We can promote healthy lifestyles with every contact

A sustainable health service needs everyone embracing healthier living. At **Michael Walzman**'s genitourinary medicine clinic, professionals aim to give advice on drinking and smoking as well as healthy sexual behaviour

Prevention is still better than cure. For the long term sustainability of the health service people need to be educated, encouraged, and helped to improve their own health, thus reducing their need for the NHS.

Making Every Contact Count is an NHS campaign that supports "encouraging and helping people to make healthier choices to achieve positive long-term behaviour change. To do this," the campaign says, "organisations need to build a culture and operating environment that supports continuous health improvement through the contacts it has with individuals."[1] The idea is that health professionals should make the most of every contact with every patient to try to improve his or her health, in particular by promoting healthier lifestyles, regarding, for example, smoking, alcohol, diet, obesity, and exercise.

Making every contact count

A recent systematic analysis estimated the impact of achieving United Nations' targets to reduce six risk factors (tobacco, alcohol, salt intake, obesity, raised blood pressure, and glucose) on deaths from non-communicable disease.[2] The authors found that with such healthier lifestyles, 37 million deaths worldwide could be prevented or delayed over 15 years, providing powerful motivation for the Making Every Contact Count campaign.

Alcohol is the most common substance misused by adolescents in the UK.[3] Public Health England provides 25 different indicators of harm associated with alcohol use that show that every local authority is experiencing substantial ill health, antisocial behaviour, and premature deaths as a result of alcohol.[4] A cross sectional study of UK students found that 56% reported binge drinking at least once in a seven day period.[5]

Two studies in sexual health services settings have shown that attendees had high rates of hazardous drinking and tended to binge heavily.[6 7] Binge drinking is associated with risky sexual behaviours and diagnoses of sexually transmitted infections.[8] These are strong arguments for routinely screening for alcohol use in sexual health services.

However, the authors of a recently published controlled study in three sexual health clinics in London concluded that screening and brief advice for excessive alcohol use did not result in clinically important reductions in alcohol consumption and was not cost effective.[9]

MODEL RELEASED/ACTION PRESS/REX

A cross sectional study of UK students found that 56% reported binge drinking at least once in a seven day period

In contrast, a review of 103 systematic reviews of behavioural change interventions for reducing unhealthy behaviours or promoting healthy behaviours in other clinical settings showed that the most effective interventions for several health behaviours seemed to include advice from doctors or individual counselling.[10] Hence, the evidence indicates that such interventions are effective and it may be that there is a need to improve how such interventions are delivered in sexual health settings.

In addition, opportunistically delivered interventions of brief advice on alcohol have been shown in another review to be cost effective compared with no intervention, supporting the introduction of such interventions.[11] Although this review found that there may be no net cost benefit when delivered in a hospital setting, the interventions were shown to lead to health gains for the population.

Smoking, alcohol, and drug use

To foster a lifelong culture of healthy living, we must reach young people to encourage them towards healthier lifestyles. The healthcare settings that see mainly young adults include genitourinary medicine clinics, contraceptive services, and university medical services.

In our genitourinary clinic this year 72% of the attendees were younger than 35 years old and 54% were women. Apart from assessing risk factors in sexual behaviour we also ask about smoking and alcohol and drug use, and offer advice. In a 13 month period we made 122 (62 women) referrals to the trust's smoking cessation service.

During the same time we referred 22 patients (11 women) to the trust's drug and alcohol liaison service. The most common reason for referral was alcohol, followed by cannabis, and then cocaine use. Sixteen of the 22 referrals were not seen by the local service either because they lived out of area, required a young person's service, were not contactable, or did not attend for follow-up. Four of the six seen locally reported a successful reduction in drug or alcohol use and did not require further support. Although the numbers are small, the positive outcomes are encouraging.

The challenge is to deliver effective interventions that improve lifestyle behaviours and empower young adults to make healthier choices lifelong. We have a drug and alcohol liaison officer present for one clinic session a week, and we intend to develop a smoking cessation service within the clinic itself.

Positively promoting healthier lifestyles in genitourinary clinics and in other settings where young adults are seen may well help reduce the cardiovascular diseases, chronic respiratory diseases, cancers, and diabetes of the future.

Michael Walzman is a consultant in genitourinary medicine, George Eliot Hospital, Nuneaton, Warwickshire CV10 7DJ
mike.walzman@geh.nhs.uk

Cite this as: *BMJ* 2014;349:g7222