

# RCGP Curriculum

## Supercondensed Curriculum Guide

### SMOKING, ALCOHOL AND SUBSTANCE MISUSE

#### Role of the GP

- Understand that harmful use of alcohol and other substances is often unrecognised and can take a range of forms
- Recognise and manage medical consequences of smoking, alcohol and substance misuse, and be aware of harm reduction concepts
- Be aware of wider social issues, including the need to protect children and family members from the impacts of smoking (e.g., childhood asthma), alcohol or substance misuse, and consider safeguarding concerns (e.g., misuse of funds, storage of drugs and paraphernalia)
- Appreciate that helping people to stop smoking or overcome alcohol and substance misuse, is challenging and also very rewarding for both the doctor and the patient
- Legal aspects (e.g., DVLA, grooming of children, scheduling and categorisation of harmful substances)
- Non-judgemental compassion is an essential part of treatment especially in the face of societal stigma
- Be aware of the latest evidence and guidance on smoking cessation as well as alcohol reduction, and apply treatment on a personalised basis
- Misuse and dependency on over the counter and prescribed medication is increasing, and is often also obtained through internet purchase as well as illegal street sales.

#### Knowledge and Skills Self-Assessment Guide



##### Smoking

- Health effects of tobacco, as a risk or causative factor for a range of diseases and morbidity in people with established diseases and/or specific groups e.g. pregnant women, adolescents
- Nicotine addiction (including risk factors), withdrawal (including physical and psychological symptoms)
- Relationship between tobacco use and socio-economic status
- The concept of compensatory smoking, especially related to cutting down as a harm reduction technique
- Benefits of cessation in the prevention, treatment and improving morbidity of conditions
- Treatment of tobacco dependence and consultations in the GP practice such as brief interventions

##### Alcohol and substance misuse

- The common effects and natural history misuse, both acute and chronic (e.g., sudden death)
- The prevalence and incidence across ages (especially the young) as well as changes over time and variations throughout life
- The impact on the mental health of individuals and their wider social network
- Risk factors, including lifestyle, socio-economic and cultural factors
- Diagnostic features and differential diagnosis
- Recognition of 'alarm' or 'red flag' features, and the importance of patient education
- Appropriate and relevant investigations
- Management including self-care, initial, emergency (e.g., naloxone) continuing care (e.g., substitute prescribing) and chronic disease monitoring (e.g., COPD)
- Relapse prevention strategies, including psychosocial and pharmacological methods.

# SMOKING, ALCOHOL AND SUBSTANCE MISUSE

## Knowledge and Skills Self-Assessment Guide

### Symptoms and Signs



Alcohol and substance misuse in primary care may present directly or indirectly, including through third party concerns, for example, from a friend or family member, or school.

- Accidents and injuries occurring whilst under the influence of drugs or alcohol and intoxication
- Behavioural changes such as neglecting other activities, poor hygiene, secrecy, self-neglect and social withdrawal
- Drug seeking behaviour
- Malnourishment
- Mental health problems related to substance misuse including mood disorders, post-traumatic stress disorder (PTSD) and psychosis
- Overdose
- Social consequences of substance misuse
- Signs and symptoms of medical conditions occurring in relation to alcohol or substance misuse
- Symptoms of withdrawal.

## Knowledge and Skills Self-Assessment Guide

### Common and Important Conditions



- Complications of alcohol and substance misuse in pregnancy. Antenatal care for women misusing substances and alcohol including involvement of social services and safeguarding of unborn children
- Medical complications of substance misuse (e.g., non-infective cardiac complications, and venous thromboembolic disease)
- Medical complications of long-term alcohol misuse (e.g., alcoholic liver and abdominal disease)
- Common health conditions where alcohol use may be a contributing factor, including cancer and hypertension
- Neurological complications including encephalopathy, peripheral neuropathy and Wernicke-Korsakoff syndrome
- Poly abuse of drugs and combined misuse of drugs and alcohol
- Mental health problems and crises in the context of alcohol and substance misuse
- Tolerance, dependence and withdrawal
- The medical complexities that come with aging patients and alcohol or substance misuse.

## Knowledge and Skills Self-Assessment Guide

### Examinations and Procedures



- Assessment of alcohol problem drinking to assess the nature and severity of misuse
- Assessment of social circumstances and functioning of alcohol and substance misusers
- Injection site assessment
- Mental health assessment
- Relevant physical examinations.

# SMOKING, ALCOHOL AND SUBSTANCE MISUSE

## Knowledge and Skills Self-Assessment Guide

### Investigations



- Investigations including assessment of liver damage and blood borne viruses (Hepatitis B and C and HIV), full blood count, haematinics, liver function, renal function, thyroid function
- ECG monitoring of QT interval
- Evidence based screening tools to identify alcohol misuse for example, AUDIT-C
- Near patient testing for drug misuse.

## How this might be tested in MRCGP

### AKT



- Natural history of viral hepatitis B and C infections
- Drug substitutes for drug and alcohol misuse
- Cardiac risks of cocaine use.

### SCA

- Bus driver asks for help to break his habit of heavy drinking
- Final year school student complains of irritability and low mood which is likely to be associated with his regular marijuana use
- A&E notifications: two falls while inebriated. The woman cares for her grandchildren but denies drinking when she is responsible for them.



### WPBA



- Case discussion (CAT) about a woman who is concerned about her husband's alcohol intake and subsequent violent behaviour
- Consultation Observation Tool (COT) with a young woman who wishes to stop smoking
- Log entry about your understanding of the local drug and alcohol service following a patient's referral.

# LEARNING OPPORTUNITIES (Examples)

## Core Content

- **Communication and Consultation**
  - Patient partnerships and person-centred care
  - Third party consulting
  - Behaviour change consulting techniques
- **Prescribing**
  - Interactions of medication and non-prescribed drugs
  - Prescribing dependent drugs
  - Risk and uncertainty
- **Co-morbidity**
  - Multiple physical and mental pathologies
  - Psychosocial issues
- **Teamworking**
  - Across health and social care
  - Rehab and recovery
  - Stop smoking team
- **Ethical and medico-legal**
  - Capacity, Consent and Confidentiality
  - Patient autonomy
  - Fitness to drive
  - Safeguarding.



## Primary Care

- Stopping smoking
- Opiate substitution
- Mental health clinics
- Social prescribers.

## Acute Care



- Drug and alcohol withdrawal
- Physical and mental manifestations of drug misuse
- Overdose
- Urgent safeguarding.

## Multidisciplinary Team

- Rehab and recovery
- Outreach
- Community pharmacists
- Police and forensics.



## Other Specialties

- A&E
- Community mental health team
- Psychological therapies
- Medical (e.g., respiratory) and surgical (e.g., vascular) teams
- Public health.