



Hvordan former vi fremtidens alkoholbehandling?

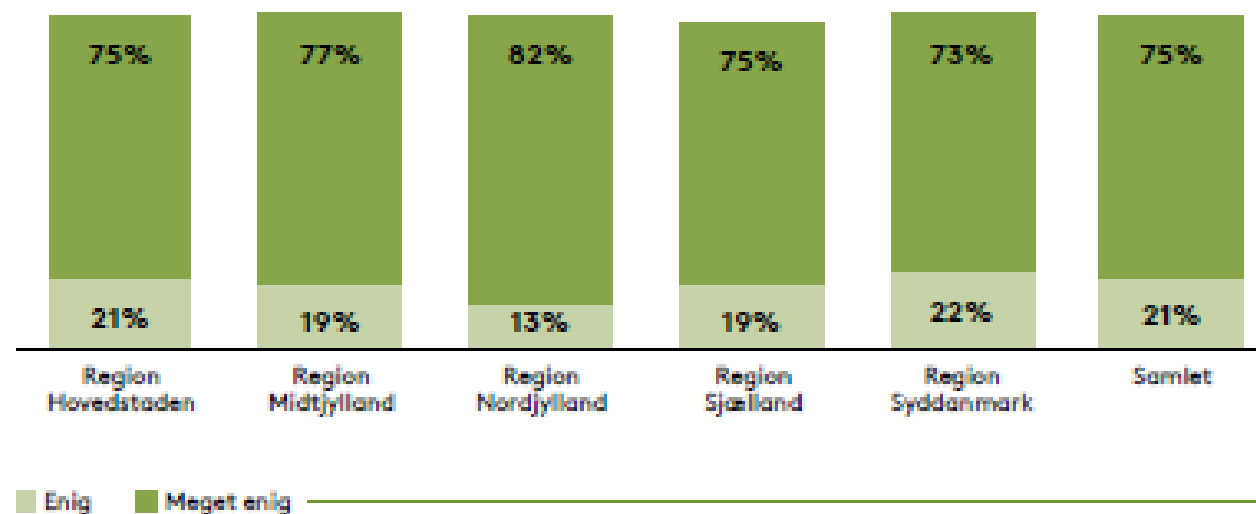
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Vi ved

At behandling opleves af patienterne som god og hjælpsom ...

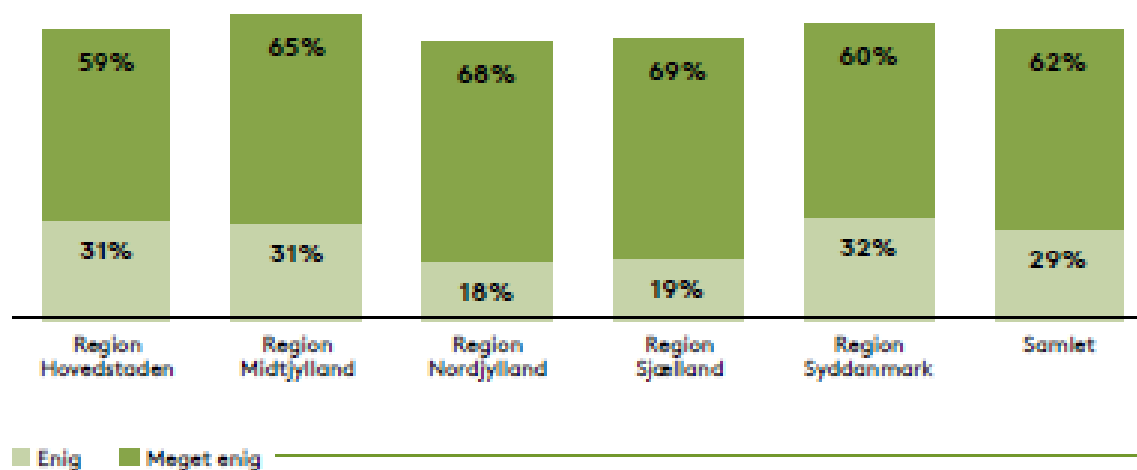


Patienterne synes, at personalet har været gode til deres job



<p>Respondent 111</p>	<p>Har en sindssyg dygtig behandler, som forstår mig, men også er kontant!</p> <p>Det har hjulpet meget, og har fået en meget god forståelse for hvordan jeg dæmper, og holder øje med, hvornår trangen dukker op.</p>
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Patienterne synes at "Jeg har fået den hjælp, jeg ønskede"



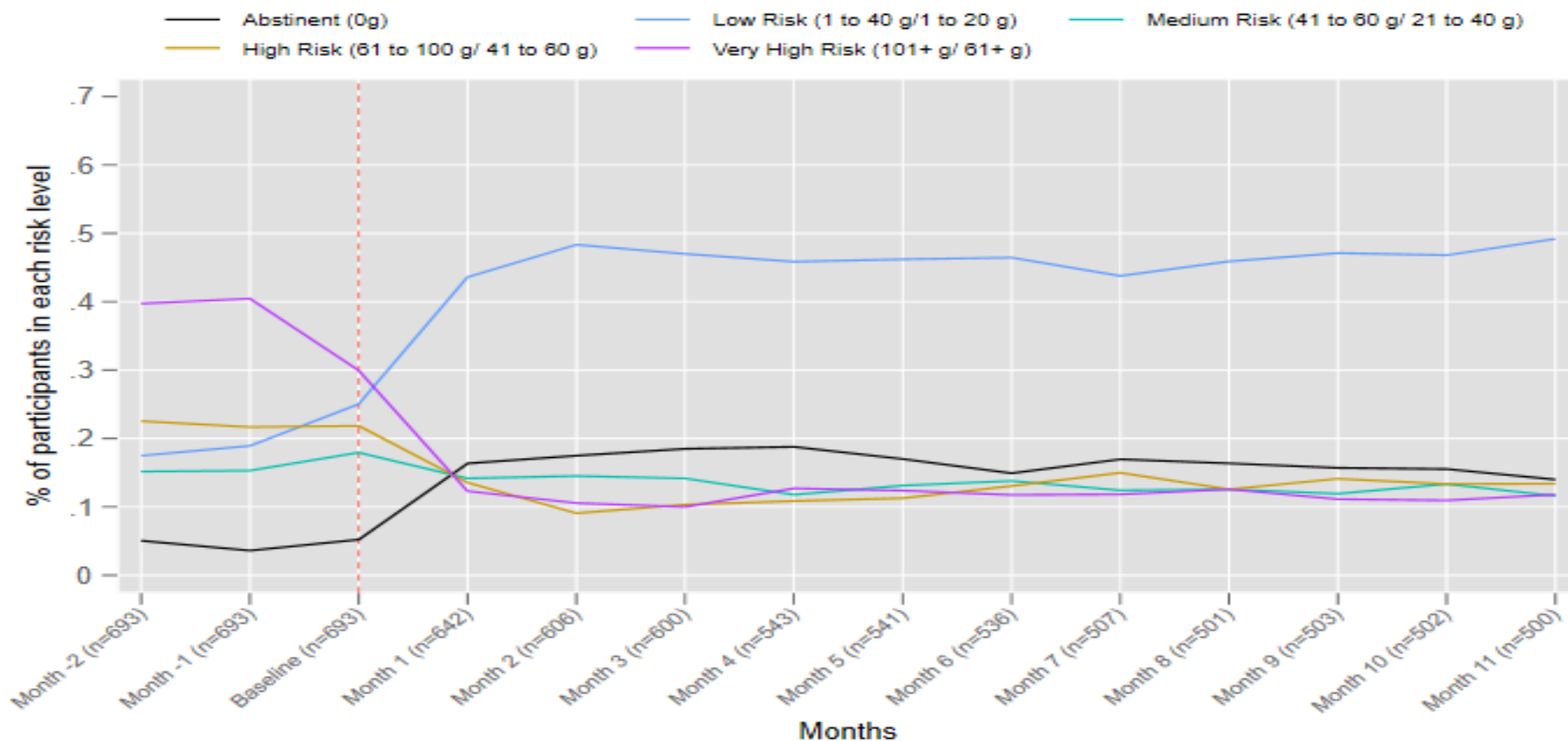
Vi ved også

At behandling er effektiv...



WHO Risk levels

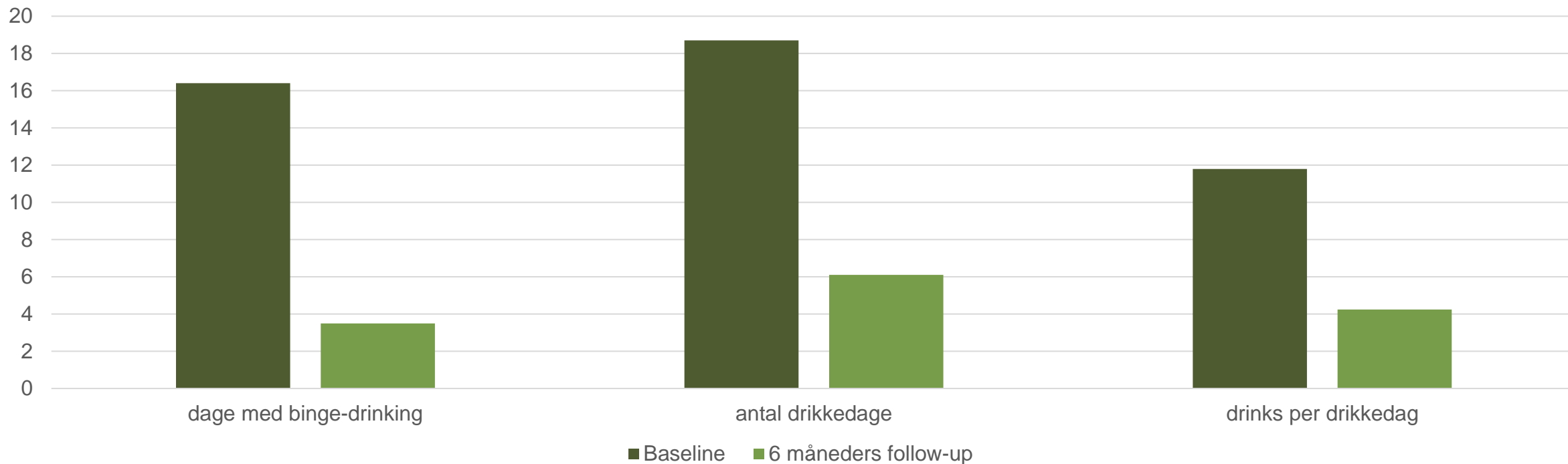
- Før, under og efter behandling



Mejldal et al, Treatment of seniors suffering from alcohol use disorders: Maintenance of WHO Risk drinking levels Reductions following treatment. Secondary analysis of the Elderly Study. Alcohol Clin Exp Res 2021.



Ændring fra start af behandling til 6 måneder senere (n= 402 konsekutive patienter)

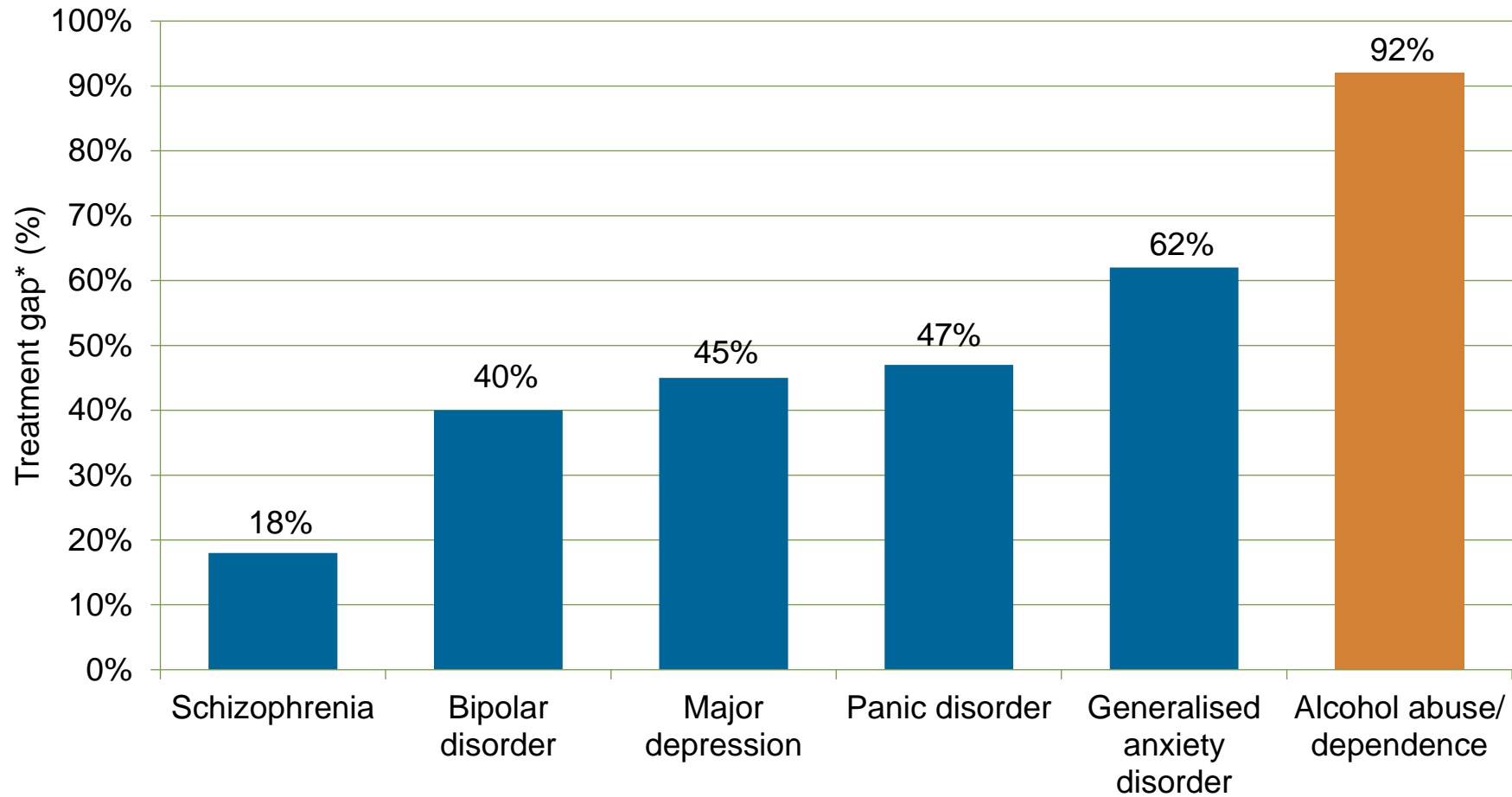


Men vi ved også

At meget få mennesker opsøger behandling... og andre kan ikke modtage den, af forskellige grunde



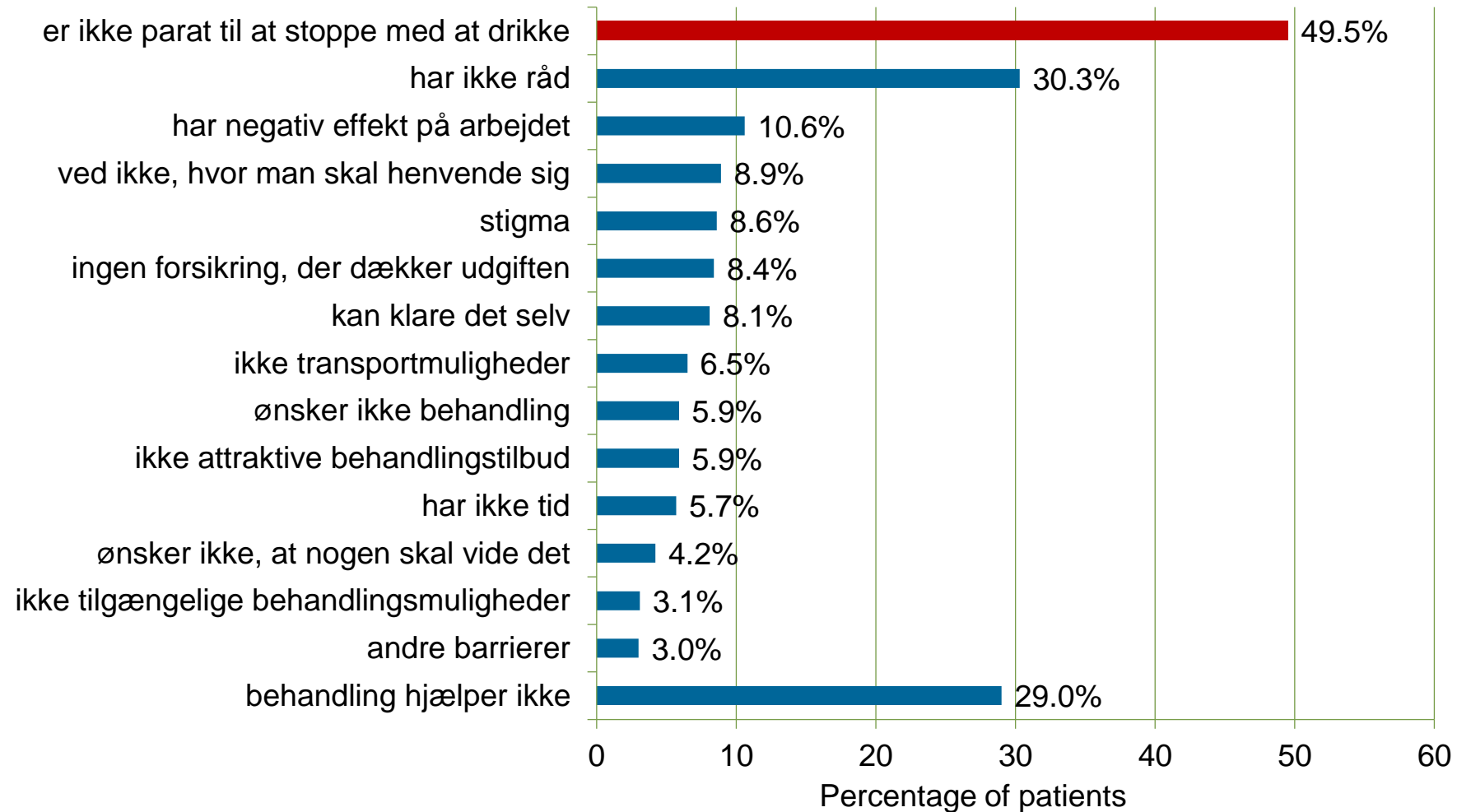
Behandlingsgab indenfor psykiatriske lidelser (Europa)



*Treatment gap = Difference between number of people needing treatment for mental illness and number of people receiving treatment

Hvorfor har folk ikke søgt behandling det seneste år?

(fordelt på personer over 12 år, som har behov for behandling eller oplever at have behov for det: 2009 to 2012)



Hvordan løser vi det??

1. Promovering
2. Organisering
3. Digitalisering
4. Involvering
5. Optimering

Promovering

ABOUT US :

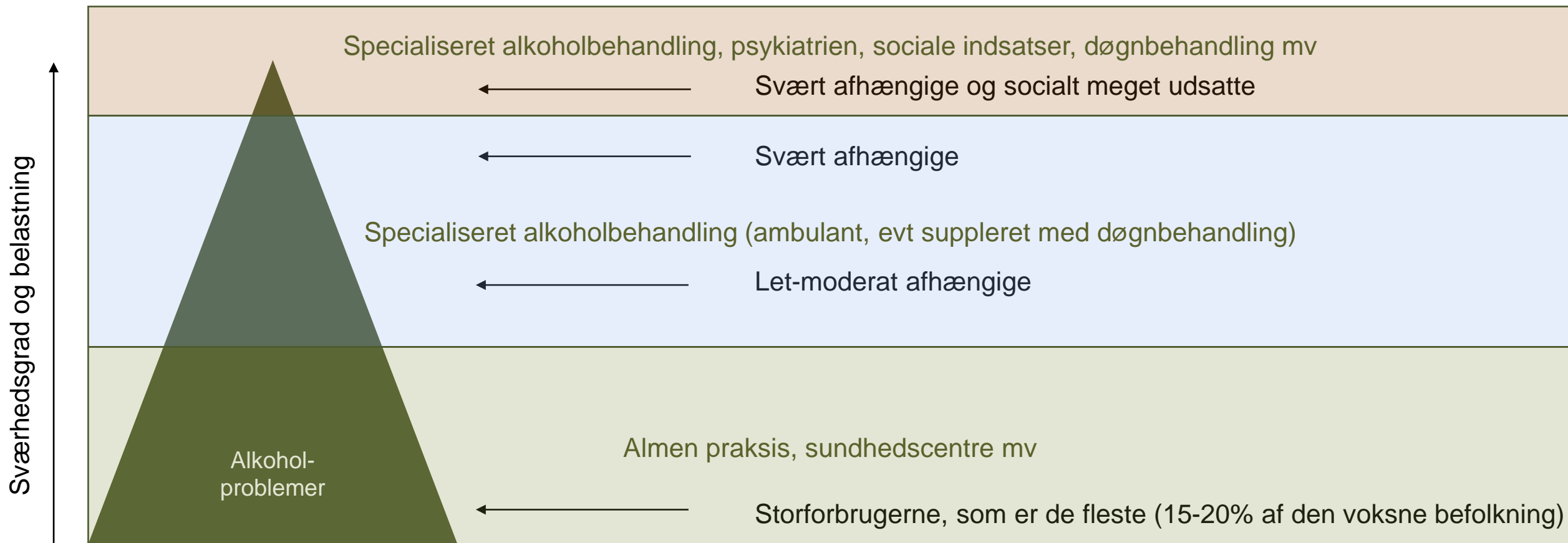
A blue pencil is shown in the process of drawing a blue underline under the text "ABOUT US :". The pencil is positioned on the right side of the image, with its tip touching the end of the text. The text is written in a bold, black, sans-serif font. The background is a plain, light gray surface.



Organisering

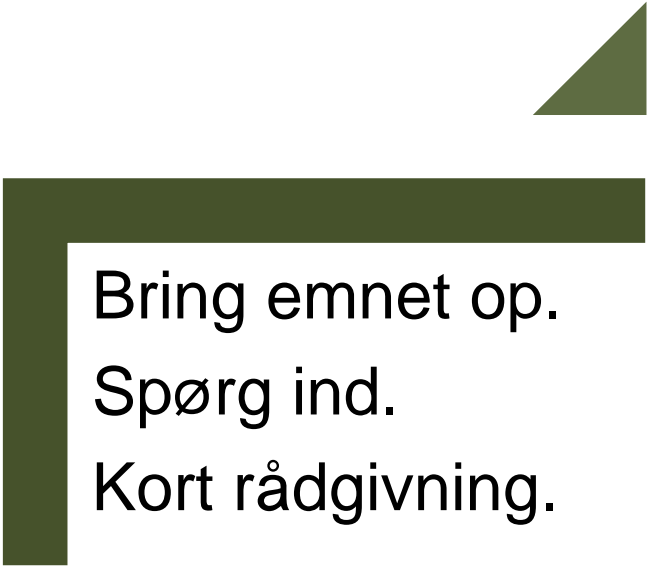


Behandlingsbilledet af idag




15-metoden

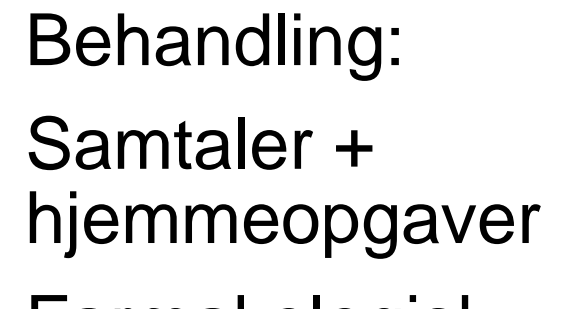
- Adresserer kendte barrierer for alkoholinterventioner i almen praksis
- Navn: >15 points på AUDIT. 15 min. per session
- Filosofien: Alkoholproblemer er
 - i) En vane der kan ændres
 - ii) Et klinisk problem = ikke et moralsk problem



Bring emnet op.
Spørg ind.
Kort rådgivning.



Vurdering af
situationen.
Tilbage melding.



Behandling:
Samtaler +
hjemmeopgaver
Farmakologisk
behandling.

Sammenligning af 15-metoden i almen praksis med specialistbehandling, RCT, Stockholm

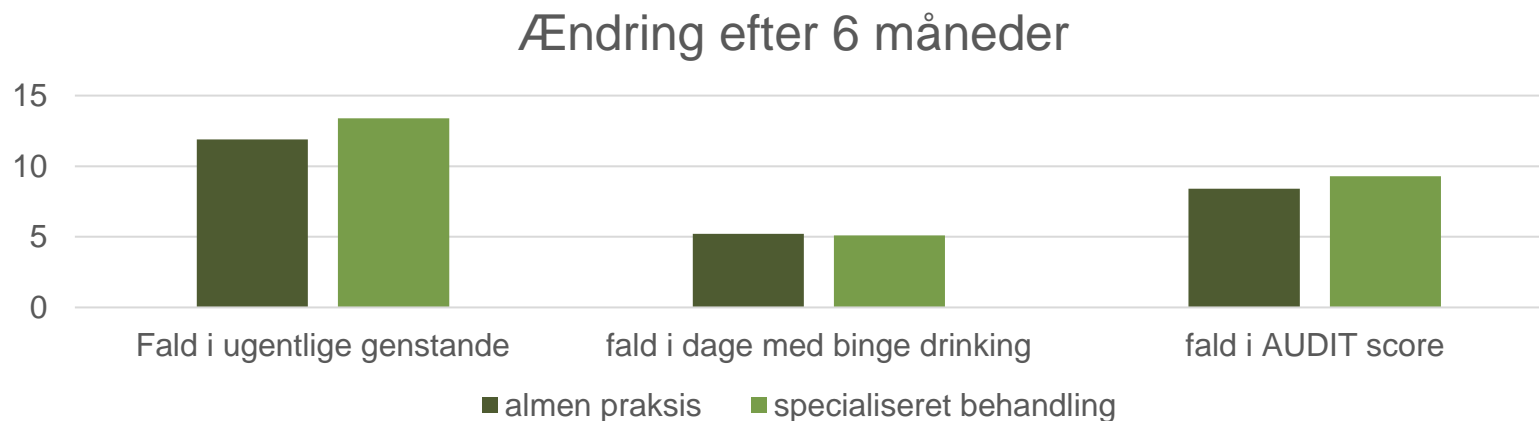
Deltagere: 55% mænd, gennemsnitsalder sidst i halvtredserne, 70% i arbejde, problematisk alkoholbrug i 11 år, gennemsnitligt ugentligt alkoholforbrug på 30 genstande, AUDIT score på 22

Resultat:

Sammenlignet med specialistbehandling i Sverige

Deltagere, baseline: 55% mænd, gennemsnitsalder sidst i halvtredserne, 70% i arbejde, problematisk alkoholbrug i 11 år, gennemsnitligt ugentligt alkoholforbrug på 30 genstande, AUDIT score på 22

Resultat:



Hvordan synes danskerne om 15-metoden?

Praktiserende læger og deres personale

Overordnet: et hjælpsomt værktøj

Eksempler

1. Initiering af samtale
2. Struktur
3. Fleksibelt
4. Interdisciplinært

Patienterne

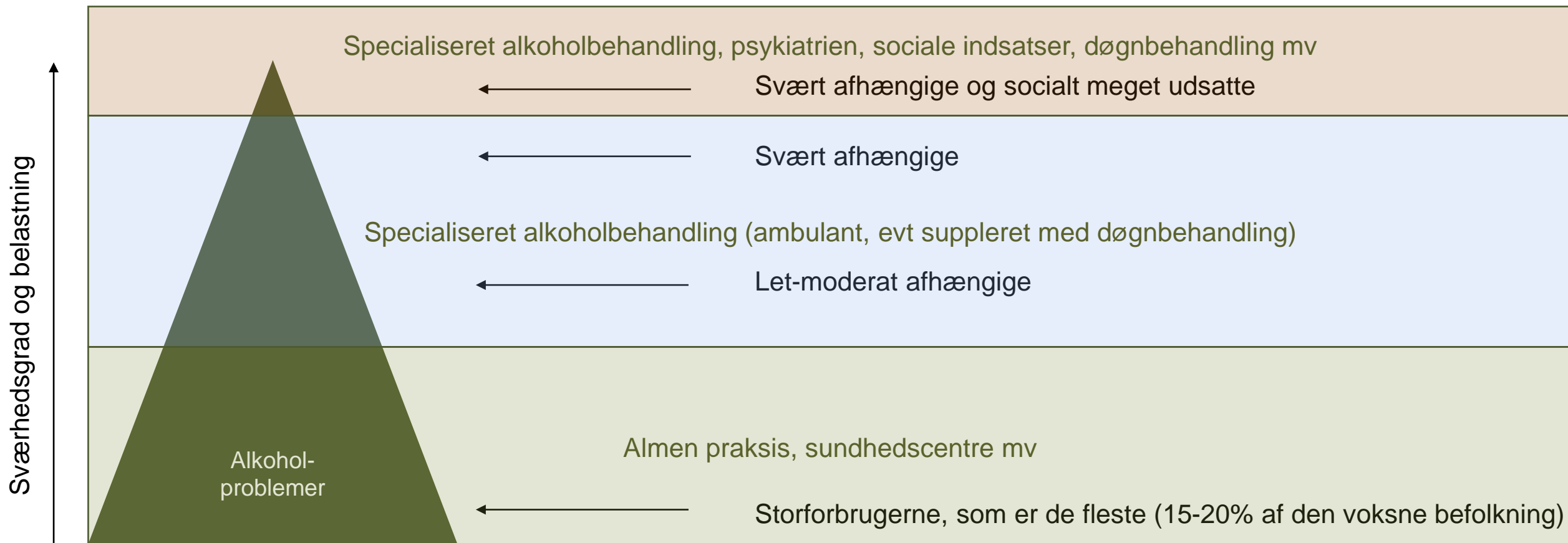
Overordnet: kærkomment tilbud

Eksempler

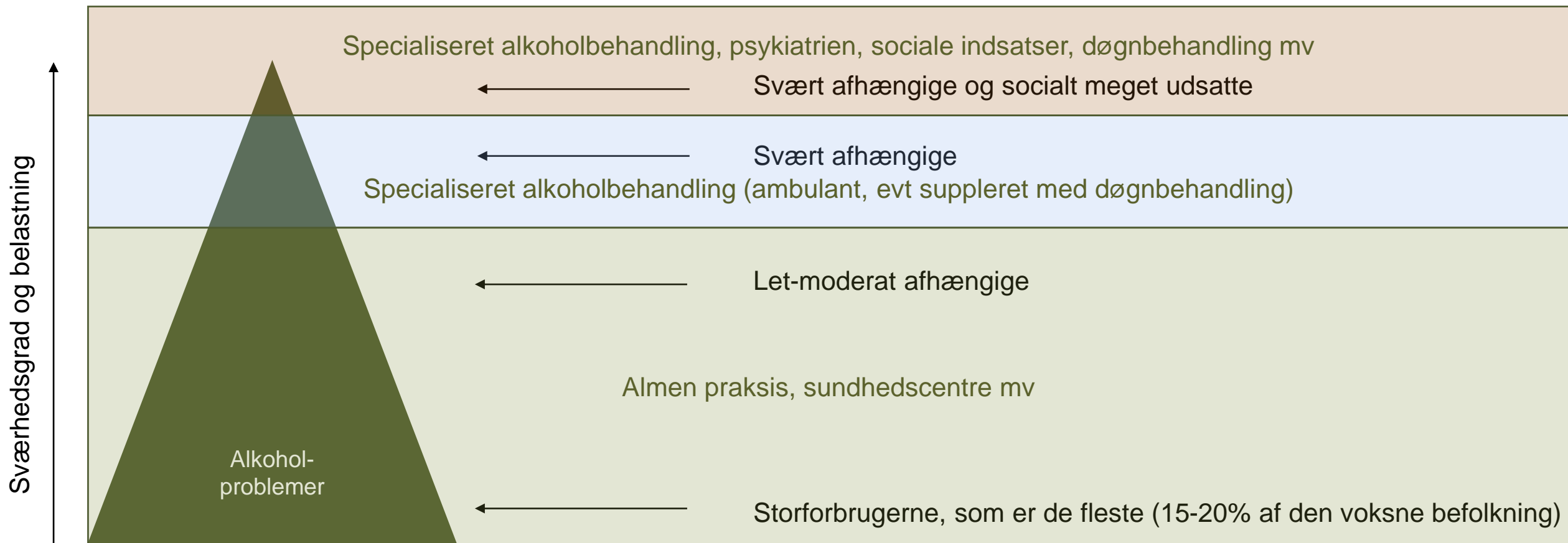
1. Personligt, individfokus
2. Del af helhedsbillede (livsstil)
3. Afvæbnede barrierer såsom logistik, stigma
4. Kan bygge på relationer i klinikken

Vi er nu i gang med at evaluere metoden i stor skala.

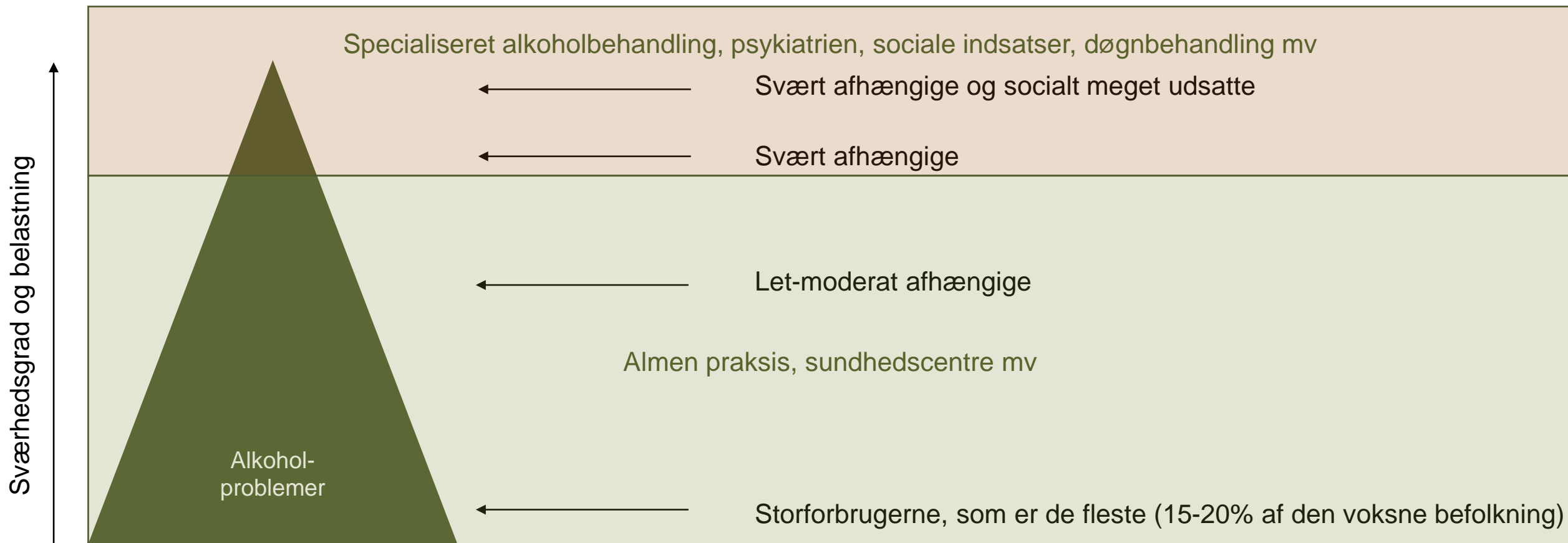
Behandlingsbilledet af idag



Ønskescenariet???



Måske endog??



Digitalisering

Virker digital behandling?

- Mere effektivt end kontrol-indsatser i forhold til sænkning af forbrug (Sundström et al, 2017. Int. J. Behav. Med. 24:646-658; Rieper et al,)
- Behandler-guided digital behandling er mere effektiv end kontrolgruppe (Johansson et al, 2021; JMIR,23(11):e29666) doi: 10.2196/29666; Rieper 2018, Plos Medicine, <https://doi.org/10.1371/journal.pmed.1002714>

Er digitale løsninger altid svaret?

Non-use of guided internet-based cognitive behavioral therapy for alcohol use disorder: a qualitative study on barriers experienced by patients in choosing iCBT

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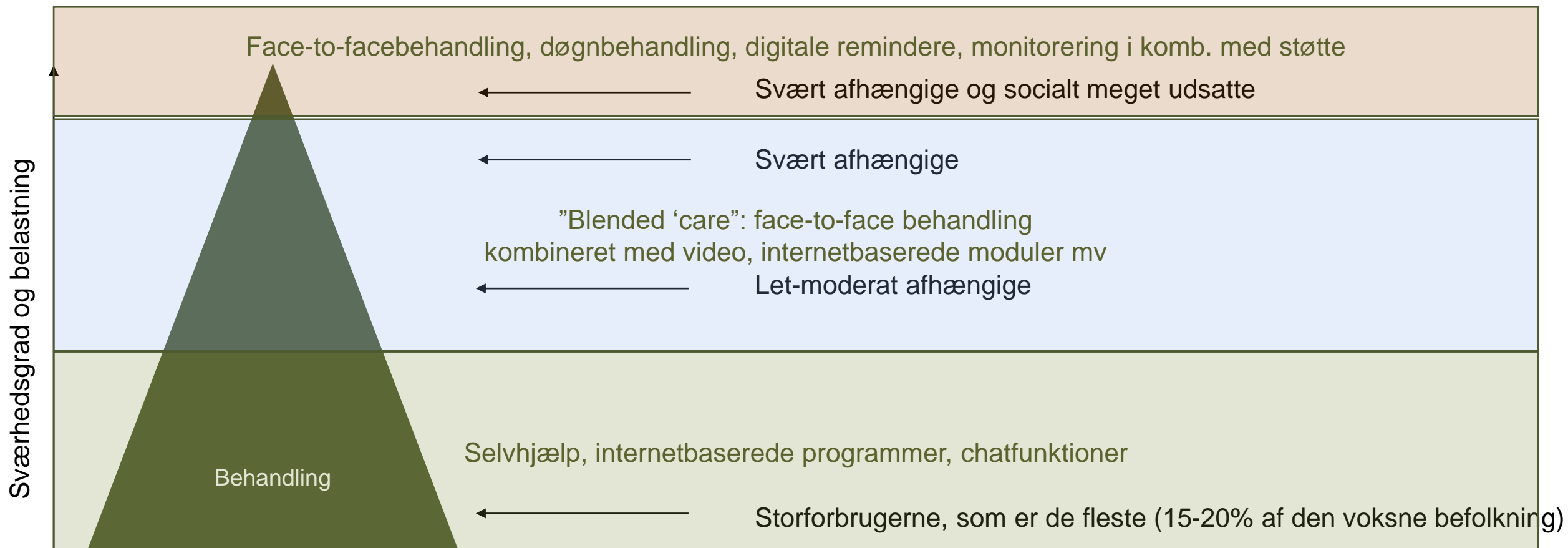
⁷OPEN, Open Patient data Explorative Network Odense University Hospital Odense DK

"It becomes a little too impersonal. Off course, they would probably be able to manage several things simultaneously if it only had been possible. Here people in question need help. When things go well and help when things go wrong. [...] I just think that digital based becomes a bit impersonal. It is something that is not the same as when you are sitting down with someone who needs a shoulder to cry on. [...] I just think that digital based becomes a bit impersonal. It is something that is not the same as when you are sitting down with someone who needs a shoulder to cry on. [...]

"I want to have someone who can tell me if I am doing well. Because I don't have that confidence before. It has been good to have someone who are some good people in the room. I don't want to make a mistake. Well, then you can talk to them and get down. I think that is important."

"I believe that it would be too easy for me to not use the computer. Due to my upbringing, I am dutiful, but is there anything I can skip then I will do it. So, I don't believe that I would be as dutiful online as when I am confronted face-to-face with people I know". (Patient, ID 1100)

Hvor meget og hvad skal digitaliseres



Involvering



Fælles problem versus at være en ressource

Familieterapi:

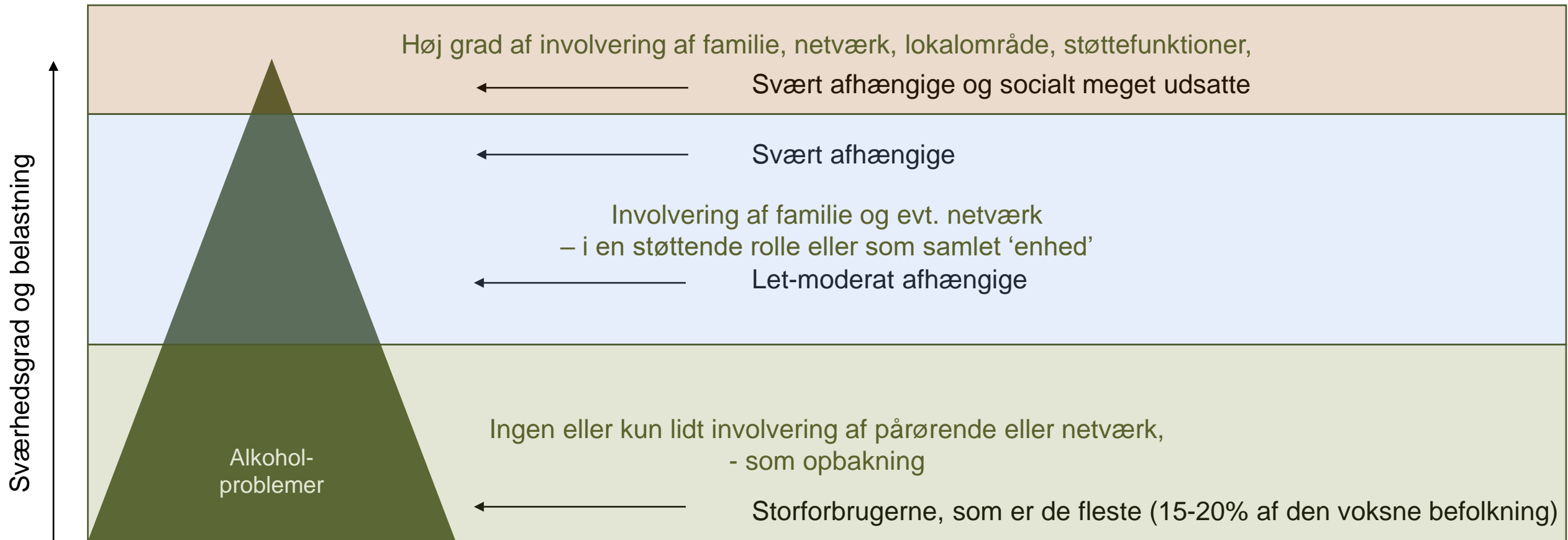
- **Løsningen af alkoholproblemet bliver et fælles anliggende for familien/netværket**
- **Behandlingen er målrettet alle, der er i behandling**
- **Ægtefælle og børn får ofte ligeså meget udbytte af at blive inddraget, som den drikkende gør**

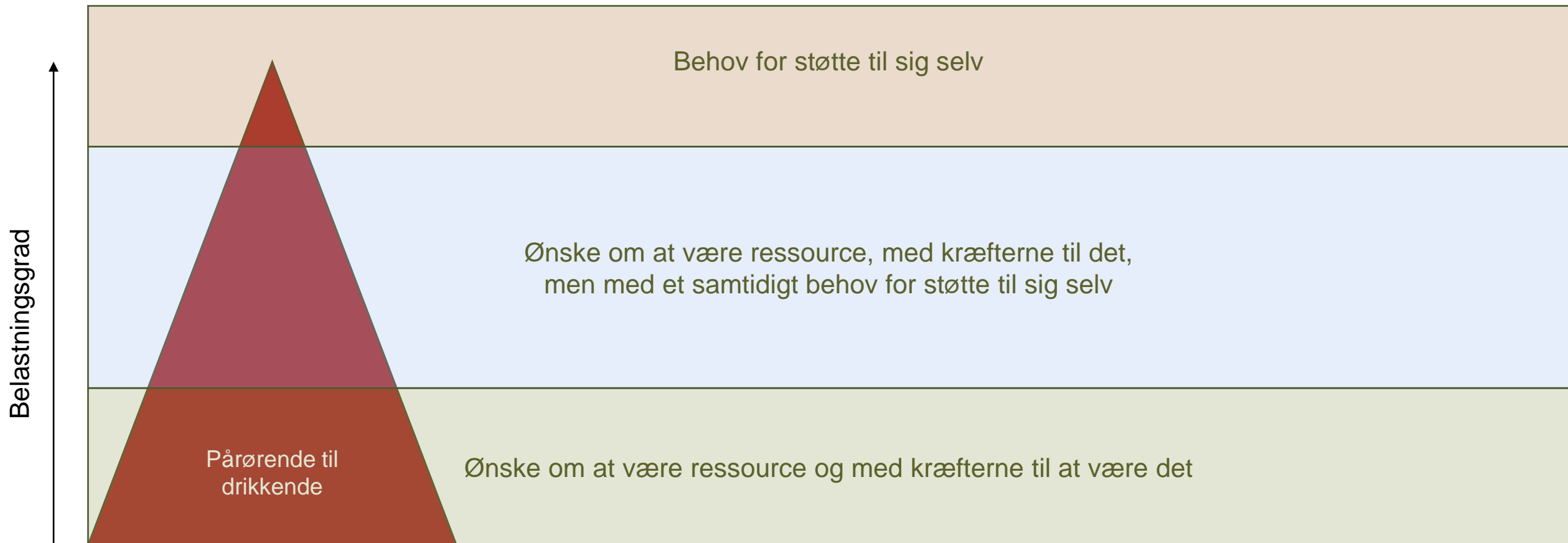
Familie og netværk som støtte-person i forhold til den drikkende

- **Den pårørende/netværket er entydigt en ressource**
- **Behandlingen er fortsat målrettet den drikkende**

Community Reinforcement Approach (CRA)



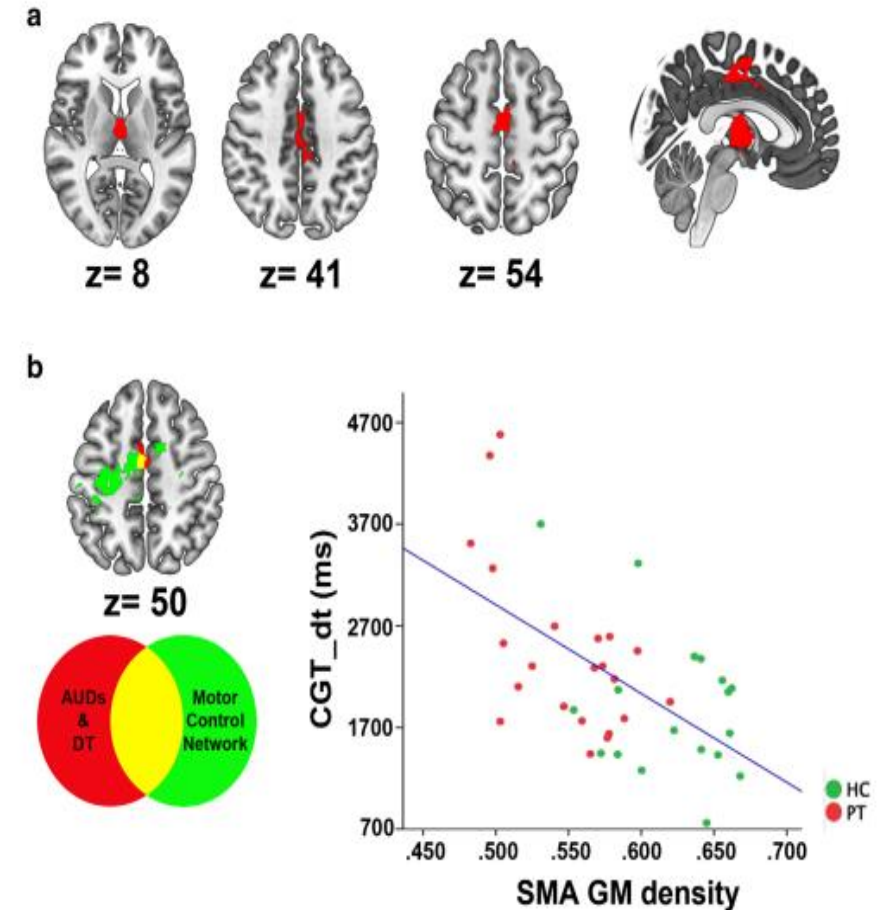




Optimering

Alkoholafhængighed medfører svækket evne til beslutningstagning, medieret ved reduceret mængde "grå substans" i hjernen. Galandra et al, Brain Imaging and Behavior (2021) 15:205–215. <https://doi.org/10.1007/s11682-019-00248-8>

Fig. 3 Slowed decision-making and GM atrophy in the Motor Control Network. The figure depicts the regions showing common effects of AUD and deliberation time (panel a), as well as the spatial overlap between the motor control network (green) and the regions where GM density was both correlated with deliberation time in the whole sample, and reduced in alcoholic patients (panel b). Average GM density in the yellow voxels explained 32.5% of individual differences in CGT deliberation time in the whole sample, with no significant group difference in the slope of this relationship. The scatterplot depicts the relationship between CGT deliberation time (ms) and average GM density in the SMA cluster highlighted by conjunction-analyses (i.e. in the voxels depicted in yellow color).



Blandt mennesker med alkoholafhængighed er en vifte af kognitive domæner blandt præget af dysfunktion

- 1) Afhængighedsspecifik kognitiv dysfunktion (fx alkohol og stof attentional/approach bias) (Field et al., 2008; Wiers et al., 2009);
- 2) Emotionel Kognitiv dysfunktion (fx attentional bias i “emotional face processing” og andre følelses-baserede processeringer) (Bora & Zorlu, 2017; Le Berre, 2019; Le Berre et al., 2017);
- 3) Non-emotionel kognitiv dysfunktion (fx opmærksomhed, eksekutive funktioner, hukommelse) (Crowe et al., 2020; Le Berre et al., 2017; Stavro et al., 2013).

Andel afholdende efter Approach Bias Modification training (4 sessioner) (n=300)

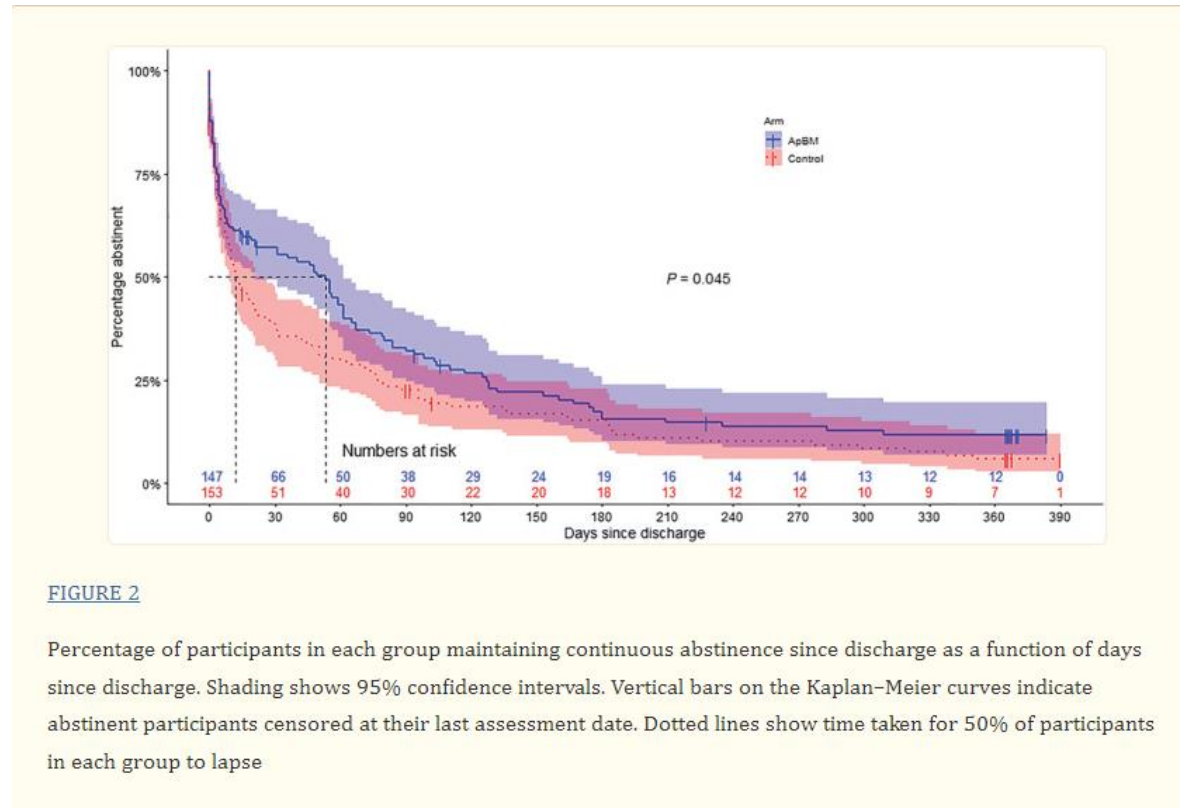
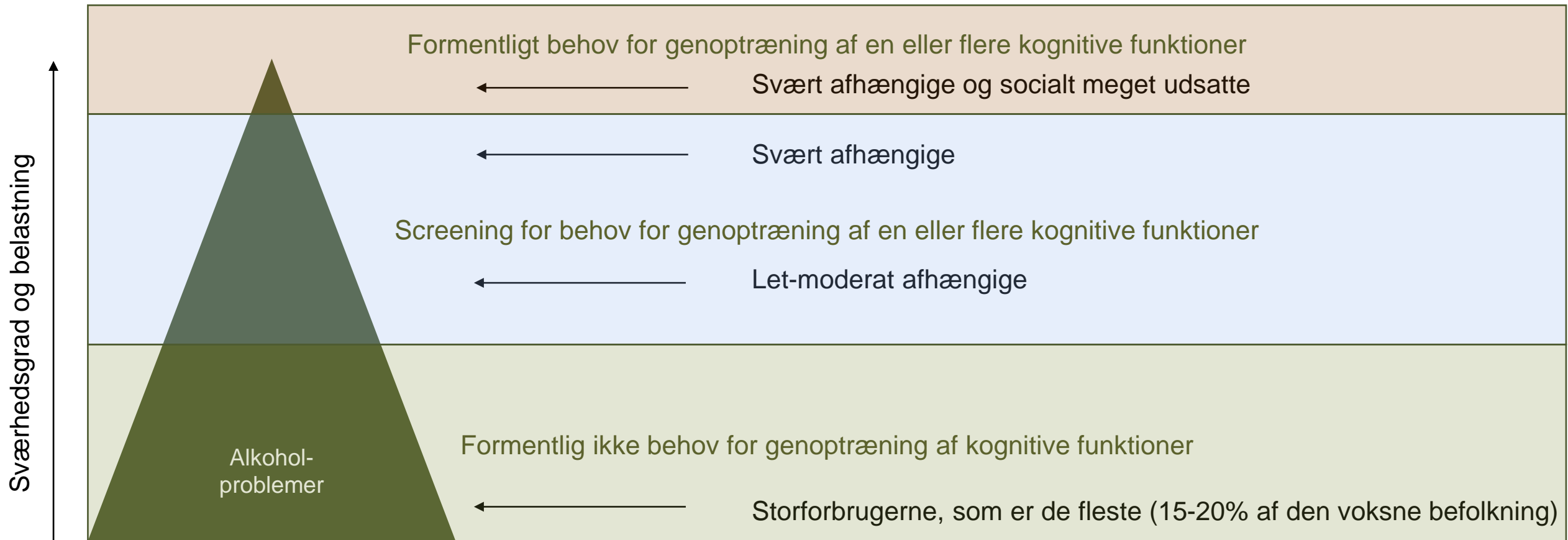


FIGURE 2

Percentage of participants in each group maintaining continuous abstinence since discharge as a function of days since discharge. Shading shows 95% confidence intervals. Vertical bars on the Kaplan-Meier curves indicate abstinent participants censored at their last assessment date. Dotted lines show time taken for 50% of participants in each group to lapse



Vejen frem mod fremtidens alkoholbehandling går gennem:

1. Promovering
2. Organisering
3. Digitalisering
4. Involvering
5. Optimering





Thank you!