

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

SCOPE

This is the scope for the third of three pieces of NICE guidance addressing alcohol-use disorders.

Part 1 – Prevention (developed by the Centre for Public Health Excellence at NICE, publication expected May 2010)

The prevention of alcohol-use disorders in people 10 years and older, covering: interventions affecting the price, advertising and availability of alcohol; how best to detect alcohol misuse both in and outside primary care; and brief interventions to manage alcohol misuse in these settings.

Part 2 – Clinical management (developed by the National Collaborating Centre for Chronic Conditions, publication expected May 2010)

The assessment and clinical management in adults and young people 10 years and older of: acute alcohol withdrawal including delirium tremens; liver damage including hepatitis and cirrhosis; acute and chronic pancreatitis; and the management of Wernicke's encephalopathy.

Part 3 – Dependence (developed by the National Collaborating Centre for Mental Health, publication expected January 2011)

The diagnosis and management of alcohol dependence and harmful alcohol use in people 10 years and older including: identification, assessment, pharmacological and psychological/psychosocial interventions, and the prevention and management of neuropsychiatric complications of alcohol dependence or harmful alcohol use.

1 **Guideline title**

Alcohol dependence and harmful alcohol use: diagnosis and management in young people and adults

1.1 **Short title**

Alcohol dependence and harmful alcohol use

2 **Background**

- a) The National Institute for Health and Clinical Excellence ('NICE' or 'the Institute') has commissioned the National Collaborating Centre for Mental Health to develop a clinical guideline on alcohol dependence and harmful alcohol use for use in the NHS in England and Wales. This follows referral of the topic by the Department of Health (see appendix). The guideline will provide recommendations for good practice that are based on the best available evidence of clinical and cost effectiveness.
- b) NICE clinical guidelines support the implementation of National Service Frameworks (NSFs) in those aspects of care where a Framework has been published. The statements in each NSF reflect the evidence that was used at the time the Framework was prepared. The clinical guidelines and technology appraisals published by NICE after an NSF has been issued have the effect of updating the Framework.
- c) NICE clinical guidelines support the role of healthcare professionals in providing care in partnership with patients, taking account of their individual needs and preferences, and ensuring that patients (and their carers and families, if appropriate) can make informed decisions about their care and treatment.

3 Clinical need for the guideline

- a) There are two main sets of diagnostic criteria in current use, the International Classification of Mental and Behavioural Disorders 10th Revision (ICD-10) and the Diagnostic and Statistical Manual of Mental Disorders fourth edition (DSM-IV). The ICD-10 definition of alcohol dependence (alcohol dependence syndrome) makes reference to a cluster of physiological, behavioural, and cognitive phenomena in which the use of alcohol takes a much higher priority than other behaviours. The DSM-IV defines a person with alcohol dependence as someone who continues the use of alcohol despite significant alcohol-related problems. In terms of harmful alcohol use, the ICD-10 defines 'harmful use' as a pattern of drinking that causes damage to physical and mental health.
- b) Psychiatric disorders and problems associated with alcohol dependence and harmful alcohol use include: depression, anxiety, personality disorders, post traumatic stress disorder, drug misuse, self-harm, suicide and brain damage. Alcohol use disorders are also associated with a wide range of physical problems, including liver disease, various cancers, heart disease and stroke.
- c) The Alcohol Needs Assessment Research Project estimated that 38% of males and 16% of females aged between 16 and 64 have an alcohol use disorder, and that 6% of men and 2% of women have alcohol dependence. There is a lack of reliable UK data on prevalence rates of alcohol use disorders in children.

4 The guideline

- a) The guideline development process is described in detail in two publications that are available from the NICE website (see 'Further information'). 'The guideline development process: an overview for stakeholders, the public and the NHS' describes how organisations can become involved in the development of a guideline. 'The

guidelines manual' provides advice on the technical aspects of guideline development.

- b) This scope defines what this guideline will (and will not) examine, and what the guideline developers will consider. The scope is based on a referral from the Department of Health (see appendix).
- c) The areas that will be addressed by the guideline are described in the following sections.

4.1 *Population*

4.1.1 Groups that will be covered

- a) Young people (10 years and older) and adults with a diagnosis of alcohol dependence or harmful alcohol use.

4.1.2 Groups that will not be covered

- a) Children younger than 10 years.
- b) Pregnant women.

4.2 *Healthcare setting*

- a) Care provided by primary, community and secondary healthcare and social care professionals who have direct contact with, and make decisions concerning, the care of young people and adults with alcohol dependence or harmful alcohol use. This will include:
 - care in general practice
 - community- and residential-based care, including inpatient treatment and rehabilitation
 - the primary/secondary care interface
 - transition through the range of healthcare services from childhood to older adulthood
 - the criminal justice system, including prison healthcare.

- b) This is a guideline for alcohol services funded by or provided for the NHS. It will make recommendations for services provided within the NHS, social services, the independent sector and non-statutory services.

4.3 *Clinical management*

4.3.1 Areas that will be covered by the guideline

- a) Definitions of alcohol dependence and harmful alcohol use according to the main diagnostic classification systems (ICD-10 and DSM-IV).
- b) Early identification of alcohol dependence or harmful alcohol use in people in at-risk populations, in particular treatment-seeking populations, and identification of factors that should lead to investigation into the possibility of alcohol dependence or harmful alcohol use (please refer also to the prevention and clinical management guidance currently under development, see section 5).
- c) Identifying people with alcohol dependence and harmful alcohol use in clinical practice, including the sensitivity and specificity of different methods, and thresholds.
- d) Assessment, including identification and management of risk, and assessment of severity of alcohol-related problems, dependence and alcohol withdrawal.
- e) Development of appropriate care pathways that support the integration of other NICE guidance on the management, treatment and aftercare of alcohol misuse.
- f) The range of care routinely available in the NHS.

- g) Pharmacological interventions, for example, initiation and duration of treatment, management of side effects and discontinuation. Specific pharmacological treatments considered will include:
- opioid antagonists (naltrexone and nalmefene)
 - acamprosate
 - disulfiram
 - topiramate
 - baclofen
 - chlordiazepoxide
 - serotogenic agents (selective serotonin reuptake inhibitors and serotonin-3 receptor antagonist, ondansetron).
- h) Note that guideline recommendations will normally fall within licensed indications; exceptionally, and only if clearly supported by evidence, use outside a licensed indication may be recommended. The guideline will assume that prescribers will use a drug's summary of product characteristics to inform their decisions for individual patients.
- i) Common psychological and psychosocial interventions currently provided, for example, 12-step programmes, cognitive behavioural therapy, motivational enhancement therapy, relapse prevention, contingency management and community reinforcement approach.
- j) Low intensity psychological interventions, for example, referral to Alcoholics Anonymous and guided self-help.
- k) Combined pharmacological and psychological/psychosocial treatments.
- l) Management of alcohol withdrawal in community and residential settings.

- m) Management of common mental health problems and drug misuse in the context of alcohol dependence, if this differs from their management alone.
- n) Prevention and management of neuropsychiatric complications of alcohol dependence or harmful alcohol use including:
 - alcohol related brain damage
 - Wernicke–Korsakoff syndrome.
- o) Sensitivity to different beliefs and attitudes of people of different genders, races and cultures, and issues of social exclusion.
- p) The role of family and carers in the treatment and support of people with alcohol dependence and harmful alcohol use (with consideration of choice, consent and help), and support that may be needed by family and carers (such as conjoint marital therapy and family therapy).
- q) The Guideline Development Group will consider making recommendations on complementary interventions or approaches to care relevant to alcohol dependence and harmful alcohol use.
- r) The Guideline Development Group will take reasonable steps to identify ineffective interventions and approaches to care. If robust and credible recommendations for re-positioning the intervention for optimal use, or changing the approach to care to make more efficient use of resources, can be made, they will be clearly stated. If the resources released are substantial, consideration will be given to listing such recommendations in the 'Key priorities for implementation' section of the guideline.

4.3.2 Areas that will not be covered by the guideline

- a) Treatments not normally made available by the NHS.
- b) The separate management of comorbid conditions.

- c) The management of acute alcohol withdrawal in the emergency department and general medical and surgical settings. This will be covered in 'Alcohol-use disorders in adults and young people: clinical management' (publication expected May 2010).
- d) The prevention and management of Wernicke's encephalopathy. This will be covered in 'Alcohol-use disorders in adults and young people: clinical management' (publication expected May 2010).

4.4 Status

4.4.1 Scope

This is final scope.

4.4.2 Guideline

The development of the guideline recommendations will begin in March 2009.

5 Related NICE guidance

Published

Antenatal care: routine care for the healthy pregnant woman. NICE clinical guideline 62 (2008). Available from www.nice.org.uk/CG62

Interventions in schools to prevent and reduce alcohol use among children and young people. NICE public health guidance 7 (2007). Available from www.nice.org.uk/PH7

Behaviour change at population, community and individual levels. NICE public health guidance 6 (2007). Available from www.nice.org.uk/PH6

Community-based interventions to reduce substance misuse among vulnerable and disadvantaged children and young people. NICE public health intervention guidance 4 (2007). Available from www.nice.org.uk/PHI4

Schizophrenia: core interventions in the treatment and management of schizophrenia in primary and secondary care. NICE clinical guideline 1 (2002). Available from www.nice.org.uk/CG1

Under development

NICE is developing the following guidance (details available from www.nice.org.uk):

- Alcohol use disorders in adults and young people: clinical management. NICE clinical guideline (publication expected May 2010).
- Alcohol use disorders in adults and young people: prevention and early identification. NICE public health guidance (publication expected May 2010).
- Pregnant women with complex social factors: a model for service provision (publication expected August 2010).

6 Further information

The guideline development process is described in:

- 'The guideline development process: an overview for stakeholders, the public and the NHS'
- 'The guidelines manual'.

These are available from the NICE website (www.nice.org.uk/guidelinesmanual). Information on the progress of the guideline will also be available from the website.

Appendix: Referral from the Department of Health

The Department of Health asked NICE:

‘To prepare a clinical guideline on the management of alcohol dependence, including the management of alcohol-related brain damage.’