Alcohol dependence in the Italian general population: diagnostic criteria according to general practitioners and to the CIDI (Composite International Diagnostic Interview)

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Keywords: alcohol dependence, general practitioners, early identification, CIDI questionnaire

Although in recent years alcohol consumption significantly reduced in Italy (63,9% of Italians drank at least one glass of wine in 2013 versus 68,7% in 2003) [1], alcohol dependence still causes marked mortality, with high disease burden, and the treatment rate is low. Primary care could play a key role in reducing such alcohol-attributable harm by screening, providing brief interventions and initiating or referring dependent people to treatment. A recent study in six European countries [2], including Italy, investigated primary care identification of alcohol dependent patients through a clinical evaluation and a structured interview according to an international validated questionnaire: the CIDI (Composite International Diagnostic Interview) [3]. This study reports the performance of a sample of 55 Italian general practitioners distributed in region Friuli-Venezia Giulia and Tuscany.

Aims of the study were to identify the criteria used by general practitioners (GPs) for the diagnosis of alcohol dependence (AD) and to compare them with the criteria of the CIDI. The 55 GPs conducted a clinical evaluation of the first 40 patients who came for a medical examination. The prevalence of AD diagnosed by GPs and CIDI and their association with socio-demographic variables, other diseases, and alcohol consumption were assessed.

AD prevalence, as assessed by the GPs with a clinical evaluation, was 5.4%, while AD prevalence assessed by the CIDI was 4.4%, with an overlap of about 26%. Patients identified as AD by the GPs were older and more frequently suffering from liver disease and hypertension than patients identified by the CIDI.

The limited overlap between diagnoses of AD made by GPs and the one made by the CIDI is problematic. GPs appear to identify mainly more severe forms of AD, in which excessive consumption of alcohol is associated with the presence of liver disease, while the CIDI could identify younger patients who have not yet developed diseases. GPs’ recognition of AD could be increased by using their expertise along with standardised questionnaires which measure alcohol consumption.
