

POSTER PRESENTATION

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Mental health and substance misuse 7 years following an Emergency Department admission for alcohol intoxication

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Background

How young adults evolve at a distance of being admitted for alcohol intoxication in the Emergency Department (ED) is not well characterized.

Objective

Assess the prevalence of alcohol use disorder (AUD), substance use and health status 7 years following an ED admission for alcohol intoxication.

Methods

In 2006-2007, 631 patients aged 18-30 were admitted for alcohol intoxication at the ED of a tertiary Swiss hospital. In 2014, they were re-contacted and interviewed to complete: demographics, alcohol use disorders identification test-consumption (AUDIT-C), Mini International Neuropsychiatric interview (MINI) for AUD, SF12 mental and physical component summary scores (MCS, PCS), Patient Health Questionnaire (depression and anxiety disorders), past year use of illegal drugs/tobacco, if they remembered the admission and discussing their drinking while admitted.

Results

In 2014, 318/631(50.4%) patients completed the questionnaire: 32.1% were women, 36.5% unemployed, 73.6% remembered the admission and 34.6% discussing their drinking; 65.1% had AUDIT-C \geq 4 (i.e. positive screen for AUD). According to the MINI, 15.1% had alcohol dependence and 13.2% harmful use. 18.6% had depression, and 15.4% an anxiety disorder. Mean (SD) PCS and MCS were 52.2(9.3) and 42.7(11.7). Prevalence of any use (past

year) was 80.2% for tobacco, 53.1% for cannabis, 22.6% for cocaine, 13.5% for sedatives, 11.0% for stimulants, 7.2% for opioids, and 6.0% for hallucinogens. At least once a week use was 65.4% for tobacco, 25.5% for cannabis, 3.8% for cocaine, 7.2% for sedatives, 0.9% for stimulants 3.8% for opioids and 0% for hallucinogens. No differences were found between those who completed the questionnaire and those who did not on 2006-2007 alcohol intoxication admission data (age, gender, blood alcohol concentration, presence of disruptive behavior in the ED).

Conclusions

Young patients admitted for alcohol intoxication are likely to develop substance misuse, mental health disorders, and social problems, suggesting they should be offered secondary prevention measures.

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