

NIAAA Alcohol Treatment Navigator New Clinician Page

The screenshot shows the top navigation bar with the NIH logo and 'National Institute on Alcohol Abuse and Alcoholism'. Below it are links for 'FAQS', 'HELPFUL LINKS', and 'TOOLKIT', along with a search bar. A secondary navigation bar includes 'HOME', 'WHAT TO KNOW ABOUT ALCOHOL TREATMENT', 'HOW TO FIND ALCOHOL TREATMENT', 'SUPPORT THROUGH THE PROCESS', and 'FOR HEALTH PROFESSIONALS'. The main banner features a photo of a doctor and a patient, with the text 'FOR HEALTH PROFESSIONALS' and 'Make Better Referrals Tomorrow with the NIAAA Alcohol Treatment Navigator'. Below the banner is a section titled 'FOR YOUR PRACTICE' containing two cards: 'Learn how to use the Navigator' with a video and PDF options, and 'Treatment Options Chart' with a PDF download option.

- Guidance and fillable forms for you
- Handouts for your patients

The screenshot shows a section titled 'FOR YOUR PATIENTS OR CLIENTS'. It features a photo of a doctor talking to a patient. Below the photo are two cards: 'Handout: Find Alcohol Treatment That's Right for You' with a PDF download option, and 'Patient Toolkit' with a PDF download option. The footer contains navigation links, social media icons, and the NIH logo.



It's a Search Strategy, Not a Locator

How to create a high-quality, curated referral list of evidence providers offering evidence-based alcohol treatment

- STEP 1: Search.** Use the *Navigator* search strategies to fill gaps in your referral list. You might add, for example, outpatient and residential programs, as well as board-certified addiction physicians and addiction therapists.
- STEP 2: Call.** Call the providers and programs to ask questions recommended in the Navigator. See if they offer evidence-based care, meet the needs of your patient population, and are available.
- STEP 3: Choose.** Select the best options to create your new, expanded referral list.

STEP 1: Search. Use the Navigator search strategies to fill any gaps in your referral list. The Navigator provides trusted directories and strategies to help you find the professional providers **highlighted below.**

Referral Options for Patients with Alcohol Use Disorder



Overnight stays

Detox

safe withdrawal management

Residential programs

medication and behavioral treatment



Outpatient visits

Outpatient programs

medication and behavioral treatment

Board-certified addiction physicians*

comprehensive evaluations and medication treatment

Addiction therapists*

assessments and behavioral treatment

**Provide individualized, quality care while maintaining privacy*



Mutual support

Post-treatment support

Mutual-help groups such as AA if desired

STEP 3: Choose.

Select the best options and transfer the contact information create your new, expanded referral list. Enter the providers in the Navigator's form-fillable **Referral List Template** if desired.

NAME OF PRACTICE – TEMPLATE

Referrals to Help Our Patients Cut Back or Quit Drinking

What are the options? Today there are more options to help you cut back or quit drinking than you might expect. These include specialty outpatient and residential programs or a do-it-yourself approach where you create a custom care team. A care team could include, for example, this practice, a board-certified addiction physician, and a specialized therapist. If desired, you can add a mutual support group.

Please see the below for a sampling of local health professionals and programs suggested by our practice. Whether your condition is mild, moderate, or severe, different levels of care are available to help you get better. One size does not fit all—it's important to find a good match for your individual needs.

Board-certified Addiction Physicians

Outpatient Treatment Programs

Specialized Therapists

Residential Treatment Programs

Support Groups In addition to treatment by health professionals, many patients benefit from a mutual support group. Options include AA, LifeRing, Secular Organizations for Sobriety, SMART Recovery, and Women for Sobriety. Groups can vary widely, so shop around for one that's comfortable.

This short referral list was created using the [Alcohol Treatment Navigator](#) from the National Institutes of Health. Neither the NIH nor this practice can endorse any treatment providers nor be responsible for the options ultimately chosen. To find additional treatment options and learn about the signs of quality care, visit AlcoholTreatment.niaaa.nih.gov



If desired, use the fillable template to organize the best options you found through your search



Potomac Internal Medicine Group Referrals to Help Our Patients Cut Back or Quit Drinking

What are the options? Today there are more options to help you cut back or quit drinking than you might expect. These include specialty outpatient and residential programs or a do-it-yourself approach where you create a custom care team. A care team could include, for example, this practice, a board-certified addiction physician, and a specialized therapist. If desired, you can add a mutual support group.

Please see the below for a sampling of local health professionals and programs suggested by our practice. Whether your condition is mild, moderate, or severe, different levels of care are available to help you get better. One size does not fit all—it's important to find a good match for your individual needs.

Board-certified Addiction Physicians

Maryann E. Amirshahi, PharmD, MD
110 Irving Street NW
Washington, DC 20010
202-877-7632

Peter R. Cohen, MD
5450 Knoll North Drive
Columbia, MD 21045
410-715-1180

Caroline M. DuPont, M.D.
6191 Executive Boulevard
North Bethesda, MD 20852
301-231-9010

Outpatient Treatment Programs

Kolmac Outpatient Recovery Center
8561 Fenton Street, Suite 250
Silver Spring, MD 20910
240-821-1222

Andromeda Transcultural Health
1400 Decatur Street NW
Washington, DC 20011
202-291-4707

Whitman Walker Addiction Treatment Services
1525 14th Street NW
Washington, DC 20005
202-745-6153

Specialized Therapists

Jen Hackler, LCSW
1001 Spring Street Suite 110
Silver Spring, MD 20910
301-684-8137

Joshua M. Cohen, PhD
966 Hungerford Drive, Suite 32A
Rockville, MD 20850
240-813-4610

Cendrine Robinson, PhD, MPH
5530 Wisconsin Ave 1528
Chevy Chase, Maryland 20815
301-825-8875

Residential Treatment Programs

Crossroads Adult Residential Programs
6901 South Van Dorn Street
Alexandria, VA 22315
703-313-6344

Sagebrush Treatment Inc Inpatient/Residential
11901 Plantation Drive
Great Falls, VA 22066
888-406-7444

Phoenix House Men's Residential Ctr,
521 North Quincy Street
Arlington, VA 22203
703-841-0703

Support Groups In addition to treatment by health professionals, many patients benefit from a mutual support group. Options include AA, LifeRing, Secular Organizations for Sobriety, SMART Recovery, and Women for Sobriety. Groups can vary widely, so shop around for one that's comfortable.

This short referral list was created using the [Alcohol Treatment Navigator](#) from the National Institutes of Health. Neither the NIH nor this practice can endorse any treatment providers nor be responsible for the options ultimately chosen. To find additional treatment options and learn about the signs of quality care, visit AlcoholTreatment.niaaa.nih.gov

NIAAA Clinician's Core Resource for Alcohol

What Every Clinician Needs to Know About Alcohol

 National Institute on Alcohol Abuse and Alcoholism

SEARCH



Clinician's Core Resource for Alcohol

KNOWLEDGE BANK

What every clinician needs to know about alcohol

Foundational knowledge

- **Definitions:** From moderate & risky drinking patterns to AUD
- **Risks across the lifespan:** From FASD to adolescents to elderly
- **Neuroscience:** AUD as a brain disease

Patient presentation of alcohol-related issues

- **Common presentations:** Medical and mental health issues
- **Medication interactions:** Prevalence and risks
- **Alcohol withdrawal:** Physical and affective features

Clinician strategies for prevention and treatment

- **Reduce stigma:** Increase patient help-seeking behavior
- **Screen and assess:** Use quick, effective methods
- **Conduct brief intervention:** Build motivation to change
- **Recommend evidence-based treatment:** Know the options
- **Refer to quality providers:** Create referral list with new tool

RESOURCE LIBRARY

[Primary Care](#)

[Hepatology](#)

[OB/GYN](#)

[Emergency Care](#)

[Health Systems](#)

NIAAA Clinician's Core Resource

Sample Article

NIAAA Clinician's Core Resource

EFFECTIVE TREATMENTS FOR ALCOHOL USE DISORDER (AUD)

"The middle-aged man in my exam room wasn't an alcoholic. At least, that's what she declared to me as I asked him questions about his drinking. 'I'm not like those people,' he said, smiling nervously. 'I go to work. I don't fall down the stairs. I don't embarrass myself.' As we spoke further about the consequences of drinking six to seven beers every night (and a few shots here and there), he kept pushing back. 'I just need to relax. I'm stressed at work and at home. Money's tight. I'm like everyone else. I'm normal.' ... As a medical community, we do not take unhealthy alcohol use as seriously as we should. This is maddening. We have treatment that works, is cost-effective and saves lives; but our patients aren't getting it."
— E. Poorman, M.D., Primary Care

INTRODUCTION

Alcohol use disorder is a treatable brain condition. There are two basic types of evidence-based treatment for alcohol use disorder (AUD): FDA-approved medications and behavioral therapies. These can be used in combination and tailored to individual patient needs. A mutual help group such as AA can benefit many patients as well.

MEDICATIONS

Direct involvement of physicians and other health care professionals in identifying and treating alcohol use disorder is possible, practical, and necessary. To date, three medications have been shown to be effective in, and are approved by the Food and Drug Administration (FDA) for, the management of alcohol dependence or the prevention of relapse to alcohol use.

- **Acamprosate** is indicated for the maintenance of abstinence from alcohol in patients dependent on alcohol who are abstinent at treatment initiation.
- **Disulfiram** is an aid in the management of selected patients who want to remain in a state of enforced sobriety so that supportive and psychotherapeutic treatment may be applied to best advantage.
- **Oral naltrexone (naltrexone hydrochloride tablet)** is indicated for the treatment of alcohol dependence.
- **Extended-release injectable naltrexone** is indicated for the treatment of alcohol dependence in patients who have been able to abstain from alcohol in an outpatient setting.

BEHAVIORAL THERAPIES

Also known as counseling or "talk therapy," behavioral treatments involve working with a health professional to identify and help change the behaviors that lead to alcohol use disorder (AUD). Behavioral treatments are offered by trained health professionals in a variety of settings and may be provided in combination with prescribed medications.

Evidence-based behavioral treatments share certain features, which can include: Developing the skills needed to stop or reduce drinking; bolstering the ability to manage emotions and stress; helping to build a strong social support system; working to set reachable goals, and coping with or avoiding the triggers that might cause relapse.

Types of evidence-based behavioral treatment include the following:

- **Cognitive-behavioral therapy (CBT)** can take place one-on-one with a therapist or in small groups. CBT focuses on identifying the feelings and situations (called "cues") that lead to heavy drinking and managing stress that can lead to relapse. (More... see original)
- **Motivational enhancement therapy** is conducted over a short period of time to build and strengthen motivation to change drinking behavior. The therapy focuses on helping the patient identify the pros and cons of seeking treatment, form a plan for making changes in drinking behavior, build confidence, and develop the skills needed to stick to the plan.
- **Contingency management approaches** incorporate tangible rewards that are given to patients who achieve specific, measurable treatment goals. This approach is used to reinforce positive behaviors such as abstinence or regular attendance.
- **Behavioral couples and family counseling** involve partners and other family members in the treatment process. The approaches incorporate positive activities, communication skills training, and identifying relapse triggers. Family support strengthened through family therapy increases the chances of maintaining abstinence compared with individual counseling alone.
- **Brief interventions** are usually delivered in a few short, one-on-one counseling sessions. The physician or counselor provides information about the individual's drinking pattern and potential risks and helps to set goals and provide ideas for making a change.
- **12-Step Facilitation Therapy** is an engagement strategy used in counseling sessions to increase a patient's active involvement in 12-step-based mutual help groups (such as AA), in addition to professionally led outpatient treatment. The counselor works with the patient to encourage, review, and reinforce their participation in AA, in a structured process that may include reading assignments, journaling, and setting AA participation goals for the week.

CLINICAL TAKEAWAYS

- **Takeaway # 1:** Consider prescribing one of the FDA approved medications when treating a patient who is dependent on alcohol or who has stopped drinking but is experiencing problems including cravings or relapses. Patients with moderate or severe alcohol use disorder, including those who have physiologic dependence or who are experiencing cravings and have not improved in response to psychosocial approaches alone, are particularly strong candidates for medication-assisted treatment.
- **Takeaway # 2:** Medications should be prescribed as part of a comprehensive treatment approach that includes counseling and other psychosocial therapies (through referral to a psychiatrist, psychologist, or professional counselor) and social supports (through participation in Alcoholics Anonymous and other mutual-help programs).
- **Takeaway #3:** It's important to steer your patients toward therapists who provide evidence-based behavioral therapy for alcohol use disorder. The NIAAA Alcohol Treatment Navigator (see Resources) can help you and your patients to recognize and find providers offering higher quality care.

RESOURCES

REFERENCES

NIAAA Alcohol Treatment Navigator

Make Better Referrals for
Patients With Alcohol Problems

The screenshot shows the homepage of the NIAAA Alcohol Treatment Navigator. At the top, there is a navigation bar with the NIH logo and the text "National Institute on Alcohol Abuse and Alcoholism". Below this, there are several menu items: "HOME", "WHAT TO KNOW ABOUT ALCOHOL TREATMENT", "HOW TO FIND ALCOHOL TREATMENT", "SUPPORT THROUGH THE PROCESS", and "FOR HEALTH PROFESSIONALS". A search bar is located in the top right corner. The main content area features a large image of a doctor and a patient, with the text "FOR HEALTH PROFESSIONALS" and "Make Better Referrals Tomorrow with the NIAAA Alcohol Treatment Navigator". Below this, there is a section titled "FOR YOUR PRACTICE" which includes two main items: "Learn how to use the Navigator" with a video player and a "Read Tips" button, and "Treatment Options Chart" with a "Download PDF" button.

NIAAA Clinician's Core Resource for Alcohol

What Every Clinician Needs to Know
About Alcohol

The screenshot shows the "Clinician's Core Resource for Alcohol" page. At the top, there is a navigation bar with the NIH logo and the text "National Institute on Alcohol Abuse and Alcoholism". Below this, there is a search bar and the title "Clinician's Core Resource for Alcohol". The main content area is divided into two columns. The left column is titled "KNOWLEDGE BANK" and contains three sections: "Foundational knowledge" with a list of topics (Definitions, Risks across the lifespan, Neuroscience), "Patient presentation of alcohol-related issues" with a list of topics (Common presentations, Medication interactions, Alcohol withdrawal), and "Clinician strategies for prevention and treatment" with a list of topics (Reduce stigma, Screen and assess, Conduct brief intervention, Recommend evidence-based treatment, Refer to quality providers). The right column is titled "RESOURCE LIBRARY" and contains a list of links: "Primary Care", "Hepatology", "OB/GYN", "Emergency Care", and "Health Systems".