2.1 SUMMARY

2.1.1 Background
Brief alcohol intervention (BAI) is an effective modality to decrease alcohol use and alcohol-related problems observed in 20% of patients in primary care. Teaching BAI to primary care residents is a major challenge for the success of implementation of BAI in primary care.

2.1.2 Working hypotheses
1) Teaching BAI to primary care residents improves residents’ skills, attitudes, and knowledge regarding alcohol counseling.
2) BAI conducted by primary care residents is effective in reducing hazardous drinkers’ alcohol use.

2.1.3 Methods
- Randomize 30 primary care residents in Lausanne and Geneva University Primary Care Centers into teaching BAI or control groups.
- Teach the BAI group to develop BAI skills.
- Teach control group about management of dyslipidemia.
- Screen hazardous alcohol use in a consecutive sample of 5329 patients seeking routine medical care.
- Evaluate the educational program by assessing:
  i. Residents’ skills, attitudes, and knowledge regarding hazardous drinkers before and 1 month after the educational program (Resident outcome I).
  ii. Residents’ satisfaction in interactions with hazardous drinkers, before and 1 month after the educational program (Resident outcome II).
  iii. Number of BAI counseling steps (out of 9) used by residents (Resident outcome III).
  iv. Persistence of the effects of teaching screening and BAI over time (Resident outcome IV).
- Perform a 3-month follow-up comparing hazardous drinkers’ alcohol use before and 3 months after screening and BAI (Hazardous drinker outcome A 1, 2, 3).
- Perform a 12-month follow-up on similar drinking outcomes (Hazardous drinker outcome B 1, 2, 3).

2.1.4 Expected value of the proposed project
- This study has important implications for the success of implementation of BAI in primary care.
- Successful implementation of BAI in Switzerland would dramatically decrease alcohol use and related problems.

2.1.5 Keywords
Medical education, BAI, primary care, residents, hazardous alcohol use.