

Evaluation of a drug & alcohol primary health care team

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Summary

As part of an ongoing assessment of the physical health needs of injecting drug users during 2005, all 167 general practices in the Lambeth, Southwark & Lewisham (LSL) area were sent a questionnaire. The results indicate that the majority of IDUs visited the surgery because of DVT, pregnancy, chest infections or skin ulceration, and the GPs themselves opportunistically identified more serious problems such as BBV's and Liver problems. Interestingly we found significant variation in the rate of opportunistic detection between PCTs.

Many practices indicated that health promotion activity would benefit their IDU clients, in particular issues related to smoking and drinking, as well as dental health, diet and exercise needed to be addressed. In general it was felt that a nurse led resource integrated into existing services, such as that offered by the Drug and Alcohol Health Care Team, would be of greatest benefit to IDU clients.

Methods

Questionnaires were sent to all 167 GP practices in the three boroughs area. No follow-up was undertaken.

Results

A total of 71 practices returned questionnaires (42.5% response rate).

Service users and service utilisation

Levels of substance misuse were high, with over 70% of all practices reporting five or more crack, IDU or combination patients. Only one practice indicated that they had no IDU or crack users registered. Distribution of users was even across the three boroughs; however Lewisham does appear to have significantly lower levels of crack users in contact with primary care services than Lambeth or Southwark.

Table 1.0 Proportion of practices with 5 or more drug users

	Lambeth	Southwark	Lewisham
IDU	78%	69%	54%
crack	78%	83%	40%**
IDU and crack users	81%	63%	47%

**p<0.01

Practices reported moderate levels of service use by drug users, with most practices indicating that they saw between one and five users per month. However, practices in Lambeth were more likely than Lewisham or Southwark to see ten or more patients per month.

Health problems

Respondents were asked to indicate which physical health problems patients commonly presented with, and which conditions were usually identified by the doctor. Overall our list of physical health problems was acceptable to the GPs, with 100% response to all items.

Table 2.0 Physical Health Problems

CONDITION	Patient Presents	Dr identifies
Mental Health Problems	75%	75%
Deep Vein Thrombosis	64%	39%**
Skin Abscesses / Ulceration	89%	44%**

Self Neglect	42%	80%**
Liver Problems	31%	79%**
HIV	31%	76%**
HBV (Hepatitis B)	36%	81%**
HCV (Hepatitis C)	36%	84%**
TB (Tuberculosis)	25%	67%**
Pregnancy	74%	43%**
STI (Sexually Transmitted Infection)	64%	56%*
Nutritional Problems	46%	71%**
Chest Infection	74%	60%*

*p<0.05, **p<0.01

GPs opportunistically identify most of the problems that IDU and crack using patients present with, however there are distinct conditions that are usually identified by the patients themselves, these are: DVT, pregnancy, chest infections, and skin ulceration.

For certain conditions (in particular communicable disease) there were distinct and significant differences between boroughs in the proportion of practices that indicated the GP was likely to identify, or that the patient presented.

Table 3.0a Proportion of practices indicating “Dr Identifies”

	Lambeth	Southwark	Lewisham
HIV	78%	52%	92%**
HBV	74%	67%	100%**
HCV	87%	67%	96%*
TB	74%	43%	74%*

*p<0.05, **p<0.01

Table 3.0b Proportion of practices indicating “Patient presents”

	Lambeth	Southwark	Lewisham
STI	74%	43%	74%*
Nutritional Problems	56%	57%	25%*

*p<0.05, **p<0.01

79% of practices indicated that patients were willing to disclose their health needs. There were no significant differences between the three boroughs on this item.

Practices were asked to list any other physical health needs that were not addressed by patients. Responses to this item were low, with 31 practices (44%) offering a total of 33 suggestions.

Participants indicated a range of physical health needs that were not currently addressed by their patients. These included: alcohol related problems (27%), dental problems (18%), smoking related issues (12%), asthma (9%) and exercise (6%). In addition some practices suggested that patients housing needs might be related to their physical health problems and that these needs should be considered.

69% of practices offered suggestions as what sort of health care services might be of benefit to this patient group. Over 1/3 thought that some sort of integrated service would be appropriate with over half of these indicating that a nurse led programme would be most beneficial. Other suggestions included Sexual Health Services (13%), Alcohol Detoxification (13%), Dual Diagnosis services (10%) and Counselling (10%).

Most practices indicated that they would be willing to help contact patients to further explore their physical health needs (64%). However they were not interested in helping to develop a common assessment tool (35%) but almost every practice would be interested in using such a tool (80%).

In addition to the GP survey, data was also collected from DTTO clients. In total the records of 29 DTTO clients were examined, 72% were male. The age range of clients ranged from 23 – 53 years, with an average age of 34.7 years.

The majority of clients (41%) lived in public rented accommodation (council), 14% had private rented, 14% owner / occupied, 10% NFA and 7% were resident in hostel accommodation. 17% of all clients lived alone. All those recorded as NFA lived with friends. Of those described as owning accommodation, two thirds were in fact living with their parents.

Alcohol and Illicit drug use

Alcohol, Cannabis, Heroin and Crack Cocaine were all used by DTTO clients.

Alcohol consumption: Half of the sample had consumed alcohol on at least one occasion in the preceding month, with 60% of those drinking every day. Clients spent £2 - £20 per drinking day on alcohol (average £6.10), and £8 - £240 over the month (average £155.90).

Cannabis: One in three clients had smoked cannabis during the last 30 days, 50% of those smoked cannabis every day, 50% also admitted to smoking three or more joints per day. Clients spent £2 - £10 per day (average £6.90) and £16 - £300 per month (average £155.90).

Heroin: 86% of clients had used heroin in the last 30 days, 56% of these had used on at least one occasion every day. Most clients who had taken heroin did so on a single occasion on each day that they used, however 30% used heroin twice or more per day. Clients spent £5 - £70 per day on heroin (average £ 21.70) and £30 - £2100 per month (average £550.30). Most clients either injected (50%) or smoked (46%) heroin. A small number took it orally (4%).

Crack Cocaine: 76% of DTTO clients had used crack on one or more occasion in the last 30 days, 27% of those had taken it every day. 90% of clients used crack at least once per week. 70% of those who took crack had two or more hits per occasion. Clients spent £5 - £100 per day on crack (average £25.00), and £10 - £3000 per month (average £500.00). Most clients smoked their crack (86%), with the remainder injecting.

Cocaine: Only one client was recorded as using cocaine.

Amphetamines: Only one client was recorded as using amphetamines.

Ecstasy: Only one client was recorded as using ecstasy.

Solvents: There was no record of solvent use for any client.

LSD: There was no record of LSD use for any client.

Benzodiazepines: Two clients were recorded as using benzodiazepines.

During the preceding month DTTO clients spent £0 - £5100 on alcohol and illicit substances (average £906.90)

Injecting behaviour and related problems

54% of clients inject drugs, with 85% of these admitting to having injected in the last week. One in five clients used high risk injection sites and 27% shared needles or other paraphernalia. Three quarters of injectors used needle exchange services, and 100% had received harm minimisation advice.

70% of DTTO clients had experienced injecting related problems in the past, 15% in the recent past. 15% of clients were described as having urgent injection related problems.

The most common injection related problems were abscess (40%), DVT (20%) and Infection (13%).

Sexual Health

70% of clients had a partner and 54% were currently sexually active. Of these, however, only 25% used contraception (all sexually active female clients indicated that they used some form of contraception). A third of all clients had contracted a STI at some point.

80% of female DTTO clients had had a cervical smear test, and 60% had undergone breast examination.

57% of male clients had had a testicular examination.

Mental Health

8% of clients had a recent history of self harm, and a further 8% had taken a deliberate overdose. In total 16% of clients had made some sort of suicide attempt.

12.5% of clients had a familial history of psychiatric illness. Two thirds of clients who had deliberately overdosed or made some other suicide attempt had a family history of psychiatric illness.

Physical Health

The DTTO notes examined had no record of Blood Pressure, Pulse, Weight, Blood Methadone or Blood Alcohol levels.

The following table illustrates the proportion of DTTO clients who had reported a specific medical condition, and other general health problems:

Asthma	35%

Bronchitis	13%
Neurological problems	9%
Cancer	9%
Heart problems	5%
Liver problems	4%
Sleep problems	60%
Dental problems	50%
Hospital admission	50%
Allergies	33%
Poor Diet	20%

Half of the clients reported that they had undergone surgery, and of these a quarter was for hernia operations.

Of those clients that indicated an allergy, 70% reported that they were allergic to penicillin.

Blood Bourne Virus's

70% of clients had been tested for HBV, 17% within the last 12 months. Of those tested, 67% had been vaccinated, 85% of vaccinations were before 2003. 65% had been tested for HCV, 18% within the last 12 months. 64% had been tested for HIV, 15% within the last 12 months.

Contact with external services

10% of clients were in contact with social services, 7% with hostels / day centres and 3% with community mental health services.

DAHCT Client Questionnaire – survey results

Demographics

Between March 2005 and April 2006, 107 clients, from 8 centres, were assessed using the DAHCT client questionnaire.

Location

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Stockwell Project	26	24.3	24.3	24.3
	Evolve	27	25.2	25.2	49.5
	Quantum	10	9.3	9.3	58.9
	Equinox	3	2.8	2.8	61.7
	Kappa	9	8.4	8.4	70.1
	BCDAT	7	6.5	6.5	76.6
	Pavillion	11	10.3	10.3	86.9
	ARP	14	13.1	13.1	100.0
	Total	107	100.0	100.0	

Two thirds of the clients were male (N=71). The age of clients ranged from 22 – 73 years, with an average age of 38.

Ethnicity

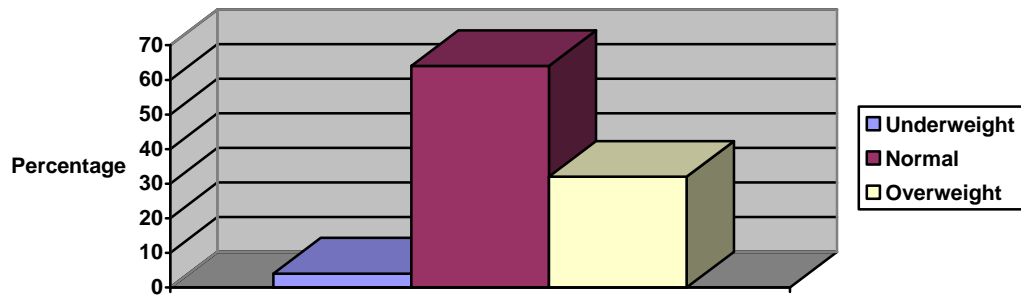
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	White Italian	6	5.6	5.8	5.8
	White British	52	48.6	50.0	55.8
	Cypriot	1	.9	1.0	56.7
	Portugese	11	10.3	10.6	67.3
	Black British	19	17.8	18.3	85.6
	Russian	1	.9	1.0	86.5
	Black Caribbean	4	3.7	3.8	90.4
	White European	6	5.6	5.8	96.2
	African	4	3.7	3.8	100.0
	Total	104	97.2	100.0	
Missing	System	3	2.8		
Total		107	100.0		

Thirty clients (28%) described themselves as homeless.

The majority of clients were registered with a GP, with just 13 (12%) not registered.

Body Mass Index

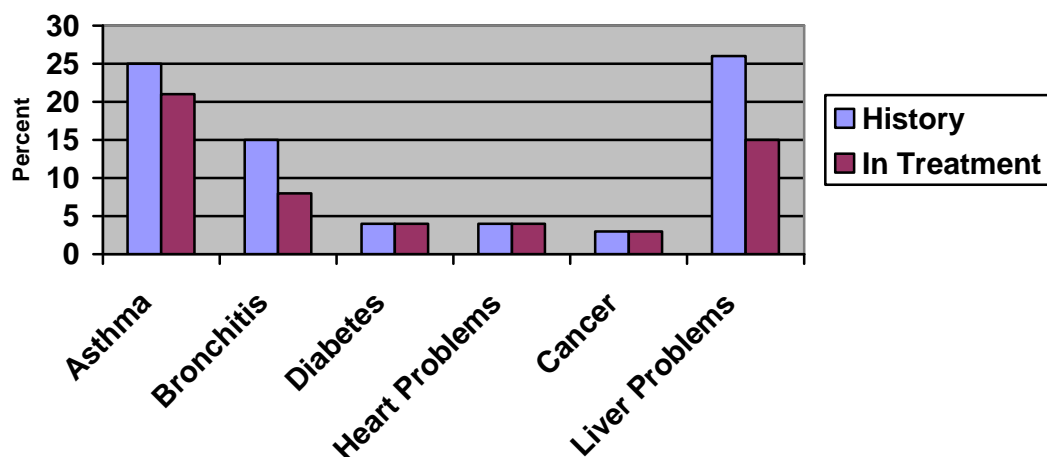
Almost 1/3 of clients were overweight.



		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Normal	64	59.8	64.0	64.0
	Overweight	32	29.9	32.0	96.0
	Underweight	4	3.7	4.0	100.0
	Total	100	93.5	100.0	
Missing	System	7	6.5		
Total		107	100.0		

Physical Health

Almost a quarter of all clients had a history of Asthma or Liver Problems. Clients with Bronchial or Liver problems were less likely to have sought treatment from their GP.



Dental Health

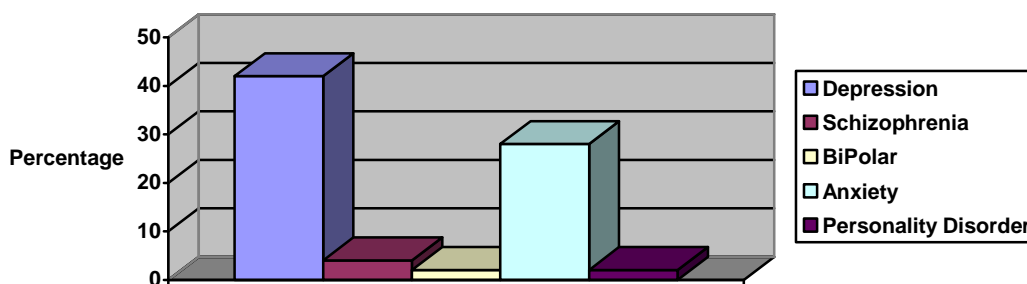
One third of all clients had had problems with their teeth. Almost half (45%) were registered with a dentist.

Teeth * Dent_Reg Crosstabulation

			Dent_Reg		Total
			No	Yes	
Teeth	No	Count	12	33	45
		% within Teeth	26.7%	73.3%	100.0%
	Yes	Count	20	14	34
		% within Teeth	58.8%	41.2%	100.0%
Total		Count	32	47	79
		% within Teeth	40.5%	59.5%	100.0%

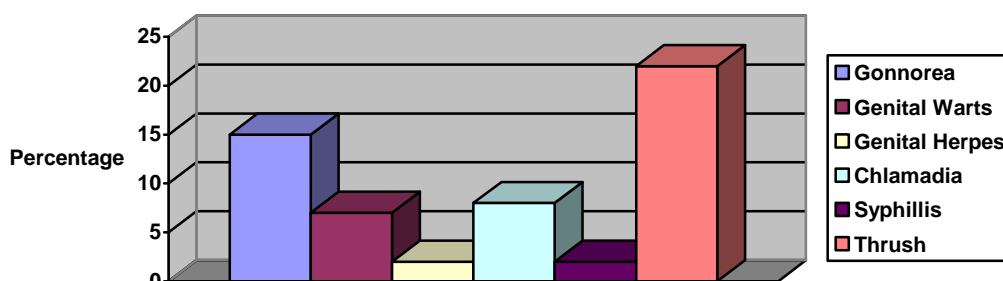
Mental Health

Depression and Anxiety were the most commonly reported psychological problems.

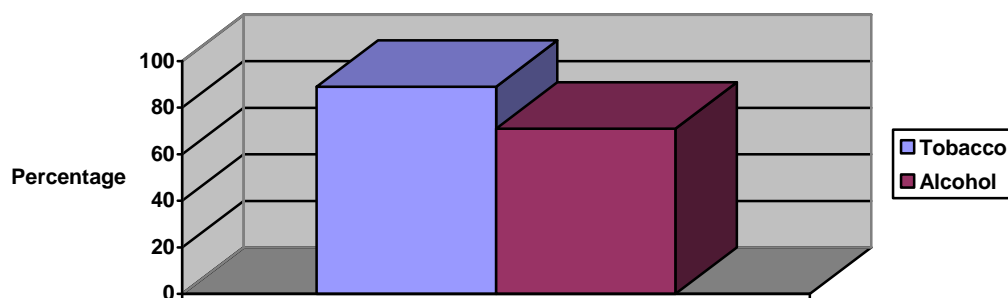


Sexual Health

Almost two thirds of clients were aware of GUM clinic services.



Alcohol and Tobacco use



The majority of clients smoke (89%) and consume alcohol (71%).*

Current smokers (n=71) consumed between 2 and 50 cigarettes per day, with an average of 17 cigarettes per day.

Quit * Cessation Crosstabulation

			Cessation		Total
			No	Yes	
Quit	No	Count	15	13	28
		% within Quit	53.6%	46.4%	100.0%
	Yes	Count	20	23	43
		% within Quit	46.5%	53.5%	100.0%
Total	Count	35	36	71	
	% within Quit	49.3%	50.7%	100.0%	

Sixty percent of current smokers wanted to quit, of these about ½ were aware of local smoking cessation programmes.

Drinkers (n=58) consumed between 2 and 50 units per day, with an average consumption of 13 units per day.

Gender * Hazardous Crosstabulation

			Hazardous		Total
			No	Yes	
Gender	Male	Count	14	21	35
		% within Gender	40.0%	60.0%	100.0%
	Female	Count	7	11	18
		% within Gender	38.9%	61.1%	100.0%
Total	Count	21	32	53	
	% within Gender	39.6%	60.4%	100.0%	

* Data on drug usage was collected from a total of 83 clients.

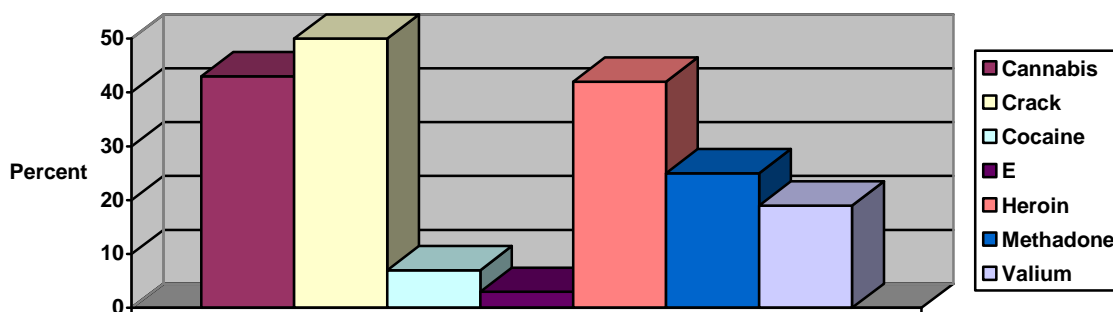
Sixty percent of all Male and all Female clients were hazardous drinkers.

Hazardous * Alc_Prob Crosstabulation

			Alc_Prob		Total
			No	Yes	
Hazardous	No	Count	19	2	21
		% within Hazardous	90.5%	9.5%	100.0%
	Yes	Count	12	18	30
		% within Hazardous	40.0%	60.0%	100.0%
Total	Count	31	20	51	
	% within Hazardous	60.8%	39.2%	100.0%	

Sixty percent of hazardous drinkers regarded themselves as having an alcohol problem.

Drug Use in the previous month



Seventy percent of clients smoked tobacco. Half of all clients used crack cocaine.

More than half of all clients (54%) admitted to having injected drugs. Of these, three quarters had shared injecting equipment.

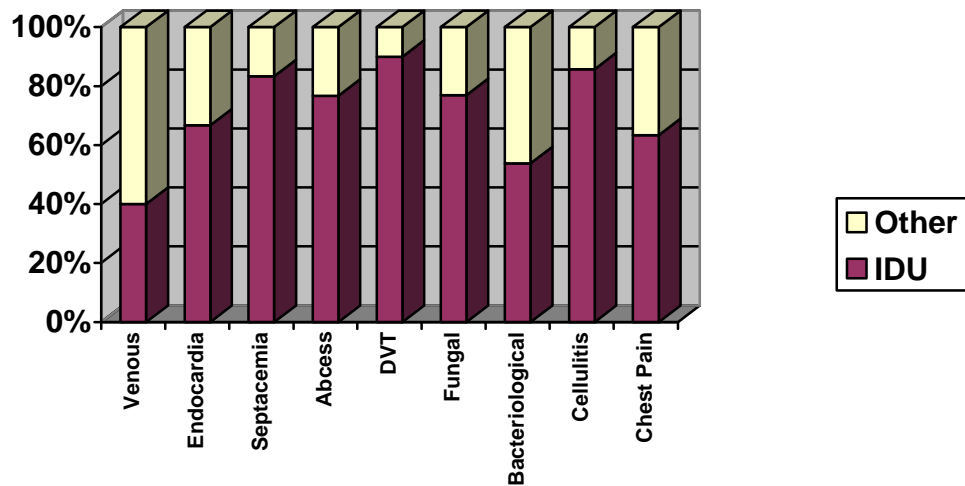
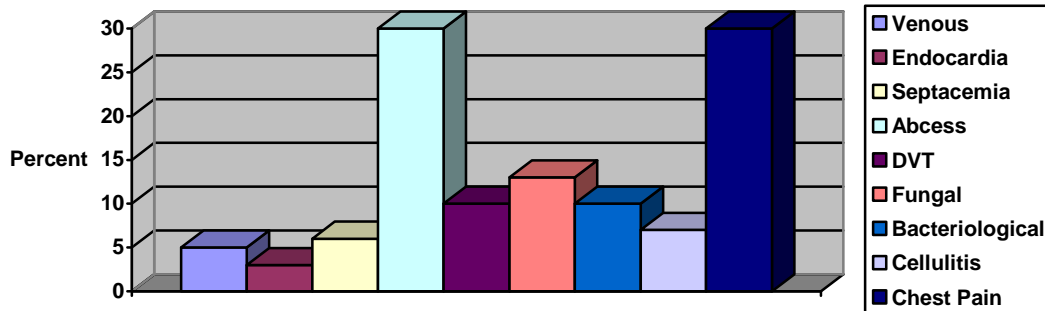
Two thirds of clients were aware of needle exchange services.

Almost every client who indicated that they had injected drugs was aware of a needle exchange service they had access to.

IDU * NX_aware Crosstabulation

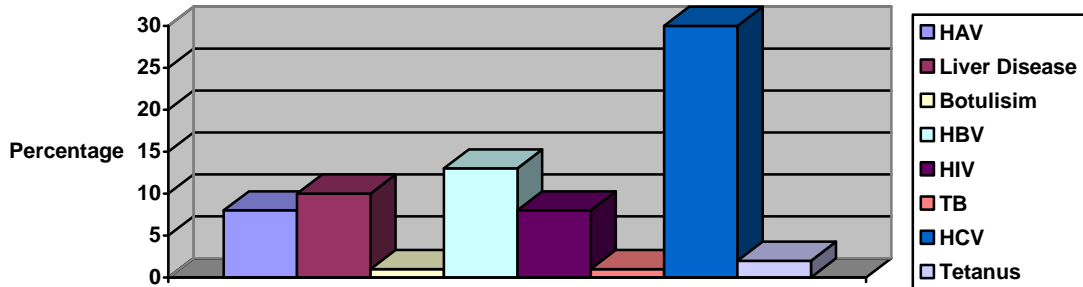
			NX_aware		Total
			No	Yes	
IDU	No	Count	12	12	24
		% within IDU	50.0%	50.0%	100.0%
	Yes	Count	2	54	56
		% within IDU	3.6%	96.4%	100.0%
Total		Count	14	66	80
		% within IDU	17.5%	82.5%	100.0%

Drug related health conditions



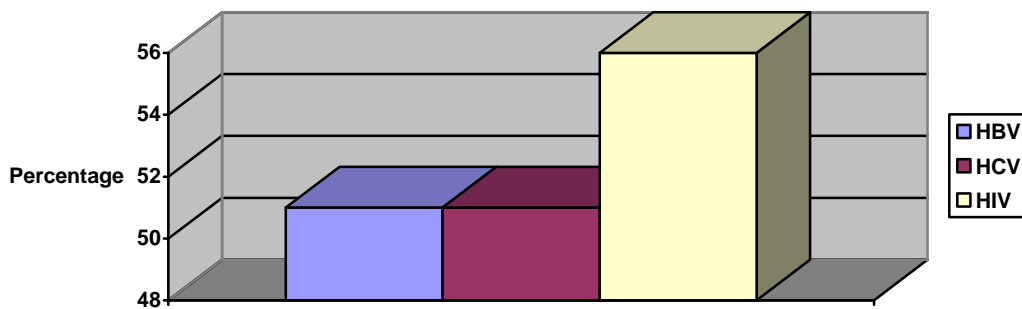
Infections

Almost one third of all clients had been diagnosed as being Hepatitis C positive.



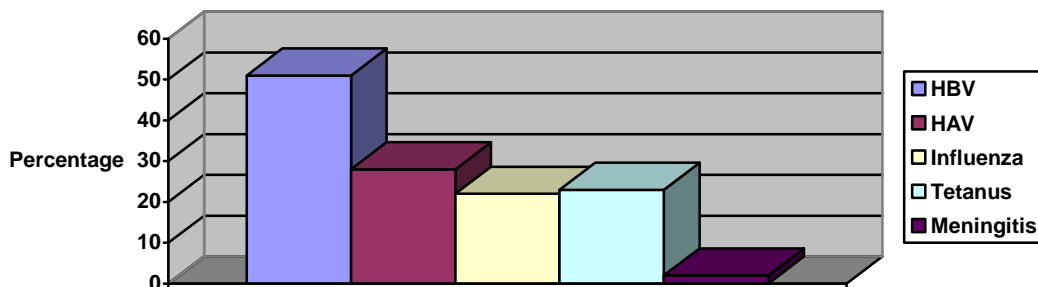
BBV testing requested

Over half of all clients requested testing for Hepatitis B and C and HIV,



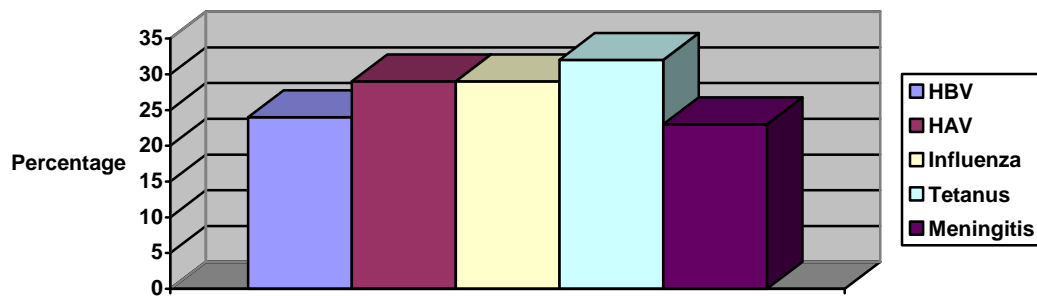
Vaccinations - reported

Hepatitis B vaccination was most frequent among clients.



Vaccinations – wanted

About a quarter of all clients requested vaccination.

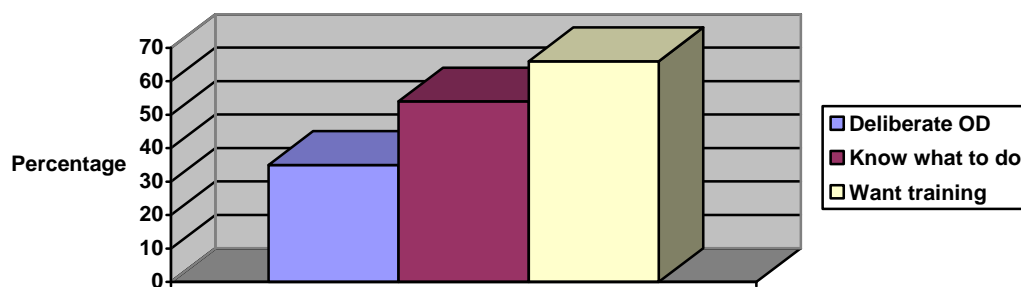


Overdose

One third of clients had deliberately taken an overdose at some point.

Half of all clients stated that they knew what to do with someone who had overdosed.

Two thirds of clients wanted further training in what to do with someone who has overdosed.



**DRUG & ALCOHOL HEALTH CARE TEAM
CLIENT HEALTH NEEDS ASSESSMENT**

Date:	Location:	Assessor:
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Name:
Address:
Homeless: Yes <input type="checkbox"/> No <input type="checkbox"/>
Age:
Gender:
Ethnicity:
Language:

D.O.B: ____/____/____
GP:
Height:
Weight:
BMI:

Has the client ever been diagnosed with any of the following health conditions and if so are they currently receiving treatment?

		Receiving GP treatment	Last seen by GP
Asthma	θ	Yes / No
Bronchitis	θ	Yes / No
Diabetes	θ	Yes / No
Heart problems	θ	Yes / No
Cancer	θ	Yes / No
Liver problems	θ	Yes / No
Other	θ	Yes / No

Does the client currently or have they ever experienced any of the following drug related health conditions?

(circle current health conditions)

Venous ulcers <input type="checkbox"/>	Endocarditis <input type="checkbox"/>	Septicaemia <input type="checkbox"/>	Abscesses <input type="checkbox"/>
DVT <input type="checkbox"/>	Fungal skin infection <input type="checkbox"/>	Bacterial skin infection <input type="checkbox"/>	Cellulitis <input type="checkbox"/>
Chest pain <input type="checkbox"/>	Other <input type="checkbox"/>	

Has the client ever tested positive or been previously diagnosed with any of the following?

Hepatitis A <input type="checkbox"/>	Liver disease <input type="checkbox"/>	Botulism <input type="checkbox"/>
Hepatitis B <input type="checkbox"/>	HIV <input type="checkbox"/>	Tuberculosis <input type="checkbox"/>
Hepatitis C <input type="checkbox"/>	Tetanus <input type="checkbox"/>	

Does the client wish to be tested for any of the following blood borne virus's?

Hepatitis B <input type="checkbox"/>	Hepatitis C <input type="checkbox"/>	HIV <input type="checkbox"/>
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Has the client ever received the following vaccinations and if so when did when did they last receive them?

Hepatitis B 1st 2nd 3rd Booster:

Hepatitis A 1st 2nd

Influenza: Tetanus: Meningitis:

If not having received the above vaccinations, does the client wish to receive them?

Hepatitis B: Yes No Hepatitis A: Yes No Meningitis: Yes No
 Influenza: Yes No Tetanus: Yes No

Does the client currently or have they ever suffered from any of the mental illnesses listed below?

Depression Schizophrenia Bipolar disorder Anxiety Personality disorder
 Other (list)

Is the client concerned about the state of their teeth?

Yes No

Is the client currently registered with a dentist?

Yes No

When did the client last have a dental check up?

< 3 yrs ago > 3 yrs ago

Does the client smoke?

Yes No

If yes, what do you smoke? How much do you smoke?per day

If yes, does the client wish to give up?

Yes No

Is the client aware of any smoking cessation services? Yes No

Does the client drink alcohol?

Yes No

If yes, what does the client drink?

.....

What is the most the client will drink in any one day?

.....units per day

How long has the client been drinking?

.....months / years

Does the client believe their drinking is a problem? Yes No

Which of the following illicit substances did the client use in the last month?

	Quantity (£)	Frequency	Route
<input type="checkbox"/> Cannabis
<input type="checkbox"/> Crack
<input type="checkbox"/> Cocaine
<input type="checkbox"/> Ecstasy
<input type="checkbox"/> Heroin
<input type="checkbox"/> Methadone
<input type="checkbox"/> Valium
<input type="checkbox"/> (Other)

Has the client ever accidentally or deliberately taken an overdose?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Does the client know what to do if someone takes an overdose?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Would the client be interested in receiving overdose training?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Has the client ever injected?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Has the client ever shared any drug using paraphernalia?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes,				
What?			
Why?			
Is the client aware of a needle exchange service they have access to?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Does the client currently or have they ever experienced any of the following STI's?											
Gonorrhoea	<input type="checkbox"/>	Genital warts	<input type="checkbox"/>	Genital herpes	<input type="checkbox"/>	Chlamydia	<input type="checkbox"/>	Syphilis	<input type="checkbox"/>	Thrush	<input type="checkbox"/>
Is the client aware of G.U.M services and how to access them?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>							

Does the client have any other suggestions as to how we can best develop our service to meet the physical health care needs of substance users?

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