

## **A 4-5 Year Follow-up Study of Male Alcoholism .**

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~~A. Sharma & R. Srinivasa Murthy .~~

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- Department of Psychiatry, National Institute of Mental Health & Neuro Sciences, Bangalore 560 029, India

### *Abstract*

Seventy one patients admitted for treatment of alcohol dependence in 1979, from Bangalore city were followed-up after 4-5 years. Out of 74.7% contacted 8.5% had died. Of the group, only 47.9% maintained follow-up contact with hospital. Of 47 patients for whom complete information was available, only 4.3% (2) were abstinent for the entire period of follow-up, 25.6% were drinking less than previously, 17% were abstinent for six months prior to follow up contact and 38.3% had reduced the amount of drinking compared to index admission. Depression was found in 40% of the subjects and 53.5% had abnormalities on physical examination. The improved group generally were older, had better physical health, less psychiatric morbidity, better marital life, social life and occupational functioning.>

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Key words -

**Alcohol dependence,  
Follow-up**

Alcohol use is a growing problem in the country [1], [2], [3]. A proportion of the users develop alcohol dependence. The working group on drug and alcohol dependence of ICMR [4] after reviewing all relevant studies in India, identified as one of the areas for research "it would be worthwhile, indeed, to study the course of addiction over time, unravelling the factors such as - how many addicts give up this habit, how many suffer from complications, what are their accident rates, the social and physical harm they cause to self and others, drug substitution during the course of addiction, involvement with law enforcing agents and criminal acts etc." Although there have been some studies in India relating to the prevalence and related aspects, there is limited information on the course and outcome of alcohol dependence [5], [6], [7].

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### **Aim**

To follow-up a group of patients admitted for treatment of alcohol dependence after 4-5 years and study the course and outcome of the disorder.

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## Material and Methods

The study was carried out at NIMHANS. All the patients admitted for treatment of alcohol dependence during 1979 were scrutinised to select those with the above diagnosis (ICD-9 code No. 303) and coming from Bangalore city. A total of 71 male patients formed the sample. All these patients were initially contacted by a mailed letter and by home visits in those not responding to two letters. Data regarding the index admission was obtained from the case records and follow-up was evaluated using a specially prepared semistructured questionnaire. The follow-up evaluation focussed on the alcohol use pattern, physical and psychiatric problems, legal problems, other drug use, change in marital status, current level of functioning, occupational status, treatment status and understanding regarding the problem of alcohol dependence.

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## Results

Seventy-one patients were included for follow-up. Of these, 54 (74.7%) could be contacted and 18 (25.3%) could not be contacted. Of those contacted (patient or family member) in 47 (66.2%) complete information was available, 6 (8.5%) were dead. There were no demographic or clinical differences between the group contacted (74.7%) and lost for follow-up (25.3%).

Abstinent behaviour during the period of follow-up expressed as abstinence period percentage (APP) showed that 4.3% (2) has not taken alcohol throughout the follow-up period, 12.8% (6) had APP between 80-99%, 12.8% (6) with APP between 50-79% and 70.2% (33) had less than APP of 50%. Taking those with APP of above 50 as improved it is noted that 30% had improved and 70% had not. Help was sought by families or patients in 54% (24), the largest group from medical personnel, 66% (31) had experienced one or other psychiatric problem during follow-up period. 11.5% had abused other drugs. There was no major legal problems in the group. No change in marital status was noted in 94% of the subjects. However, less than one third rated the marital role functioning as satisfactory. 49% had shown a fall in their economic status and associated job problems in 70% of the subjects. At follow-up 72% expressed craving for alcohol and only 56% wanted to give up drinking. It was noted that 81% were not on any form of treatment. Physical examination and investigations showed that 56% had physical problems. 41% of the subjects had associated psychiatric problems, the commonest being depression.

The comparison of the group considered improved (30%) and not improved (70%) showed that the improved group were of

- (i) older age,
- (ii) abstinent for more than one year,
- (iii) had less psychiatric problem,
- (iv) had better physical health and
- (v) were functioning better in marital, social and occupational areas.

Six patients who died had a mean age of 46.6 years. All of them had been drinking continuously since index admission and deaths were related to alcohol dependence. There were no cases of suicide.

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## Discussion

The course and outcome from this study is in line with those reported by other investigators [8], [9], [10]. More than two-thirds belonging to the not improved group highlights, the chronic nature of the problem as well as the continuing burden to the family and community. The need for a complex set of interventions is also clear as admission alone has been found to have little value. It is often opined that patients left to themselves would find a way out for themselves, that is, some would stop drinking or show improvement, after coming into contact with different agencies. In the present study only half of the patients or their families had been taking help during the intervention period. Again, there is need to reconsider the way, services are organised for the care of the persons with alcohol dependence and their families. The mortality rate 8.5% of the sample is comparable to other studies. All except one person had died at a younger age than expected and were taking alcohol daily.

The observations focus on the need to study as routine course and outcome of alcohol dependence using multiple dimensions for evaluation. It is also necessary to study the problem with groups of persons with alcohol dependence living in the community, but not hospitalised as in the case of the present study.

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