eSBIRTes

Electronic screening, Brief Intervention and Referral to Treatment for poly drug users in Emergency Services
Partners

Trimbos Instituut (NL)

LJMU (UK)

ELTE (H)

IREFREA (E)

VAD (B)
Criteria for screening

Aged 18 - 45 years?

Weekends (fr-su) and/or during nights? (21 h - 9 h.)

Complaints:
- abdominal pains; vomiting; general unwell being/fainting; nausea; fall (incl. trip);
- collapse; (head) injury; (sexual) assault;
- (traffic) accident;

Physical signs:
- violent behavior; tachycardia; hypertension; anxiety; altered consciousness (incl. hallucinations and delusions);
- coma; body temperature < 36.5 and above 37.5 (fever);
- dizziness; palpitations; hyperventilation;

Repeated attendance

Can the patient cooperate in eSBIRTes?

understands English

Patient is calm; is sober enough; is willing to cooperate;

Provide with wristband
eSBIRT at home

NO eSBIRT
Yes, the patient is willing to take part in the survey

Click "continue" and hand the Ipad to the patient

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No, the patient cannot cooperate because he ...

- is aggressive
- is too heavily under the influence of drugs or alcohol
- is not in a position to cooperate
- refuses to cooperate and refuses the wristband

Unique wrist band code

Send »
In your life, which of the following substances have you ever used? This is only about non-medical use:

This is only about non-medical use:

- the use of medication not prescribed by a doctor. Attention: only the medication that you find in the questionnaire is relevant; not other medication or medication you can buy without prescription in a pharmacy;
- the use of medication on prescription but more frequently, in larger quantities or in another way than prescribed;
- Use for a purpose other than for which it was prescribed

Some examples:

- The use of prescribed Ritalin to stay awake rather than concentrate;
- Dissolving pills and injecting them instead of swallowing;
- Use of prescribed sedatives to unwind after use of a stimulants instead of going to sleep;
- The use of prescribed medication to improve performance or to obtain a euphoric feeling.
Result: Moderate

With your current use of alcoholic beverages, cannabis, cocaine & GHB, you are at increased risk of these health and other problems. Therefore you will receive an email with an invitation to take part in an online self help program (Drugs and Alcohol Self Help - DASH). Of course, your participation is voluntary, anonymous and free of charge.

Your risk of experiencing these harms is

Alcoholic beverages

Regular use of alcohol is associated with:

- Hangovers, aggressive and violent behaviour, accidents and injury, nausea and vomiting
- Reduced sexual performance and premature ageing
- Digestive problems, ulcers, inflammation of the pancreas and high blood pressure
- Anxiety and depression, relationship difficulties
- Financial and work problems
- Difficulty remembering things and solving problems
- Birth defects and brain damage in babies of pregnant women
- Stroke, muscle and nerve damage
- Liver and pancreas diseases
- Cancers
- Suicide
Welcome, david.mobius

Did you know:
that combi use can lead to unexpected (negative) effects

admin
DASH
What do you think of DASH? Please feel free to comment and help us make the program better!

Finish the preparation step and setup your goals in order to use the diary.

CANNABIS  COCAINE  GHB  ALCOHOL
Training

- Needs assessment
- Develop and reinforce the skills and competencies of the staff in ...
  - identifying the appropriate clients for inclusion in the project;
  - motivating clients to make use of the computer based screening facility and self help module;
  - improving the IT skills of the staff members directly working with clients.
- Info partydrugs => factsheet
Implementation – Hospitals

- Summer 2012 (July-August (September))
Implementation – festivals
Having completed the training programme, I was well prepared to carry out the intervention?
The intervention is a useful service to have in the ED?
The intervention was easy to carry out alongside my routine duties?
Results from staff

Clients have benefitted from the intervention?
The ED should continue to implement the intervention in the near future?
### Results from clients

<table>
<thead>
<tr>
<th>Hospital / Event</th>
<th>Eligible hospital attendees*</th>
<th>Number of attendees screened</th>
<th>% screened</th>
<th>Number of wrist-bands allocated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duffel</td>
<td>979</td>
<td>39</td>
<td>4.0</td>
<td>7</td>
</tr>
<tr>
<td>Kortrijk</td>
<td>1,085</td>
<td>174</td>
<td>16.0</td>
<td>30</td>
</tr>
<tr>
<td>Budapest</td>
<td>535</td>
<td>12</td>
<td>2.2</td>
<td>32</td>
</tr>
<tr>
<td>Kaposvar</td>
<td>51</td>
<td>8</td>
<td>15.7</td>
<td>1</td>
</tr>
<tr>
<td>Sub Total</td>
<td>2,650</td>
<td>233</td>
<td>8.8</td>
<td>70</td>
</tr>
<tr>
<td>Belgian festivals</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>140</td>
</tr>
<tr>
<td>Hungarian festival</td>
<td>-</td>
<td>3</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>236</td>
<td>236</td>
<td>187</td>
<td>213</td>
</tr>
</tbody>
</table>
## Results from clients

<table>
<thead>
<tr>
<th>Substance</th>
<th>Currently using</th>
<th>Have ever used</th>
<th>Level of risk</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Freq</td>
<td>%</td>
<td>Freq</td>
</tr>
<tr>
<td>Alcohol</td>
<td>164</td>
<td>87.7</td>
<td>173</td>
</tr>
<tr>
<td>Cannabis</td>
<td>46</td>
<td>24.6</td>
<td>79</td>
</tr>
<tr>
<td>Cocaine</td>
<td>11</td>
<td>5.9</td>
<td>27</td>
</tr>
<tr>
<td>Amphetamine</td>
<td>13</td>
<td>6.9</td>
<td>28</td>
</tr>
<tr>
<td>GHB</td>
<td>3</td>
<td>1.6</td>
<td>7</td>
</tr>
</tbody>
</table>
Results from clients (8 weeks after)

- 11 clients responded the questionnaire
- 82% indicated ED as a suitable setting
- 73% felt comfortable completing screening
- 27% little uncomfortable completing screening
Recommendations

- Communication and organization in hospitals (eg. for training) could be better.

- Clinical leadership and organizational climate is necessary!

- ASSIST scoring system and brief advice needs improvement.
Conclusions

- eSBIRTes can identify clients at high or moderate risk.
- In general, time and resources are too limited to implement eSBIRTes in EDs.
- Emergency wards at festivals: difficult work circumstances & high drop out.
- Recreational drug users are difficult to motivate to change their drug use.
- The tools are open for future adaptations and implementations in similar settings.
Thank you