



# Exploring the experience of inpatients with severe alcohol use disorder on a managed alcohol program (MAP) at St. Paul's Hospital



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## Introduction

- Managed Alcohol Programs (MAP) are a harm reduction approach for people with severe alcohol use disorder (AUD) that provide alcohol in a structured setting
- Providence Health Care initiated a hospital-based managed alcohol program (HMAP) in July 2016 for inpatients at St. Paul's Hospital in Vancouver
- HMAP provides a significant opportunity for clinicians to engage with patients who may have had unsuccessful attempts at abstinence <sup>1</sup>

## Objectives

To explore the experience of patients with severe alcohol use disorder on a managed alcohol program while admitted to an acute care hospital.

## Results

- Semi-structured interviews were conducted (n=5)
- An interpretative descriptive methodology was used to guide the data analysis <sup>2</sup>
- Transcripts were individually analyzed by the authors, who then collaboratively created a coding guide

Participants

Variable	Mean (Range)
Age (years)	45 (25-58)
Female	3
Ethnicity	
Indigenous	4
Caucasian	1

## Methods

### Theme 1: Reasons for Alcohol Use-“I lost it”

Participants cited several factors associated with impulses to drink and the most significant factors leading to intoxication were emotional. Diane\*, for example, shared her reasons for drinking alcohol: *“lost my older sister, my second youngest brother, and... helped bury my baby sister... I lost it and I just went nuts and started drinking, that hand sanitizer...”*.

### Theme 2: Patients' perception of HMAP - “I'm very appreciative”

Participants largely had positive descriptions of the care received, which in many cases differed from past experiences. Jennifer: *“Oh, I've enjoyed it. I've been a butterfly! Just coasting in the air, feeling light and loved and important to feel that. And I've never had that experience before, so it's a new thing, you know. I'm surprised the hospital actually getting involved in that, but I'm pretty sure it will go a long ways”*.

### Theme 3: Impact on health: 1) Managing withdrawal – From just vibrating to calm; 2) Impact on psychological health - “It's kinda like a pacifier for me”

Most participants commented on how HMAP was effective in relieving their withdrawal symptoms and promoted a more relaxed experience for them. Robert: *“well, it helps you feel better. And it doesn't make you feel sick”*. Most participants talked about how it helped with their psychological health, Sarah: *“it calms me down when I'm being scared”*.

### Theme 4: Engagement with the treatment plan - “I have no need to go anywhere at all”

HMAP was identified as an incentive for them to stay in the hospital. Stephen: *“I really thought about going for a walk down at the liquor store the other day and getting myself my own personal mickey. And, I talked myself out of it. I thought, no, let's do this”*.

### Theme 5: Opportunities for improvement - “Might be nice to have a selection for other people”

Participants were asked for suggestions to improve the program and their suggestions were related to dosing, choices of alcohol, and frequency. Sarah: *“they've been giving me vodka – I really don't like it”*.

## Discussion and Conclusion

- The findings from this study show that participants are very appreciative of the new treatment, had a positive experience on HMAP, and have significant insight into reasons for consuming alcohol
- Participants also appreciated the benefits of HMAP, both physically and psychologically and endorsed its role in enhancing their engagement in treatment
- The finding of the effectiveness of HMAP in supporting psychological safety aligns with research findings that community MAP improves the overall quality of life and feelings of safety for program participants <sup>3</sup>
- Hospital-based MAPs offer a meaningful opportunity for the healthcare system to meet the needs of individuals who have largely been excluded from healthcare settings <sup>4</sup> and improve health outcomes
- The findings offer important feedback about the program and highlight opportunities to improve care for these highly marginalized patients
- Their perceptions can be used to inform implementation of MAPs in other hospital settings

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### References

1. Ivsins, A., Pauly, B., Brown, M., Evans, J., Gray, E., Schiff, R., . . . Stockwell, T. (2019). On the outside looking in: Finding a place for managed alcohol programs in the harm reduction movement. *International Journal of Drug Policy*, 67, 58-62.
2. Thorne, S. E. (2008). *Interpretive description*. United States of America: Walnut Creek, California; Left Coast Press, Inc.
3. Pauly, B. B., Gray, E., Perkin, K., Chow, C., Vallance, K., Krysowaty, B., & Stockwell, T. (2016). Finding safety: A pilot study of managed alcohol program participants' perceptions of housing and quality of life. *Harm Reduction Journal*, 13(1), 15.
4. Goodman, A., Fleming, K., Markwick, N., Morrison, T., Lagimodiere, L., Kerr, T., & Western Aboriginal Harm Reduction Society. (2017). "They treated me like crap and I know it was because I was native": The healthcare experiences of aboriginal peoples living in Vancouver's inner city. *Social Science & Medicine*, 178, 87-94.

\*Pseudonyms are used