

Prescribing for Alcohol Detoxification

Third Cycle Whole-Hospital Clinical Audit
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Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

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Introduction

- Alcohol dependency syndrome (ADS) is highly prevalent and carries significant morbidity and mortality. Optimal management during alcohol detoxification is key to minimising morbidity.
- National Institutes of Clinical Excellence (NICE) have published guidelines for the management of acute withdrawal ^{1,2}. Large-scale audit developed based on this.
- First cycle: 42 centres across UK-Ireland in 2016, including St. Patrick's Mental Health Services (SPMHS) Addiction and Dual Diagnosis service.
- Second cycle: SPMHS hospital-wide audit.
- Third cycle: focused SPMHS **hospital-wide** audit. Ethical approval was obtained.

Methods

Focused audit of two standards set out in NICE guidelines:

1. Clinical Institute Withdrawal Assessment for Alcohol (CIWA) completion

- A. Prior to detoxification
- B. During detoxification

2. Documentation of Breath Alcohol Level (BAL) within 24 hours of admission.

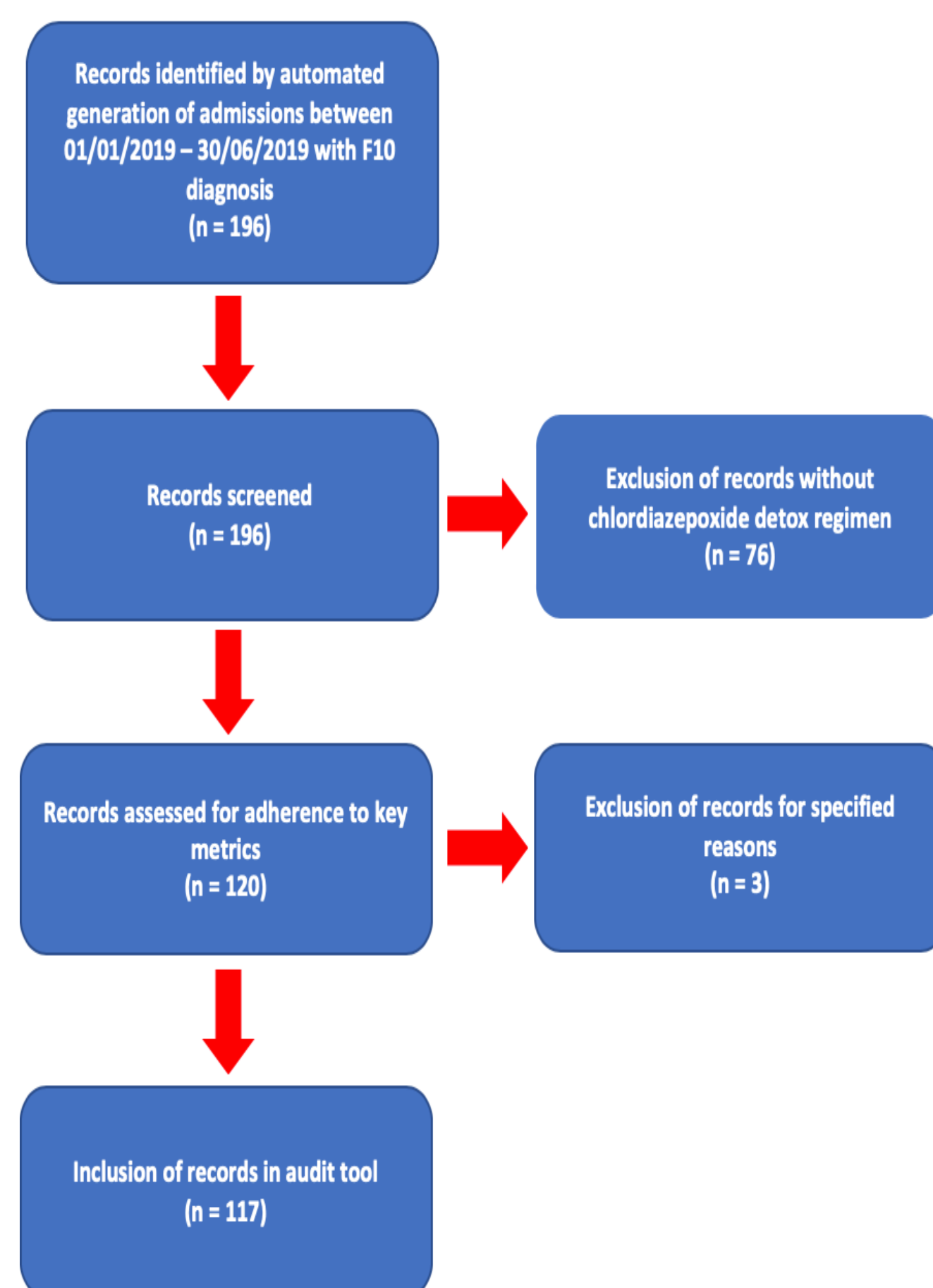
Other measures:

- Correct location on electronic patient records (EPR)
- Ward in which detoxification instituted

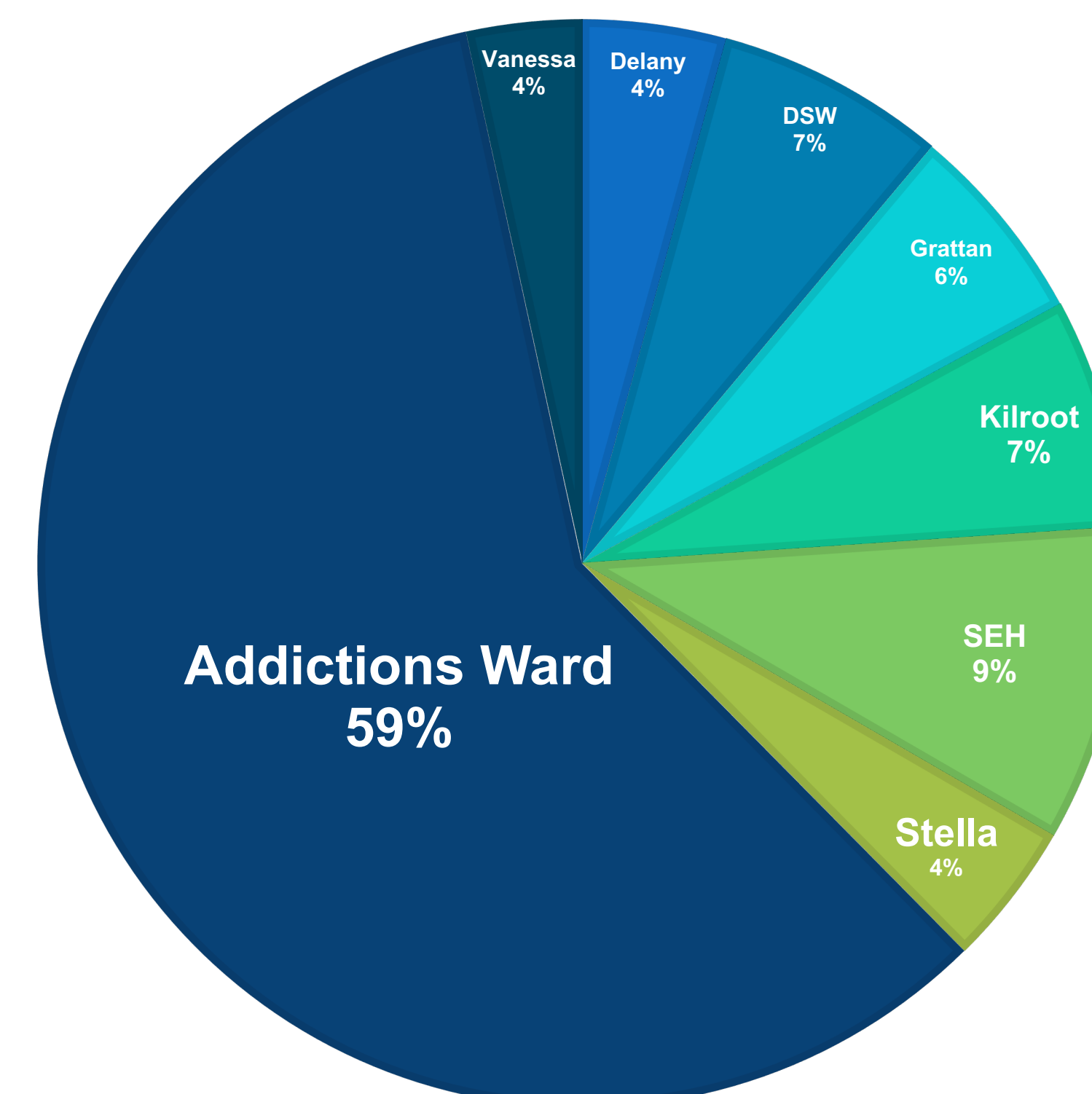
- Retrospective review of EPR.

Patients included if they were prescribed a chlordiazepoxide-based detoxification regimen.

117 patient admissions met the inclusion criteria.



Results



Discussion

CIWA

- Significant improvement in adherence to CIWA standard: 60% → 90%.
- However, only 37% being recorded prior to prescription of chlordiazepoxide.
- CIWA can be used in conjunction with history taking, examination and clinical judgement ⁴.

BAL

- Patients are routinely being breathalyzed on their admission in accordance with NICE recommendation.

Ward

- 59% of patients treated in addictions ward Centre vs 52% in 2017.
- Most medical and nursing expertise in this specialist centre.
- However, 48 patients treated on the general ward.

Reasons for this:

- Consultants retain own in-patients to maintain continuity of care.
- Shortage of observation beds in addictions ward.
- Risk of self harm: detoxification took place on high observation ward.

Majority of BAL and CIWA recorded in correct, designated location on Rio.

Improvement in all parameters partly attributable to EPR, and has made auditing process easier.

Results

Documented	POMH-UK 2016	SPMHS Cycle 1 2016 (Specialist Service)	SPMHS Cycle 2 2017 (Specialist Service)	SPMHS Cycle 2 2017 (General)	SPMHS Cycle 2 2017 (Hospital-Wide)	SPMHS Cycle 3 2019 Hospital-wide
Completed (overall)	14%	81%	75%	39%	60%	91%
Prior to detox	14%	N/A	N/A	N/A	N/A	37%
During detox	14%	N/A	N/A	N/A	N/A	82%

CIWA Completion

Documented	POMH-UK 2016	SPMHS Cycle 1 2016 (Specialist Service)	SPMHS Cycle 2 2017 (Specialist Service)	SPMHS Cycle 2 2017 (General)	SPMHS Cycle 2 2017 (Hospital-Wide)	SPMHS Cycle 3 2019 Hospital-wide
BAL in 24 h	22%	84%	87%	79%	84%	85%

BAL Completion

Correct EPR Location	Percentage
CIWA	84%
BAL	74%

Correct EPR Location

Recommendations

- Staff encouraged to record CIWA before prescription of chlordiazepoxide to aid clinical decision making, and to record this during detoxification to monitor response to treatment.
- Clinical Governance Committee to consider increase in the proportion of patients detoxing from alcohol being treated in the addictions ward.
- Further EPR training to ensure that information is recorded in the correct location of EPR: allpws easy reference and access.

References

- National Institute for Health and Clinical Excellence: Guidance. Alcohol Use Disorders: Diagnosis and Clinical Management of Alcohol-Related Physical Complications. London: Royal College of Physicians (UK). National Clinical Guidelines Centre.; 2010.
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- Prescribing Observatory for Mental Health (2014). Topic 14a: Prescribing in substance misuse: Alcohol detoxification. Prescribing Observatory for Mental Health, CCQ1181
- Sullivan JT, Sykora K, Schneiderman J, Naranjo CA, Sellers EM. Assessment of alcohol withdrawal: the revised clinical institute withdrawal assessment for alcohol scale (CIWA-Ar). Br J Addict. 1989;84(11):1353-7.