Every day, more than 700,000 people in the United States receive treatment for alcoholism. In recent years, much progress has been made in understanding how both psychological approaches (such as cognitive-behavioral therapy, motivational enhancement therapy, and 12-step programs such as Alcoholics Anonymous) and medications can help these patients achieve sobriety.

A major change in the alcohol field has been the growing acceptance of the need for research on alcohol treatment. Today's professionals in the fields of both alcoholism treatment and managed care expect to have scientifically validated screening, assessment, and treatment options. As described in this chapter, research in this area has led to several important advances, including the development of effective “brief intervention” by primary care physicians for people at risk of alcohol problems, the rigorous analysis of traditional screening and treatment approaches, and the development of new medications for treating alcoholism.

One in 5 men and 1 in 10 women who visit their primary care providers meet the criteria for at-risk drinking, problem drinking, or alcohol dependence, according to a recent study (Manwell et al. 1998). Many of these patients do not consult alcohol treatment specialists on their own, so their primary health care providers have an important opportunity to identify and treat potential or existing drinking problems. The section “Screening and Brief Intervention for Alcohol Problems” describes a number of alcohol screening instruments that have been tested and validated in clinical settings.

When patients are found to be at-risk or problem drinkers but not alcohol dependent, health care providers can significantly reduce alcohol use and related problems by providing brief interventions. Brief interventions can take many forms, but basically consist of feedback and advice from the health care provider and agreement by the patient on a course of action. Although research has shown that brief interventions can be effective in a variety of populations, providers have not yet widely implemented this approach, at least in part because of a lack of adequate training and the complexity of the current health care system.

For patients who are alcohol dependent, numerous inpatient and outpatient treatment options are available. In recent years, escalating health care costs have propelled a shift from inpatient to outpatient treatment for most patients for all stages of recovery, although inpatient care remains more appropriate for patients with serious cooccurring medical or psychiatric conditions or who have social environments that are not supportive of recovery.
Chapter 8: Treatment Research

Whether inpatient or outpatient, the treatment can involve psychological approaches, medications, or a combination of the two.

An important task for the scientific community has been to evaluate the effectiveness of the many psychological therapies currently used to treat alcoholism. As described in the section “Treatment of Alcohol Dependence With Psychological Approaches,” research progress in recent years has led to a number of important findings, including the following: (1) matching broad categories of client characteristics to different types of treatments does not substantially improve overall treatment outcomes; (2) professional treatments based on 12-step approaches can be as effective as other psychological approaches and may actually achieve more sustained abstinence; (3) supportive ancillary services can be effective in remediating common problems that cooccur with alcoholism; and (4) higher intensity outpatient treatment may help patients gain control over drinking more quickly.

Although psychological therapies can help many alcohol-dependent persons reduce their drinking and maintain abstinence, these approaches alone are not effective for all patients. Advances in neuroscience have helped identify many of the mechanisms underlying addiction, paving the way for improved treatment options through the use of medications. The section “Treatment of Alcohol Dependence With Medications” describes new pharmacotherapy approaches for alcoholism treatment that operate at the molecular level of brain processes that promote and control addiction. Used in combination with psychological approaches, these targeted medications may offer more effective treatment for millions of alcohol-dependent persons. The section describes recent advances in pharmacotherapy research in two areas: (1) medications specifically used to treat alcohol dependence, and (2) medications used to treat some patients who suffer not only from alcohol dependence but also from psychiatric disorders, primarily depression.

Continued research to refine therapies for alcoholism will have widespread benefits for alcohol-dependent individuals who face the realistic fear of relapse, for their families, and for society as a whole, which bears the weight of the enormous economic and social costs of problem drinking.

Reference