1.1 Advice can be an effective alternative to using drugs to aid alcohol detoxification at home

Findings 95 patients referred by GPs to a Scottish home-based
 alcohol detoxification service were randomly allocated to the
 standard regime (eight visits over a five-day detox using
 chlordiazepoxide) or to an 'advice-only' intervention (two-hour
 advice session plus self-help booklet, no drugs prescribed, follow u
 visit four weeks later). Six months after treatment, 76 formerly

advice session plus self-help booklet, no drugs prescribed, follow up visit four weeks later). Six months after treatment, 76 formerly alcohol dependent patients were re-interviewed. Most had cut their drinking substantially. The only statistically significant difference between treatments was in duration of abstinence (nearly four months versus just over two) but this and other measures favoured the more intensive treatment.

In context Home detoxification is accepted as a safe and costeffective option for motivated clients not at severe risk and with a
stable home environment, including a responsible adult and
supportive family. The regime tested here is typical but the
comparison intervention exceeded what's normally termed 'brief' as
well as being delivered by specialist nurses after a two-hour
assessment. Briefer interventions are often tested only with more

promising clients, but many of the current study's advice-only group had experienced a substantial drink problem for a decade. Probably many were drinking above the limits normally recommended for drug-free detox but in both groups nearly half were 'binge' rather than regular drinkers.

Practice implications Standard home detoxification has at least medium-term benefits for many dependent drinkers with a suitable home environment. However, for a substantial proportion, shorter, drug-free interventions staffed by alcohol specialists may be an adequate and less expensive alternative; more rapid return to drinking seems the main drawback. If these relapses can be picked up (eg, through follow-up visits), such patients might be offered

extra support. Concentrating support on those who need it might result in an overall improvement in cost-effectiveness as well minimising the danger of medication being abused. These findings do not contradict advice that fully fledged treatment regimes should be kept available for more serious cases.

Main sources Bennie C. "A comparison of home detoxification"

and minimal intervention strategies for problem drinkers". Alcohol and Alcoholism: 1998, 33(2), p. 157–163. Copies: apply Alcohol Concern.

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