

Short intervention can help patients with substance, behavioral problems

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A brief 5 to 10 minute intervention in an emergency department can provide effective help to patients with substance and behavioral problems, and should be broadly implemented, say the authors of a new Yale study. Their recommendations appear in the December issue of Health Affairs.



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Millions of patients seek treatment in emergency departments (ED) each year for substance use and behavioral disorders. Hospitals and primary care facilities have limited capacity to treat these patients, who often are poor, uninsured, and sick.

Adult patients who enter the ED are more likely to smoke, drink, use illicit substances, and misuse prescription drugs than are members of the general population, the authors write. A growing body of evidence suggests that screening, providing a brief intervention, and referring these patients to treatment (a protocol known as SBIRT) can be an effective way to help them. SBIRT can reduce these harmful habits among ED patients, the authors write, having already proven effective in helping people quit smoking and reduce alcohol and marijuana use.

SBIRT is an evidence-based technique that incorporates principles of motivational interviewing, empathy, positive framing, reflective listening, and gentle education to encourage people to change risky behaviors. In addition to being an effective counseling technique, say the researchers, there is evidence that investing in SBIRT can result in healthcare cost savings by reducing the use of the ED.

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