The effect of depression on alcohol use among female heavy drinkers who underwent HIV prevention intervention

Supachoke Singhakant
Washington University School of Medicine in St. Louis

Susan Bradford
Washington University School of Medicine in St. Louis

Linda B. Cottler
Washington University School of Medicine in St. Louis

Follow this and additional works at: https://digitalcommons.wustl.edu/guzeposter2010

Recommended Citation
Samuel B. Guze Symposium on Alcoholism.
https://digitalcommons.wustl.edu/guzeposter2010/33

This Poster is brought to you for free and open access by the 2010: Disentangling the Genetics of Alcoholism: Understanding Pathophysiology and Improving Treatment at Digital Commons@Becker. It has been accepted for inclusion in Posters by an authorized administrator of Digital Commons@Becker. For more information, please contact vanam@wustl.edu.
THE EFFECT OF DEPRESSION ON ALCOHOL USE AMONG FEMALE HEAVY DRINKERS WHO UNDERWENT HIV PREVENTION INTERVENTION

SUPACHOKE SINGHAKANT, SUSAN BRADFORD, LINDA B. COTTLE
Epidemiology and Prevention Research Group
Department of Psychiatry, Washington University, St. Louis, MO 63108

ABSTRACT

Objective: This study examined the impact of baseline depression on alcohol use among heavy drinking women.

Sample: For the present analysis, 348 women who were enrolled in the Sister to Sister (STS) study to explore the response of the female heavy drinkers to a peer-delivered group HIV prevention intervention compared to a standard intervention for reducing HIV risk behaviors were included.

Findings: 32% of female heavy drinkers had Major Depression within the past 12 months. African American heavy drinking women were less likely to have depression compared to non-African American women. Heavy drinking women who had past year depression usually reported having family members with depression. There were no significant differences in mean usual number of drinks each week and number of abstainers among depressed and non-depressed female heavy drinkers regardless of different types of prevention interventions.

Conclusion: Depression had no significant impact on alcohol use among female heavy drinkers who underwent HIV prevention intervention. With high rate of depression, development of prevention program that also emphasize on detection and preventing depression in this population are also important.

MATERIALS AND METHODS

Data were derived from the NIAAA-funded Sister-to-Sister (STS) study, an intervention to reduce high risk behaviors among female heavy drinkers not currently in treatment.

Eligibility criteria: Female, 18 to 44 years of age, sexually active 4 months prior to the interview, HIV negative, scoring at least 4 on the modified AUDIT, and urine negative for cocaine, heroin, and amphetamine use.

Study protocol: Participants were randomly assigned into 2 groups. Women in group A, the Standard Intervention (SI), received only HIV counseling. Women in group B, the Enhanced Intervention (EI), had to attend 4 peer-delivered educational group sessions.

Measures: All information for the present analysis was obtained from the Washington University Risk Behavior Assessment (WU-RBA), Partial Substance Abuse Model (SAM), Family History Screener (FHS), and Partial Diagnostic Interview Schedule (DIS).

Past year depression: Fulfilled the criteria for the DSM-IV diagnosis of Major Depressive Disorder in the past 12 months at baseline.

Usual number of drinks each week: Calculated from usual number of drinks each week in the past 12 months at baseline and at 12 months. At 4 months, derived from usual number of drinks each week in the past 4 months.

RESULTS

Table 1. Characteristics of heavy drinking women with and without past year depression at baseline

<table>
<thead>
<tr>
<th></th>
<th>Past year depression (n=93)</th>
<th>No lifetime or past year depression (n=168)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean age</td>
<td>34.09</td>
<td>32.38</td>
<td>0.198</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>68%</td>
<td>86%</td>
<td>0.0006*</td>
</tr>
<tr>
<td>Non-African American</td>
<td>32%</td>
<td>14%</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>Mean number of years of education</td>
<td>11.47</td>
<td>11.27</td>
</tr>
<tr>
<td>Family History</td>
<td>Had one or more child</td>
<td>76%</td>
<td>73%</td>
</tr>
<tr>
<td>Mean number of children</td>
<td>2.40</td>
<td>2.28</td>
<td>0.692</td>
</tr>
<tr>
<td>Alcohol</td>
<td>51%</td>
<td>45%</td>
<td>0.659</td>
</tr>
<tr>
<td>Drugs problems</td>
<td>34%</td>
<td>35%</td>
<td>0.832</td>
</tr>
<tr>
<td>Depression</td>
<td>56%</td>
<td>26%</td>
<td>&lt;0.0001*</td>
</tr>
</tbody>
</table>

Sexual Risk Behavior

| Had more than one sex partner in the past 4 months | 29% | 33% | 0.389 |
| Had one or more new sex partner in the past 4 months | 29% | 31% | 0.823 |
| Had ever traded sex for drugs or alcohol | 32% | 22% | 0.103 |
| Did not always use condom during sex in the past 4 months | 73% | 74% | 0.282 |

*p-Statistically significant; p<0.05

Acknowledgements

NIAAA (Grant number: AA12111; LB Cottler, PI)
singhako@epi.wustl.edu

CONCLUSIONS

• Depression had no significant impact on alcohol use among female heavy drinkers who underwent HIV prevention interventions. With this finding, there will be no need to exclude alcoholic people with depression from studies of the treatment and prevention program for alcohol.
• With high rate of depression among female heavy drinkers, further development of interventions in this population should also emphasize on detection and prevention of co-morbid depression.