

The Lost Population: Treating Alcohol Withdrawal in the Acute Care Inpatient Population Presented by Traci Ashcraft, BSN, RN-BC During the 2018 Annual Convention

Summary: Alcohol is one of the most commonly abused substances, not only in the United States, but worldwide. Nearly 20% of patients admitted to acute care inpatient units are dependent upon alcohol to some extent, placing them at risk to experience alcohol withdrawal while in our care. Of those that do develop alcohol withdrawal, as many as 33% will experience severe alcohol withdrawal and delirium tremens. Early recognition through the use of valid assessment tools and implementation of evidence-based treatment plans is key to successful management of this patient population.

Nursing Implications:

- A valid assessment tool for alcohol withdrawal provides the nurse with an accurate and reliable means of assessing and documenting a patient's withdrawal symptoms.
- A consistent, evidence-based treatment plan provides the nurse with the tools necessary to effectively provide care for this patient population.
- Patients experience better outcomes with better assessment and proactive treatment of alcohol withdrawal.
- Better management of alcohol withdrawal leads to improved patient, family, and staff satisfaction.

Key Takeaways:

- The CIWA-Ar is a valid assessment tool for assessing alcohol withdrawal symptoms and providing a severity score to guide treatment.
- Management with benzodiazepines has been validated in many studies and is considered the "gold standard" in the treatment of alcohol withdrawal.
- Studies support the use of both a fixed tapered benzo dose with a symptom-triggered PRN dose based on the CIWA-Ar score to manage alcohol withdrawal.
- Utilizing an interprofessional approach to promote practice change leads to greater acceptance of the change and ultimately greater success.

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