

Executive summary



The prevalence of alcohol and drug use disorders in cancer patients and their caregivers, and the effects on caregiver burden

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Key findings

- Five percent of patients and 8% of caregivers screened positively for alcohol use disorders on the AUDIT.
- Six percent of patients and 3% of caregivers screened positively for drug abuse on the DAST-10.
- There was a significantly higher carer burden in caregivers screening positively for drug and alcohol problems.
- Carer burden was not affected by the patient's drug or alcohol abuse issues.

Research team

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Background

It is estimated that 8% of cancer deaths in men, and 3% in women, are attributable to excessive alcohol consumption. However, it is less well known whether excess alcohol consumption continues to be, or starts to be, a problem during the course of the illness.

Many people with advanced cancer are appropriately prescribed strong painkillers for their problems. However, there is limited published United Kingdom data assessing whether drug abuse exists in this population, either from prescribed opioids or other drugs.

Caregivers of advanced cancer patients suffer higher levels of distress and lower levels of well-being as compared to age-matched non-caregivers. There are few published studies that primarily assess the prevalence of alcohol and drug use disorders in both cancer patients and their caregivers. There are limited datasets evaluating the relationship between alcohol and drug abuse and carer burden, as well as the impact of the cancer patient's behaviours and symptoms on carer burden.

The aim of this study, supported by Alcohol Change UK, was to establish the prevalence of alcohol and drug use disorders in a large cohort of advanced cancer patients and their caregivers. Secondary aims were to evaluate the relationship between these problems and symptoms and carer burden. An overarching purpose of the study is to establish a large accurate dataset to determine if screening would be required for certain cohorts.

Methods

The cancer patient and caregiver completed the Alcohol Use Disorders Identification Tool, CAGE questionnaire, and Drug Abuse Screening Test. The patient completed the Memorial Symptom Assessment Scale- Short Form, and caregiver completed the Zarit Burden Questionnaire.

Statistical analysis compared cases and non-cases of alcohol and drug use disorders with symptom and burden score.

Findings

- 1 Twenty-seven patients (5%) and forty-four caregivers (8%) screened positively for alcohol use disorders on the AUDIT. In eight cases both the patient and caregiver screened positively
- 2 Fifty-seven patients (11%) and forty-eight caregivers (9%) screened positively for lifetime alcohol dependence using the CAGE questionnaire.
- 3 Eighty five percent (85%) of patients, and twenty seven percent (27%) of carers, were taking regular painkillers. The majority of painkillers were prescribed opioids. Thirty

patients (6%), and sixteen caregivers (3%), screened positively for drug abuse problems on the DAST-10.

- 4 There was a significantly higher caregiver burden score in caregivers screening positively for alcohol and drug abuse problems on the AUDIT, CAGE and DAST-10
- 5 Patients with AUDIT defined alcohol problems had *lower* global distress index (MSAS-GDI) and physical symptom scores (MSAS-PHYS) than those without. There was no difference in psychological symptoms (MSAS-PSYCH) between groups.
- 6 Caregiver burden was not affected by the patient's drug or alcohol abuse issues.
- 7 There was no difference in physical or psychological symptoms between patients screening positively and negatively with the CAGE or DAST-10.

Implications

The association of alcohol and drug use disorders with carer burden indicates the importance of screening and supporting caregivers of cancer patients. An individualised needs assessment is recommended to identify issues and implement support strategies. All patients started on strong painkillers should be monitored for drug misuse especially as many are now living with cancer, and taking painkillers, for longer time periods.

Conclusion

The prevalence of cancer patients' alcohol use disorders and dependence was lower than reported in previous studies. Only 5% of patients had harmful levels of alcohol use disorders in the previous year (AUDIT positive) with a higher number having a positive CAGE (11%). The CAGE questionnaire assessed lifetime dependence rather than current issues suggesting a proportion of patients had previously had problems but weren't currently using alcohol harmfully.

The level of current alcohol use disorders in patients and caregivers is lower than the general population for this age range taking into account sex differences. However, lifetime alcohol dependence rates (CAGE) are higher than equivalent general population for both patients and caregivers. This suggests that individuals with previous issues do not necessarily have current patterns of misuse but must be evaluated carefully and non-judgementally.

Eighty-five percent of patients were taking prescribed painkillers and six percent screened positively for drug abuse. This is the first estimated prevalence rate of drug abuse in cancer patients in the United Kingdom and is higher than general population levels accounting for age (aged 55+ drug abuse rates are less than 1%). Twenty-seven percent of caregivers were taking prescribed painkillers. This is higher than United Kingdom general population data and indicates that caregivers have significant health care needs and morbidity of their own

This report was funded by **Alcohol Change UK**. Alcohol Change UK works to significantly reduce serious alcohol harm in the UK. We create evidence-driven change by working towards five key changes: improved knowledge, better policies and regulation, shifted cultural norms, improved drinking behaviours, and more and better support and treatment.

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