# Harmful Drinking in the Elderly

Chris Sinclair and Shirley Mckinney
Nurse specialists
65alive AOD service for seniors
Odyssey House





Drinks less than once a month. Limits drinking to 1-3 drinks. Drunk only a few times in life.

Has "several" drinks several times a week. Drinks until "buzzed" weeklu. Drunk once a month.

Drinking-related problems tend to increase over time (and increased use) and may include arrests and legal difficulties; family and relationship problems; missed work or lost jobs; money problems and unpaid bills; interpersonal issues (arguments, injuries); sexual dusfunction (impotence, frigidity); and health problems.



SOCIAL



**CARELESS DRINKING** 



**HEAVY DRINKING** 

NO DRINKING

LIGHT



**IMMODERATE** 

Drinks 1-4 times a month 1-3 drinks at a time Occasionally tipsy

Drunk a few times a year







When you drink, you often drink too much. Problems can include...

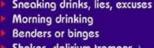
- Family (quarrels, arguments)
- Job (misses work occasionallu)
- Moneu (insurance rate increases)
- Law (arrests or litigation)
- Sex (impairment or promisculty)

#### PROBLEM DRINKING



Unable to predict the amount, frequency, duration, or effects of drinking, Sumptoms include:

- ► Changes in tolerance
- ▶ Withdrawal effects
- Frequent blackouts
- ▶ Serious health problems



- Hospitalization
- Death

Sneaking drinks, lies, excuses Shakes, delirium tremens



Increasingly Serious Problems Caused (or Intensified) by Drinking

Bottom line: You don't have to be an alcoholic to have a drinking problem. (And you don't have to create more problems for yourself before you do something about it.)



ALCOHOLISM















# Elderly Problematic Drinkers

• 2/3- Early Onset drinkers

• 1/3 –Late Onset drinkers

Hidden and Increasing problem

#### Why is It Hidden?

- Low index of Suspicion
- Elderly more likely under report their drinking
- Alcohol Mimics / competes other medical conditions
- Beliefs and myths
- Shame and discomfort

#### Screening Tools

- MAST-G
- 24-yes /No Questions
- Age Specific
- High Sensitivity 9/-93%, specificity 65-84%

- THE 4 L's
- ∘ -L=Lover
- ∘ -L=Liver
- ∘ -L=Legal
- -Livelihood

#### Treatment Approaches

- Education –Re Safe Use
- Brief Interventions, mental health assessment/treatment
- Family Work
- Motivational Counselling
- Cognitive Behavioural Approaches
- Group Support Work

#### Effects of Alcohol in Resthomes

- Delirium/cognitive Impairment (4-10% Dementias Alcohol related)
- Disinhibition/ Disruptive to other residents...staff resources
- Safety Issues...(often smoking within the complex)
- Falls...RH duty of Care
- Value Judgements, family Involvement, supply issues
- Lack of other care options

### Family Issues

- Acknowledging the problem, Where to get help, Safety issues
- Getting Accurate Information and Appropriate Support
- Other substance use within the family
- Embarrassment, Guilt and Shame
- Management Strategies for Family eg enabling
- Crisis management, Treatment sabotage, Neglect, Elder Abuse

## In Conclusion

Recognition of the problem is difficult

Treatment is Effective

• Treatment Should be tailored to suit the Older Person

• The problem will increase in the Future , by 2020 numbers estimated to double

# Brief Case Study; Jan

- 72 yr old European, Divorced female, 3 Adult children and Grandchilden
- Currently lives in a serviced apartment within a Resthome complex (Aug 2015)
- Approx 30yr History of heavy Alcohol use
- Meets dependence criteria DSM4.7-7, with multiple past admissions for severe Alcoholism and medical detox
- A number past AoD residential treaments, mostly residential.
- Severest period last 12-13 years
- Non smoker, no other drug use

#### Past 2 Years

- July 2015-Admitted ADHB-Older Persons Health, following a fall, when heavily intoxicated
- Jan has a history of Osteoporosis and spinal scoliosis
- A History of Major Depressive Disorder pre-dating her drinking
- Resthome Life for Jan, as she continued drinking

# Making Decisions for Change

MDT meeting with resthome management, Jan and her family, and GP

Outcome of Meeting and Plan

Interventions

Current-3 month Plan- Jan, Family, Resthome Staff

