

## SHORT COMMUNICATIONS

### Alcohol use and sexual health of Irish adolescents: Filling the gaps left by ESPAD

The European Schools Survey Project on Alcohol & Drugs (ESPAD) survey conducted in 1999 provided valuable information on drug, alcohol and cigarette use among 15-16 year olds in 30 European countries (Hibell et al., 2000).

However although a small number of questions examining alcohol and sexual activity were administered in 28 countries, Ireland was one of only two countries that did not administer this section of the ESPAD proforma (the Netherlands being the other country). Although the Netherlands did not include this section as they were amalgamating this ESPAD questionnaire with another measure, one can only surmise that in Ireland this section was excluded in an effort to ensure school participation.

The omission of this section in the Irish dimension of the 1999 ESPAD survey leaves an important area relatively unexamined in Ireland. However a study incorporating the ESPAD proforma was completed in the Mid-Western Health Board region in 2002. Therefore although this study was conducted several years after the original, it has produced information that may be of interest to Irish health researchers and practitioners.

The target population for the MWHB survey was selected by a multistage stratified random sampling method (stratified firstly on the basis of area and then on the basis of school type). In total 23 of the 69 second-level schools in the region participated in this research project. Only students in second year and pre-leaving certificate years were included in this survey. All of the schools contacted agreed to take part in this research, although one school only allowed older students to participate. Data was collected from 2297 students, although responses from 18 students were excluded from further analysis based on their positive responses to the questions on having used either or both of the fictitious drugs 'Relevin' and 'Mexaval'. 1022 males and 1215 females participated in this study with a range of ages from 13-19 years, and an average age of 16 (sd=2.3).

Overall 7.5% (171) of students in the survey endorsed the response that they had engaged in sex as a result of their alcohol use that they regretted the next day. This represents 9.0% (92) of males and 6.2% (75) of females. Unprotected sex, as a result of alcohol use, was reported by 5.8% (133) of students; 6.2% (63) of males and 5.4% (66) of females.

As the ESPAD 1999 survey examined only those born in 1983 (i.e. aged 15 or 16) further analysis was conducted on those MWIIB 2002 students born in 1986 to identify a comparable group. 265 participants were in this category (124 males and 140 females). 10.6% (28) of these participants reported having engaged in sex as a result of alcohol use that they regretted the next day; 10.5% (13) of males and 10.7% (15) of females. Unprotected sex as a result of alcohol use was reported by 7.5% (20) of students born in 1986; 7.3% (9) of males and 7.9% (11) of females.

Examining results to the ESPAD 1999, it is clear that the results obtained in this survey are almost identical to those obtained in the UK. The implications of this finding are significant as both Ireland and the UK report rates of sexual problems caused by

alcohol substantially higher than the ESPAD average. 6% of ESPAD respondents reported having had sex as a result of alcohol that they regretted. The ESPAD rate for unprotected sex resulting from alcohol was 5%.

This research highlights both the need for further health promotion work targeted at adolescents and the need for further efforts to enforce legislation restricting the access of young people to alcohol. This research also indicates that the majority of schools may in fact be less conservative, and more open to the study of this topic than many researchers may imagine.

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### Early Psychosis Intervention, DETECT (Dublin East Treatment and Early Care Team)

Despite advances in the treatment of psychiatric illness, there are considerable difficulties detecting and treating young people with definite symptoms of early psychosis, let alone those apparently well individuals in the prodromal phase.

Psychosis affects 3% of the Irish population, a total of some 75,000 people. Psychosis, usually presents in adolescence or early adulthood, while international research has shown a typical delay in adequate treatment of 1-2 years. Recent findings by Dr. Mary Clarke have shown the mean duration of untreated first-episode psychosis (DUP) to be 23 months in the Dublin South East catchment area.

#### Before presentation

- 22% of people had considered taking their own lives,
- 10% had made a serious (drowning, hanging, electrocution) attempt,
- Longer DUP associated with higher risk of suicidal ideation and self harm.

(Clarke et al., 2004)

There was a correlation between suicidal impact and length of time untreated.

- Never suicidal: 13 months DUP
- Contemplated: 22.5 months DUP
- Serious attempt: 39.9 months DUP

P<0.004 (Clarke et al., 2004)

This constitutes a considerable hardship and economic burden on the person, their family, their friends and the community alike. The cost to the taxpayer of mental illness is estimated at 11 billion euro (half of which is due to psychosis).

#### As DUP increases

- Quality of life at presentation tends to be worse,
- There is increased risk of involuntary admission,
- Negative symptoms tend to be worse,
- Patients with longer DUP are less likely to achieve remission,
- Patients who achieve remission take a longer time to remission

(Browne et al., 2000; Marshall et al., 2005; Perkins et al., 2005)

#### Is it possible to reduce DUP?

Projects worldwide with this objective in mind include Australia's Early Psychosis Prevention and Intervention Centre (EPPIC), Scandinavia's Early Treatment and Intervention in Psychosis (TIPS) and Canada's Prevention and Early Intervention Programme for Psychoses (PEPP). Indeed, Malla et al recently reported on the latter, linking improved access with both a substantially increased number of cases treated and a decline in DUP that exceeded 50%.

A proposal was drafted by a steering group comprising of

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|--------------------------|---------------------------------------|
| • Dr. Siobhan Barry      | Convenor                              |
| • Dr. Justin Brophy      | Clinical Director – Newcastle Service |
| • Dr. Mary Darby         | Clinical Director – SVH               |
| • Dr. Abbie Lane         | Consultant SJOG Hospital              |
| • Ms. Elizabeth Lawlor   | Senior Psychologist CMS               |
| • Prof. Fiona McNicholas | Consultant CAMHS                      |
| • Prof. E.O Callaghan    | Consultant CMS/ Chair MHR             |
| • Dr. Freda O Connell    | Clinical Director– Vergemont          |
| • Mr Jim Ryan            | Director Mental Health ECAHB          |
| • Mr. John Saunders      | Director Schizophrenia Ireland        |
| • Mr. Niall Turner       | Head Occupational Therapist.          |

The proposal - *Dublin East Treatment and Early Care Team (DETECT)* - was submitted to the Eastern Regional Health Authority and the Department Of Health and children in 2003 and 2004. The proposal was not funded in 2003/2004. In February 2005, generous funding by the *Hospitaller Order of St John of God* enabled the launch of the DELTA project in the Dublin South East catchment area. The project – a pilot of an initiative that might one day be launched nationally, as in other countries – aimed to provide a comprehensive and structured assessment for patients with suspected first-episode psychosis referred to the Cluain Mhuire Service or St John of God Hospital. Upon request by the treating team, DELTA performed assessments within 48 hours, before placing the individual's data at the team's disposal, enabling a faster and more accurate diagnosis and management plan.

Limited funding by the Health Service Executive has enabled the piloting of the *Dublin East Treatment and Early Care Team (DETECT)*, launched on February 14<sup>th</sup> of this year. Although the funding secured so far amounts to only 10% of the costs needed to provide a comprehensive early intervention service in psychosis comparable to EPPIC, TIPS and PEPP, from February, DELTA expands to become DETECT. The new project – once again, a pilot of an initiative with nationwide potential – will encompass the Dublin South City and Wicklow areas, and thus the total

DETECT catchment area population will amount to 375,000. As with DELTA, the aim is to reduce barriers to effective treatment and care by providing rapid assessment upon referral by the treating team.

Overall, the importance of early intervention to reduce the duration of untreated first-episode psychosis cannot be overemphasised. As we have seen, there is strong evidence linking DUP with outcome, while the need for piloted early intervention initiatives such as DETECT is paramount. Should such measures become possible nationally, it is hoped that reduced DUP will lead to a breakthrough in outcome.

In addition to education initiatives to reduce DUP, and rapid detailed assessments, the current limited funding will allow DETECT to offer Phase-Specific-Interventions for Early Psychosis. The interventions available to patients referred from the Dublin South City and Wicklow areas are;

- \* Cognitive Behavioural Therapy (CBT) provided as a twelve session group based intervention for First Episode Psychosis (FEP) patients.
- \* Carer Education for families of patients with a First Episode Psychosis.
- \* Occupational Therapy Recovery Programme

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