Dying for a drink: The role of the Accident and Emergency Department

We agree with Foster that greater attention must be paid to alcohol use disorders if national and international targets for suicide reduction are to be met. In addition to primary care based initiatives advocated in his editorial, we believe that the accident and emergency department (AED) also has a central role to play in tackling the link between alcohol misuse and suicidal behaviour as the majority of patients with deliberate self harm (DSH) present here.

Previous research has indicated that over half of men who present to hospital following an episode of DSH have consumed alcohol in the few hours preceding the attempt, 50% regularly drink excessive amounts of alcohol and 23% are alcohol dependent. Despite this strong association there is clear evidence that many patients who present to hospital following DSH receive no assessment of their alcohol use. At the AED at St Mary's Hospital, in Paddington in inner London, the proportion of patients whose alcohol consumption is assessed has been greatly increased by the introduction of a brief questionnaire, the Paddington Alcohol Test. The Paddington Alcohol Test takes less than a minute to complete and provides a reliable indication of the presence of alcohol use disorders. Those who test ‘positive’ are offered brief intervention from staff working in the AED which may include literature about safer drinking or an appointment with an alcohol health worker.

Providing assessment and treatment for people who attend AED following deliberate self harm is complicated because many people are reluctant to take up offers of help. However a recent audit of the management of alcohol problems in St Mary’s AED revealed that of 34 patients who presented following DSH and were test positive, 24 (71%) were prepared to take up an offer of further advice about their alcohol consumption. We are currently in the process of examining the effects that this advice has on the likelihood of further suicidal behaviour. Meanwhile, this evidence suggests that people who present to AED following deliberate self harm and are drinking excessively are willing to accept offers of help and emphasises the importance of identifying alcohol misuse problems in patients in the AED.

1. Foster T. Dying for a drink: Global suicide prevention should focus more on alcohol use disorders. BMJ 2001; 323:817-818


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