

Demystifying MAT: Start with Alcohol Use Disorder Cases

Case 1 - 40 yo woman concerned about her drinking

- Drinks 2 bottles of wine daily until recently; now drinking 1 bottle daily
- Has severe cravings when she tries to quit, and starts drinking again
- Lacks confidence that she can stop on her own; just wants to cut down
- She has never been in formal treatment
- **PMH:** notable for HTN, chronic knee pain and depression
- **Meds:** HCTZ, pantoprazole, sertraline, and vitamins, including thiamine and folate
- **FH:** Father and brother have AUD; her mother has depression
- **Labs:** notable for AST 88, ALT 46, Cr 0.82. CBC is normal

What medications do you suggest?

- A. Acamprosate
- B. Disulfiram
- C. Lorazepam
- D. Naltrexone

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- A. Acamprosate
- B. Disulfiram
- C. Lorazepam
- D. **Naltrexone**
 - Can be initiated while person is still drinking
 - LFTs are < 3-5x upper limits
 - Oral – once daily dosing
- **Acamprosate**
 - Initiated after 5 days abstinence
 - Renal function is good
 - TID dosing = challenge
- **Disulfiram**
 - Pt must be abstinent
 - Best if supervised dosing
- **Lorazepam**
 - BZOs not appropriate for treatment of AUD or associated anxiety

What other benefits could you suggest?

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- HTN – may be related to her alcohol use – could be a motivating factor to cut down/eliminate her HTN meds
- GERD – may improve if she stops drinking; eliminate pantoprazole
- Depression
 - May be alcohol related and may improve with cessation of drinking
 - Needs further assessment of onset of depression in relation to onset of heavy drinking
 - Optimize treatment – consider SSRI

What more do we need to know?

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- **Social History** – “HEADSS” assessment
 - Home situation, marital status
 - Educational level, Employment
 - Activities/Hobbies
 - Drugs - Depression
 - Sexuality – Suicidality – Spirituality
- **Childhood History** – ACEs
 - ACE = at least 1
 - Father with AUD
 - Higher likelihood of abuse
- **Medication History**
 - Prescription meds/other doctors
 - OTC - ?any red flag OTCs
 - Analgesics (hangover headache?)
 - Antacids/H2 blockers (ETOH gastritis?)
 - Diphenhydramine (ETOH insomnia)
 - “Personal drugs”
 - Caffeine – coffee/tea/cola/chocolate
 - Tobacco
 - Alcohol
 - Other drugs

Case 2 - 52 yo man with long history of heavy drinking

- Drinks 1/5 vodka daily
- Denies other substance use and reports depression and insomnia
- Meets criteria for alcohol use disorder (AUD), moderate severity, and reports cravings for alcohol
- LFTs are elevated 2x upper limit of normal and has elevated MCV
- Denies symptoms of alcohol withdrawal or history of complicated withdrawal (withdrawal seizures, hallucinations, DTs)
- No prior treatment for AUD or psychiatric disorder
- Also has a history of chronic lower back pain and takes low-dose oxycodone 1-2 X/mon during flare-ups

Which medication would you consider for treatment of alcohol use disorder in this patient?

1. Naltrexone
2. Disulfiram
3. Acamprosate
4. Gabapentin
5. Topiramate

Questions to consider

1. Is naltrexone contraindicated in this patient?
2. Under what circumstance would you consider disulfiram?
3. Under what circumstance would you consider combining medications?
4. What should you recommend in addition to medications?

Questions to consider

1. Is naltrexone contraindicated in this patient?
 - How will it impact his liver? Not contraindicated; follow LFTs
 - How will his back pain be managed?
2. Under what circumstance would you consider disulfiram?
 - If patient is motivated and open to supervised dosing
3. Under what circumstance would you consider combining medications?
 - Not initially; may add (off label) gabapentin later
4. What would you recommend in addition to medications?

Which medication would you consider for treatment of alcohol use disorder in this patient?

1. Naltrexone
2. Disulfiram
3. Acamprosate
4. Gabapentin
5. Topiramate

... and could add acamprosate, or later add gabapentin

Case 3 – 27 yo woman for annual physical

- Works as a software designer and reports stopping after work for a glass of wine with friends most nights
- On weekends, she goes out to clubs to dance and drink and she may have up to 4-5 drinks/night
- Her father quit drinking when she was quite young and continues to attend AA meetings.

What do you recommend as a first step?

- A. Limit her drinking to 3 drinks/day and 7 drinks/week
- B. Stop drinking alcohol immediately
- C. Go to AA meetings 3x/wk and get a sponsor
- D. Limit her drinking to 4 drinks/day and 14 drinks/week

NIAAA Limits for Moderate Drinking



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Positive screen on AUDIT-C? Perform USAUDIT-10

• Q 1-3: AUDIT-C, includes the 1-question screen (#3)

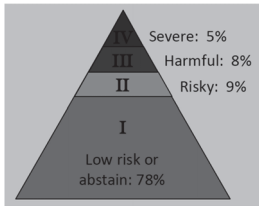
• Q 4-6: ask about impaired control, increased salience and morning drinking

• Q 7-10: ask about experience of guilt, blackouts, physical harm, concerns of others

Instrument: USAUDIT-10
Instructions: Alcohol can affect your health, medications, and treatments, so we ask patients the following questions. Your answers will remain confidential. Place an X in one box to answer. Think about your drinking in the past year. A drink means one beer, one small glass of wine (5 oz.), or one mixed drink containing one shot (1.5 oz.) of spirits.

QUESTIONS	0	1	2	3	4	5	Score
1. How often do you have a drink containing alcohol?	Never	1-2 times a week	Monthly	Weekly	2-3 times a week	Daily	5
2. How many drinks containing alcohol do you have on a typical day you are drinking?	1 drink	2 drinks	3 drinks	4 drinks	5-6 drinks	7 or more drinks	1
3. How often do you have 4 or more drinks in a row?	Never	Less than monthly	Monthly	Weekly	2-3 times a week	Daily	4
4. How often during the last year have you found that you were not able to stop drinking after you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		
5. How often during the last year have you had to do what was considered of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		
6. How often during the last year have you needed a drink first thing in the morning to get your day going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		
8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		
9. Have you or someone else been injured because of your drinking?	No	Yes, but not in the past year	Yes, during the past year	Yes, during the past year			
10. How many times, friends, doctors or other health care workers have commented about your drinking and suggested you cut down?	No	Yes, but not in the past year	Yes, during the past year	Yes, during the past year			
Total							10+

Making sense of USAUDIT score



Interpreting the AUDIT and DAST screening tools

Score	Zone	Action
AUDIT: 0-3/4 Women/Men USAUDIT: 0-6/7 Women/Men DAST: 1-2 (infrequent use of cannabis only)	I Low Risk	Brief education
AUDIT: 4-12, 5-14 Women/Men USAUDIT: 7/8-15 Women/Men DAST: 1-2 (10+)	II Risky	Brief intervention
AUDIT: 13/15-19 Women/Men USAUDIT: 16-19 DAST: 3-5	III Harmful	Brief intervention (offer options that include treatment)
AUDIT: 20+ USAUDIT: 20+ DAST: 6+	IV Severe	

Final Question - You are designing an intake questionnaire for your FM office to screen for unhealthy alcohol use

If you were to include only one question, what would you use?

- A. How often during the last year have you had a feeling of guilt or remorse after drinking?
- B. Has a relative or friend or a doctor or other health worker been concerned about your drinking or suggested you cut down?
- C. How many times in the past year have you had more than four drinks (for women) or five drinks (for men) in a day?
- D. Have you ever had a drink first thing in the morning (Eye Opener) to steady your nerves or get rid of a hangover?

Final Question - You are designing an intake questionnaire for a primary care clinic and screen for unhealthy alcohol use

If you were to include only one question, what would you use?

- A. How often during the last year have you had a feeling of guilt or remorse after drinking?
- B. Has a relative or friend or a doctor or other health worker been concerned about your drinking or suggested you cut down?
- C. How many times in the past year have you had more than four drinks (for women) or five drinks (for men) in a day?
- D. Have you ever had a drink first thing in the morning (Eye Opener) to steady your nerves or get rid of a hangover?

Let's do more! Add MAT for better care

Thank you!

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