



# Nurses’ Knowledge of Alcohol-Interactive Medications

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## Background

- Alcohol and prescription medications are popularly consumed in the United States. However, many medications are alcohol interactive (AI). Concurrent consumption of alcohol and AI medications can result in alcohol related adverse drug reactions (ADRs).
- Nurses are in a position to catch and prevent potential alcohol related ADRs.
- No research has been conducted to assess nurses’ functional knowledge of AI medications.

## The Purposes of this Literature Review Were to Assess:

- The prevalence of AI medication use.
- Any prophylactic efforts against alcohol related ADR’s used by healthcare providers.
- The need for further research.

## Conclusion & Implications

- The use of AI prescription medications, and with it the risk of alcohol related ADRs has increased significantly over the last 15 years.
- Nurses should regularly assess alcohol and other drug use in all patients by using a valid and reliable tool. Patient education about safe self-medication is imperative. Few other prophylactic efforts were identified in the literature.
- Further research is needed to assess nurses’ knowledge of AI medications. Nurses can mitigate risk of alcohol related ADRs by vigilance and education.

## Select Articles from the Literature Review

Title	Prevalence of alcohol-interactive prescription medication use among current drinkers: United States, 1999 to 2010.	A call for universal alcohol, drug screening.	The prevalence of potential alcohol-drug interactions in older adults.	A profile of concurrent alcohol and alcohol-interactive prescription drug use in the US population.	Potential for alcohol and prescription drug interactions in older people.	Teaching older adults to self-manage medications: Preventing adverse drug reactions.	Potential for adverse drug-alcohol interactions among retirement community residents.
Author(s) & Year	Breslow, et al., (2015).	Michell, et al., (2015).	Immonen, et al., (2013).	Jalbert, et al., (2008).	Pringle, et al., (2005).	Curry, et al., (2005).	Adams, (1995).
Purpose Statement	To determine the prevalence of AI prescription medication use among current drinkers in the U.S. population.	To argue that screening for alcohol and other drug use should be part of every initial patient assessment.	To asses the possibility of clinically significant drug-alcohol interactions among older adults (ages 65+).	To assess prevalence and correlates of concurrent alcohol and AI medication use.	To assess the patterns and prevalence of concurrent alcohol and AI medication use in older adults.	To provide nurses with information needed to teach older adults (ages 65+) how to self-medicate safely.	To determine the frequency of alcohol and medication use and the potential for specific alcohol related ADRs in older adults (ages 65+).
Design & Method	Descriptive Survey	Editorial – Call to Action	Descriptive Survey	Descriptive Survey	Descriptive Survey	Review Article	Descriptive Survey
Important Findings	<div><div>➤ 41.5% prevalence of AI medication use among current alcohol drinkers in the U.S.</div><div>➤ Concern regarding the likelihood of concurrent alcohol consumption, and AI medication use is warranted.</div></div>	<div><div>➤ Nurses should use the evidence-based practice of “Screening, Brief Intervention, and Referral to Treatment” guidelines (SBIRT).</div><div>• <i>Guidelines include interventions that target individuals without drug dependence to provide effective, preemptive intervention.</i></div></div>	<div><div>➤ Widespread concurrent use of AI medications and alcohol, in older adults.</div><div>➤ 42.2% prevalence of AI medication use in “At risk alcohol users” (7+ drinks per week, or 5+ drinks per day).</div></div>	<div><div>➤ 31.5% of U.S. adults (ages 20+), took prescription AI medications</div><div>➤ 5.6% reported consuming 3 or more alcoholic beverages at one time.</div></div>	<div><div>➤ 77% of subjects were taking prescription AI medications.</div><div>➤ 19% of subjects taking AI medications reported use of alcohol.</div><div>➤ Men (ages 70-74) with higher education levels were at higher risk for concurrent consumption.</div></div>	<div><div>➤ Patient education should include:</div><div>• <i>Basic facts about medications (name, number of doses, adverse effects).</i></div><div>• <i>How to safely take medications.</i></div><div>• <i>Where to obtain and store medications.</i></div></div>	<div><div>➤ 38% (N=311) older adults (mean ages 77-89) reported using both alcohol and at least one AI medication.</div></div>