

## Background

### Cirrhosis Care Alberta (CCAB)



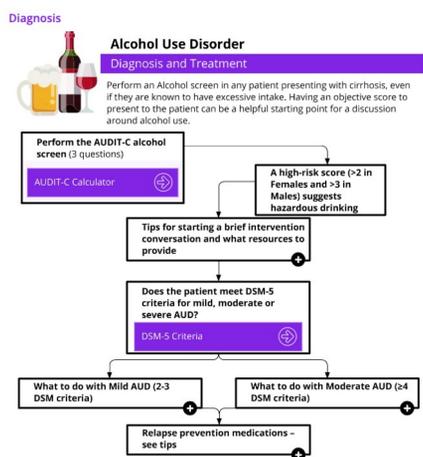
- Cirrhosis is a leading cause of morbidity and mortality in patients with digestive disease.
- Mean costs per admission ~\$28,000 at UAH.
- CCAB is a 4-year multi-component pragmatic

trial which aims to address gaps in care for patients with cirrhosis.

- **One major gap identified by the team was alcohol use disorder (AUD)**

### Caring for people living with concomitant cirrhosis and AUD

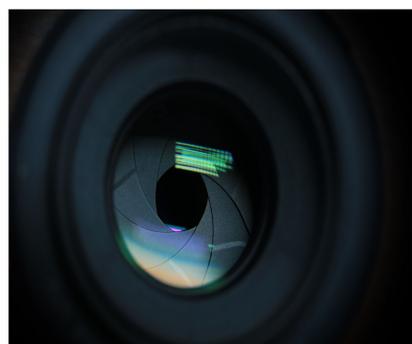
- Comfort and limited knowledge about managing AUD are two significant barriers to identification and access to treatment for people living with concomitant cirrhosis and AUD.
- Clinicians are crucial to connect patients to treatment, yet many well-intentioned clinicians report insufficient training and misconceptions about caring for people living with AUD and cirrhosis.



## Objectives

### The effect of a brief educational intervention

We aimed to compare the effect of a brief educational intervention on AUD knowledge, comfort, attitudes, and preparedness in clinicians who interface with patients who have cirrhosis and AUD pre versus post training



## Research Design

### Design & Participants

- We used a pre post survey design
- Clinicians across Alberta who care for patients with AUD and cirrhosis were invited to participate in a 1.5-hour didactic educational session conducted by a hepatologist and physician specialized in addiction medicine.
- Pre-training knowledge, comfort, and preparedness were measured using previously published questions. Baseline attitudes towards patients were measured using the Short Alcohol and Alcohol Problems Perceptions Questionnaire. Questionnaires were repeated immediately post-training and statistical analysis was conducted.

### Educational intervention

The 1.5-hour educational session included screening, brief intervention, and pharmacotherapy options for this patient population, with time for question and answer



## Findings

### Participants

Eighty-two clinicians attended the session. Thirty-eight attendees completed both the pre and post training questionnaires.

- 34.3% were gastroenterologists/internists
- 44.7% were family medicine physicians
- The remainder did not specify or were not prescribers

### Results

	Pre-test mean (SD)	Post-test mean (SD)	95% CI	P-value	Cohen's d
<b>Preparedness</b>					
To screen and diagnose AUD	3.34 (.847)	3.82 (.393)	.135, .201	0.001	.727
To provide a brief intervention	2.76 (.913)	3.58 (.500)	.564, 1.068	<0.001	1.114
To refer patients for treatment	3.00 (.959)	3.55 (.504)	.231, .874	0.001	.718
<b>Intention</b>					
To screen every patient for AUD	4.97 (1.20)	5.73 (.740)	.354, 1.112	<0.001	0.740
Provide medical advice about AUD	5.39 (1.02)	5.77 (0.560)	-0.074, 0.097	0.097	0.462
Provide a brief intervention	5.26 (.930)	5.74 (.682)	.131, .837	0.009	.589
Prescribe anti-relapse medications	4.58 (1.46)	5.19 (1.2)	.072, 1.154	0.028	0.457
<b>Comfort</b>					
Prescribing Acamprostate for AUD	2.36 (.824)	3.16 (.754)	.534, 1.034	<0.001	1.013
Prescribing Baclofen for AUD	2.19 (.616)	2.97 (.677)	.560, 1.008	<0.001	1.205
Prescribing Gabapentin for AUD	2.49 (.651)	3.14 (.673)	.424, .909	<0.001	0.982

	Pre (Mean + SD)	Post (Mean + SD)	Mean difference	95% CI	P-value	Cohen's d
Total SAAPPQ-score	51.18 (7.36)	54.37 (6.77)	3.184	.083, 6.285	0.044	0.451
Role adequacy	10.05 (2.24)	11.08 (1.98)	1.026	.083, 1.970	0.034	0.487
Role legitimacy	11.05 (1.77)	11.34 (2.41)	.289	-7.12, 1.291	0.56	0.137
Motivation	10.11 (2.08)	11.05 (1.97)	.947	.0273, 1.867	0.044	0.464
Task specific self esteem	9.74 (2.42)	10.21 (1.83)	.474	-.341, 1.289	0.25	0.219
Work satisfaction	10.24 (2.10)	10.68 (1.80)	.447	-2.88, 0.23	0.23	0.225

### Conclusions & Next Steps

A brief educational session was effective in promotion of knowledge, attitudes, preparedness, and comfort caring for people with AUD and cirrhosis.

- Using the data gathered from these sessions, we developed and are analyzing the effectiveness of a 3-part interactive series with practical skill application.

## Acknowledgements & Contact Information

The study team would like to thank all the study participants for sharing their perspectives and taking part in the education sessions.

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Emily Johnson  
ecjohnso@ualberta.ca

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