly alcohol, is immense, and could impair happiness [2]. Another important aspect is that many people are reluctant to seek help for alcohol misuse as a result of the stigma attached to it. A recent study done in the UK has shown that, among the mentally ill, it was the clients with psychosis or substance dependence who were most likely to report feelings and experiences of stigma [3]. Management of these patients in psychiatric in-patient and out-patient settings may add to the stigma. A well trained General Practitioner, accepted by the local community would, therefore, be an ideal person to tackle this problem. It has, in fact, been demonstrated that “community based alcohol treatment programmes” improved outcomes of patients with alcohol related problems in certain parts of India [2].

Substance misuse is co-morbid with a variety of psychiatric disorders, and can be associated with a poor outcome for both substance misuse and psychiatric disorder. Improving the management of co-morbidity is regarded as a priority in the National Health Service in the UK [4]. Studies have demonstrated that even though drug and alcohol services provided therapeutic interventions to a significant number of patients, there was still a large population of patients with co-morbidity whose needs were unidentified or unmet. It has been recommended that the models of collaboration between psychotherapy services and general practitioners should be developed, in addition to those with general adult psychiatry.

All over the world there is a trend towards involving general practitioners and primary care physicians in community mental health care programmes, including those for substance misuse. The staff of community mental health teams need to be trained in the assessment of drug and alcohol related problems and use of appropriate evaluation tools. They should also receive an enhanced training in motivational techniques in order to improve the management of patients with substance misuse and to achieve harm minimisation goals [5]. The findings of Gurugama and colleagues highlight the urgency of these measures in our country [1].

References

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KALA Kuruppuarachchi, Professor of Psychiatry, Faculty of Medicine, University of Kelaniya, Ragama, Sri Lanka. Tel: +94 11 2958219. (Competing interests: none declared). Received 6 April 2004 and accepted 7 May 2004.