

## Comment

### *What Doctors know about Alcoholism*

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The recent *Lancet* Editorial<sup>1</sup> highlights a matter of considerable importance, i.e. the lack of education about alcoholism for doctors, especially at the undergraduate level. Currently one-fifth of admissions to psychiatric wards are for patients with alcohol problems and at least a quarter of admissions to medical wards are for people in whom alcohol has played a major aetiological part in their illness. The increasing role suggested for general practitioners in intervening in alcohol problems (especially early cases) assumes these patients will be identified. But this is often not the case and the majority of patients with alcohol problems are not known to the general practitioner.<sup>2,3</sup> Further, if primary health care physicians are going to deal with such patients, they require more confidence which education would help.<sup>4</sup> The need for more training at primary health care level throughout their careers has been emphasised by the World Health Organization Group.<sup>3</sup>

It is said that the way to know about undergraduate education is to ask *not* the teachers but the students and in effect this is what was done at the recent DHSS Meeting described in the *Lancet*, or rather a group of doctors who could remember their student days described their lamentable lack of training. Awareness of such lack of education is known and was a major factor in the establishment of the Medical Council on Alcoholism. However, seminars and booklets for medical students<sup>5</sup> while of considerable value, are no substitute for teaching in a regularly concentrated manner in the undergraduate curriculum. The difficulties in getting alcoholism adequately taught at this level and as a coherent whole seem almost insuperable. Even where the subject is taught, it is fragmented and not given the time warranted by the size of the problem.

Alcoholism is often taught in psychiatry placements but it receives far less time than schizophrenia, although perhaps clinically and numerically more important. Only rarely is there the opportunity for students to work regularly on specialised Alcoholism Treatment Units, with some notable exceptions, e.g., Edinburgh.<sup>6</sup> Too often alcoholism is viewed by teachers, including psychiatrists, as a fringe subject, suitable for special placement or electives, rather than a core 'mainstream' subject.

Also there is the problem that teaching is likely to be

fragmented, given by different teachers at different times. Perhaps each medical school should have a co-ordinating teacher responsible for the development within the curriculum of a 'package' of teaching about alcoholism. In the USA this was implemented by each medical school being offered a Career Teacher in Alcoholism, usually one with a high level of clinical competence who, for a limited period, carried out this role then returning to a clinical career. However, by no means all schools accepted such teachers and the financial backing to provide them.

The situation with postgraduate education is less gloomy, principally because doctors can choose what subjects they are taught and indeed often request teaching on alcoholism. The main problem may be the lack of enough suitable teachers. Perhaps the College's policy of supporting the establishment of consultants in each District Health Authority with special responsibility for alcohol and drug services will increase their numbers.

Although questions about alcoholism are now being asked in undergraduate and postgraduate examinations, which will focus the mind of the student, this only accentuates the need for comprehensive teaching. The lamentable lack of education about alcoholism, especially at undergraduate level, should be taken up by our College as we are still asked to carry the main burden of those suffering from alcoholism, and alcoholism is still predominantly taught, if at all, during the psychiatry clerkship.

#### REFERENCES

- <sup>1</sup>EDITORIAL (1987) What doctors know about alcoholism. *Lancet*, **ii**, 196.
- <sup>2</sup>WILKINS, R. H. (1974) *The Hidden Alcoholic in General Practice*. London: Elek Science.
- <sup>3</sup>WORLD HEALTH ORGANIZATION (1986) *The Respective Roles of Primary Health Care and Specialised Services in the Development and Implementation of Programmes for Problem Drinkers*. London: HMSO.
- <sup>4</sup>— (1985) *Treatment and Rehabilitation Programmes in Alcohol Abuse*. London: HMSO.
- <sup>5</sup>HORE, B. D. & RITSON, E. B. (1987) *Alcohol and Health (The Handbook for Medical Students)*. London: The Medical Council on Alcoholism.
- <sup>6</sup>RITSON, E. B. (1987) Personal Communication.