NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

**NICE INDICATOR DEVELOPMENT PROGRAMME**

**Resource impact statement: NM177**

**Date:** August 2019

# Indicator

NM177: The percentage of patients with a new diagnosis of depression or anxiety in the preceding 12 months who have been screened for hazardous drinking using the FAST or AUDIT-C tool in the 3 months before or after their diagnosis being recorded.

# Introduction

Alcohol is a cause of significant public health burden, but use is widespread amongst most groups of society. Alcohol is the leading cause of ill-health, early mortality and disability in those aged 15-49 years of age ([NHS Digital 2017b, Statistics on alcohol](https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-alcohol/statistics-on-alcohol-england-2017)). Alcohol misuse contributes to 200 health conditions including depression. It is sometimes used by people to self-manage symptoms of anxiety and depression but is likely to make those symptoms worse. In 2017/18 there were 37,285 admission episodes for mental and behavioural disorders due to the use of alcohol. Tools such as AUDIT-C and FAST can help to identify at risk drinkers who may not be alcohol dependent but drink too much.

Managing alcohol intake can reduce risk of developing depression and anxiety and can help to manage symptoms in those with anxiety and depression. This indicator aims to identify people with depression or anxiety who are at risk of hazardous alcohol consumption.

# Resource impact

The resource impact of the proposed indicator is unlikely to be significant. Expert opinion is that it is already standard practice to conduct alcohol screening for people with depression or anxiety and use of the FAST or AUDIT-C tools is not expected to lead to any additional costs.

Long term savings may be achieved by better managing the symptoms of anxiety and depression.