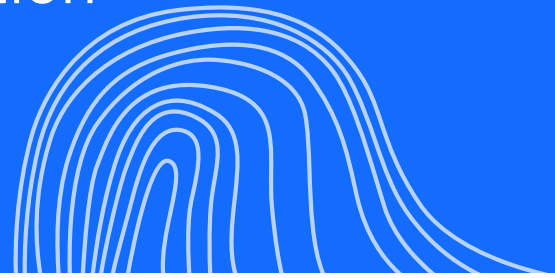


Stage Two: Medical consultation during program

Factsheet for General Practitioners, July 2023
NSW Alcohol Interlock Program



Resources required for this Stage Two consultation:

- **Alcohol Dependence Checklist** (see Page 2)

Overview of the NSW Alcohol Interlock Program and the Drink-less Program

The [Alcohol Interlock Program](#) is a court-ordered requirement for some drink driving offenders. It is designed to reduce drink driving offending in NSW.

An interlock is an electronic breath testing device linked to a vehicle's ignition system. Program participants must provide a breath sample that the interlock analyses for the presence of alcohol. If a positive sample is detected, the vehicle will not start.

The [Drink-less Program](#) is a practical intervention package designed to assist GPs to screen for alcohol-related problems and offer appropriate advice to patients on drinking. It was initially developed at the University of Sydney and has been endorsed by the World Health Organisation, the Australian Medical Association, the Royal Australian College of General Practitioners, and the Chapter of Addiction Medicine of the Royal Australasian College of Physicians.

Drink-less uses the Alcohol Use Disorders Identification Test (AUDIT) - a simple and effective method of screening for unhealthy alcohol use.

This patient is currently on the Alcohol Interlock Program and is seeing you today because their interlock device has detected ongoing attempts to drive after drinking alcohol.

As a result, Transport for NSW has recommended that they visit a doctor. This patient's ongoing attempts to drive after drinking alcohol may indicate ongoing risky behaviour or even alcohol dependence. This visit gives the patient an opportunity to get advice about their alcohol consumption from a GP.

What is my role in this consultation?

The patient visited a GP to begin the Alcohol Interlock Program. During that visit, they completed an AUDIT questionnaire, and the GP undertook a brief intervention based on their score.

During this consultation, you should use the Alcohol Dependence Checklist on Page 2 and use the results to:

- Try to engage, motivate and support your patient to rethink their drinking
- Provide any treatment necessary
- Refer them for further assessment and treatment if needed
- Help your patient to separate drinking from driving.

How do I bill for this consultation?

This consultation can be billed under Medicare because it is therapeutic. Most GPs bill this as a level C consultation (item 36). For some patients, a longer or second consultation may be needed.

Diagnosing Alcohol Dependence

Alcohol dependence is a disorder of regulation of alcohol use arising from repeated or continuous use of alcohol. The characteristic feature is a strong internal drive to use alcohol. The diagnosis requires two or more of the three central features to be evident over a period of at least 12 months, but the diagnosis may be made if alcohol use is continuous for at least three months:

Criterion	Sample questions / checks	Tick if criterion present
1. Impaired control over alcohol use — in terms of the onset, level, circumstances, or termination of use, often but not necessarily accompanied by a subjective sensation of urge or craving to use alcohol.	<i>How easy is it to stop once you have had one or two drinks?</i>	
2. Alcohol use becomes an increasing priority in life such that its use takes precedence over other interests or enjoyments, daily activities, responsibilities, or health or personal care. Alcohol use takes an increasingly central role in the person's life and relegates other areas of life to the periphery, and it often continues despite the occurrence of problems.	<i>What is a typical day like for you? (If time is increasingly spent on alcohol rather than on other interests or responsibilities, check box)</i>	
3. Physiological features (indicative of neuroadaptation to alcohol) as manifested by: tolerance, withdrawal symptoms following cessation or reduction in use of alcohol, or repeated use of alcohol (or a pharmacologically similar substance) to prevent or alleviate withdrawal symptoms. Withdrawal symptoms must be characteristic for the withdrawal syndrome for alcohol and must not simply reflect a hangover effect.	<i>If you stop drinking, do you get the shakes or feel cranky?</i> <i>What are you like in the morning before your first drink? (If irritable/cranky, criterion is present)</i> <i>Check for continued drinking despite being aware of clear harms experienced because of alcohol (e.g. liver problems; injuries; depressed mood)</i>	
Number of criteria positive		
Alcohol dependence present? (i.e. two or more criteria positive)		Y / N

Based on the WHO International Classification of Diseases, 11th Edition (ICD-11) 2022

Tips for GPs when managing alcohol dependence

Engaging and supporting the patient is critical. The conversation typically involves:

- 'Feeding back' harms your patient has already experienced (or risks they face)
- Listening to their response
- Provide advice:
 - About the expected benefits of change
 - That abstinence (for one month or permanently) is the best goal if dependence is present because of difficulties controlling drinking
- Help the patient:
 - What goal are they prepared to try to achieve? (abstinence, separating drinking and driving, reducing other risks of drinking)
 - Management strategies
- Develop practical strategies to achieve this goal, such as:
 - Management of withdrawals if required (provide or arrange this)
 - Medicines for relapse prevention e.g. acamprosate or naltrexone
 - Counselling or group approaches e.g. SMART Recovery or AA
 - Thiamine
- Arrange follow-up, and/or refer to a specialist if needed.

For more information on helping a patient with their drinking:

- See the *2021 Guidelines for the Treatment of Alcohol Problems* (4th edition) [here](#).
- DASAS is a free 24/7 telephone service that provides general advice to health professionals who require assistance with the clinical diagnosis and management of patients with alcohol and other drug related concerns. Within Sydney Metropolitan Area: (02) 8382-1006 or Regional, Rural & Remote NSW: 1800 023 687.
- For 24/7 information, support, and referrals for those affected by alcohol and other drug use, call the Alcohol and Drug Information Service (ADIS) on 1800 250 015.