

Empowering addiction treatment patients to engage in care may improve overall health

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In the first trial of an intervention focused on increasing alcohol and drug treatment patients' engagement in their own health care, researchers found that patients who received 6 intervention sessions had greater involvement in managing their health and health care than those receiving fewer sessions. The Kaiser Permanente study was published today in *JAMA Psychiatry*.

LINKAGE is innovative in its use of [electronic health records](#) and online patient portals to engage patients in health education and prevention and facilitate communication with their medical providers.

"Patients with alcohol and other drug use disorders have high rates of medical and psychiatric conditions requiring complex treatment, but often rely on emergency services and seldom use preventive services, even when they have health insurance," said lead author Constance M. Weisner, DrPH, chief of Behavioral Health and Aging at the Kaiser Permanente Northern California Division of Research, and a professor at the UCSF Department of Psychiatry. "We know that patients who are more engaged with their health care tend to manage their condition better and our study found that alcohol and drug [treatment patients](#) are no different."

The study, conducted at the Kaiser Permanente San Francisco outpatient addiction treatment clinic, enrolled 503 participants and assigned them to either standard care, including medical exams, detoxification, therapy groups, individual counseling and 12-step programs, or standard care

plus the LINKAGE intervention.

Patients in the standard care group received medical education sessions focused on alcohol- and drug-associated medical and psychological problems. LINKAGE participants joined group sessions focused on how health care is related to overall health, accessing and engaging with health care, and improving communication with physicians.

In addition, LINKAGE participants were taught how to use an online patient portal in order to send secure emails, view lab tests and medical information, as well as access preventive services. They also practiced skills necessary for collaborative communication with health providers and were offered a psychologist-facilitated telephone appointment, assistance with secure email, or help in preparing for an in-person visit with their primary care physician to discuss their addiction and treatment, health concerns and ongoing care.

LINKAGE participants had significantly more patient portal use during both the intervention period and through the 6-month follow-up period.

Compared to those in standard care, LINKAGE participants also:

- showed more than a 50 percent increase in average log-in days to the patient portal and across types of portal use
- had twice the odds of having talked to their physician about alcohol and drug problems outside of the treatment program

Participants with psychiatric conditions had findings similar to the full sample, indicating that the intervention was also beneficial in engaging patients with complex needs.

Among LINKAGE participants, those who received all six intervention sessions had higher patient portal use than those receiving fewer

sessions. They also had higher rates of abstinence from alcohol (83.7 percent vs. 71.7 percent) as well as from drugs and alcohol (77.6 percent vs. 65.4 percent), and they had longer stays in treatment (103.8 vs. 60.4 days).

"Alcohol and drug treatment patients often suffer from other medical conditions, and their care needs to be integrated with mainstream health care," said senior author Stacy A. Sterling, DrPH, MSW, of the Kaiser Permanente Northern California Division of Research. "Teaching addiction treatment patients how to access and use [health care](#) may empower them to better engage in managing their health and well-being. It will be instructive to see whether this approach is helpful in avoiding relapse and in improving their overall [health](#) when we conduct additional follow-up."

Provided by Kaiser Permanente

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