Can patients screen themselves? Pilot study of an audio guided computer assisted self interview (ACASI) approach in primary care

> Jennifer McNeely, MD, MS Assistant Professor Division of General Internal Medicine NYU School of Medicine

Co-Authors:

Brian Gilberti, Rubina Khan, John Rotrosen, Shiela Strauss, Marc Gourevitch

Disclosures

No conflicts of interest

Research Support:

- NIH
- CDC
- Alkermes/Cephalon
- NYU School of Medicine

Background

- Time is of the essence in primary care
- Very brief screening tools exist, but many patients still need follow-up assessment
- ...All of which should happen prior to the medical visit

Alcohol, Smoking and Substance Involvement Screening Test (ASSIST)

- Validated, fairly brief
- Combines screening and assessment
- Clinical advantages: Comprehensive, substance specific, gives risk stratification
- But takes 5-15 minutes of face-to-face contact to administer
- Requires calculation of a score

Could self-administered ASSIST be a solution to screening in primary care?

- Could be completed prior to medical visit
- Self-administered instruments encourage reporting of stigmatized conditions
- However, complex skip patterns and literacy level are barriers

Audio Computer Assisted Self Interview (ACASI) Version of ASSIST

In your life, have you ever used cocaine (coke, crack, etc.) ?	Help
	Refuse to Answer
	Don't Know
A) No	Previous Question
	Next Question
B) Yes	Repeat the Question

In the <u>past three months</u> , how often have you used cocaine (coke, crack, etc.) ?	Help Refuse to Answer
A) Never	Don't Know
B) Once or Twice	Previous Question
C) Monthly	Next
D) Weekly	Question
E) Daily or Almost Daily	Repeat the Question

During the <u>past three months</u> , how often has your use of cocaine (coke, crack, etc.) led to health, social, legal, or financial problems?	Help
	Refuse to Answer
A) Never	Don't Know
B) Once or Twice	Previous Question
C) Monthly	Next
D) Weekly	Question
E) Daily or Almost Daily	Repeat the Question

ACASI ASSIST Pilot Study - Objectives

 Test the usability and acceptability of ACASI ASSIST among an urban, safety net hospital primary care patient population.

2. Prepare for a validation study comparing ACASI with 'traditional' interviewer ASSIST.

Recruitment

- Study site: Primary care clinic of a large public hospital in New York City
- Eligibility: Adult; English or Spanish speaking; current primary care patient
- Approached consecutively
- Completed ACASI ASSIST in waiting room
- Incentive: \$4.50 transit card
- 25 English, 10 Spanish

Description of Study Participants (N=35)

Age	Mean 49 years, SD=11, R	ange 28-72 years
Sex (%)	Male Female	57 43
Race/Ethnicity (%)	Hispanic Black/African American White/Caucasian Other	50 29 15 6
Primary Language (%)	English Spanish Other	63 29 9
Foreign Born (%)		54

Computer Familiarity of Study Participants (N=35)

Computer in the home (%)		28%
Frequency of computer use (%)	Daily Several times/week	56% 32%
	Once a month or less	12%

ASSIST Results Lifetime Substance Use (N=35)



Not Shown: Tobacco Only (n=1)

Current Moderate or High Risk Use (N=35)



Usability of the ACASI ASSIST

• Responses 100% complete for all participants

• Mean time to complete: 5.6 min (range 1.5-17.2 min)

• Felt comfortable : 97% (missing data for 3)

Patient Preferences for Substance Use Screening



Limitations

- Pilot study, small N
- Research volunteers may not represent general clinic population
- No formal tracking of requests for assistance
- Did not attempt to verify substance use against a gold standard measure

Conclusions and Next Steps

- ACASI approach was feasible and acceptable among this primary care population
 - Culturally diverse
 - Safety net population
 - Range of computer familiarity
- Further work is needed to establish validity of the ACASI version of ASSIST

Acknowledgements

- Brian Gilberti
- Rubina Khan
- John Rotrosen
- Shiela Strauss
- Marc Gourevitch

NIH/NIDA Grant # K23DA030395 NYU CTSI, KL2 Award Grant # 1UL1RR029893 NYU Center of Excellence on Addiction Seed Grant