

ASSIST-Lite for Antenatal Care Alcohol, Smoking and Substance Involvement Screening Test

INSTRUCTIONS

The questions ask about psychoactive substance use in the PAST 3 MONTHS ONLY.

Ask about each substance in order and only proceed to the supplementary questions if the person has used that substance.

On completion of all the questions, count the number of "yes" responses to obtain a score for each substance, and mark the risk category.

Provide a brief intervention relevant to the risk category. If the past 3 month period does NOT include time prior to conception

AND they have risky substance use repeat the questionnaire for the 3 months PRIOR to conception.

In the past 3 months	Yes	No
<p>1. Did you smoke a cigarette containing tobacco?</p> <p>1a. Did you usually smoke more than 10 cigarettes each day?</p> <p>1b. Did you usually smoke within 30 minutes after waking?</p> <p>Score for tobacco (count "yes" answers) <input type="checkbox"/> Risk category: 0 = Low, 1-2 = Moderate, 3 = High</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>2. Did you have a drink containing alcohol?</p> <p>2a. On any occasion, did you drink more than 4 standard drinks of alcohol?</p> <p>2b. Have you tried and failed to control, cut down or stop drinking?</p> <p>2c. Has anyone expressed concern about your drinking?</p> <p>Score for alcohol (count "yes" answers) <input type="checkbox"/> Risk category: 0 = Low, 1-2 = Moderate, 3-4 = High</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>3. Did you use cannabis?</p> <p>3a. Have you had a strong desire or urge to use cannabis at least once a week or more often?</p> <p>3b. Has anyone expressed concern about your use of cannabis?</p> <p>Score for cannabis (count "yes" answers) <input type="checkbox"/> Risk category: 0 = Low, 1-2 = Moderate, 3 = High</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>4. Did you use an amphetamine-type stimulant, or cocaine, or a stimulant medication <i>not as prescribed</i>?</p> <p>4a. Did you use a stimulant at least once each week or more often?</p> <p>4b. Has anyone expressed concern about your use of a stimulant?</p> <p>Score for stimulants (count "yes" answers) <input type="checkbox"/> Risk category: 0 = Low, 1-2 = Moderate, 3 = High</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>5. Did you use a sedative or sleeping medication <i>not as prescribed</i>?</p> <p>5a. Have you had a strong desire or urge to use a sedative or sleeping medication at least once a week or more?</p> <p>5b. Has anyone expressed concern about your use of a sedative or sleeping medication?</p> <p>Score for sedatives (count "yes" answers) <input type="checkbox"/> Risk category: 0 = Low, 1-2 = Moderate, 3 = High</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>6. Did you use a street opioid (e.g. heroin) or an opioid-containing medication <i>not as prescribed</i>?</p> <p>6a. Have you tried and failed to control, cut down or stop using an opioid?</p> <p>6b. Has anyone expressed concern about your use of an opioid?</p> <p>Score for opioids (count "yes" answers) <input type="checkbox"/> Risk category: 0 = Low, 1-2 = Moderate, 3 = High</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>7. Did you use any other psychoactive substances?</p> <p>If yes, what did you take?</p> <p><i>(Not scored, but prompts further assessment)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>

Rapid guide to a Brief Intervention

Low risk: General health advice and encouragement around **no use** at all during pregnancy, and after baby is born.

Advice on low risk consumption around breastfeeding should also be provided.

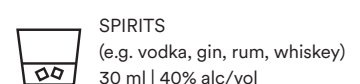
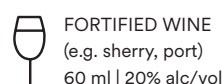
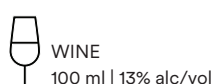
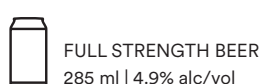
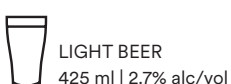
Moderate risk: Provide a brief intervention using the FRAMES model. Discuss risks of use during pregnancy to baby and mother.

Discuss low risk consumption during breastfeeding and offer take home information. Consider referral to specialist drug and alcohol service if deemed high risk OR requested by the patient.

High risk: Provide brief intervention as above, and refer to specialist drug and alcohol service for further assessment.

Make active referral with client.

Note: FRAMES - Feedback, Responsibility, Advice, Menu of options, Empathy, Self-efficacy.



ASSIST-Lite for Antenatal Care Feedback Report Card



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Substance	Score	Risk Level		
Tobacco (Cigarettes, chewing tobacco, cigars, etc)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3 High
Alcohol (Beer, wine, spirits, etc)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3-4 High
Cannabis (Marijuana, pot, grass, hash, etc)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3 High
Cocaine or amphetamine type stimulants (Coke, crack, speed, ecstasy, meth, ice, crystal, base, diet pills, etc)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3 High
Sedatives or sleeping medication (Valium, Serepax, Xanax, Rohypnol, Normison, Diazepam, Temazepam etc)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3 High
Opioids (Heroin, opium, morphine, methadone, codeine, buprenorphine, oxycodone)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3 High
Other psychoactive substances (Please specify:)		<input type="checkbox"/> 0 Low	<input type="checkbox"/> 1-2 Moderate	<input type="checkbox"/> 3 High

What do your scores mean?

Low: You are at low risk of health and other problems from your current pattern of use.

Moderate: No level of substance use during pregnancy is safe for your unborn baby. Your current pattern of use places both you and your baby at risk of harm, both now and into the future. To reduce the risk to you and your baby, you should stop using.

High: You are at high risk of experiencing severe problems (health, social, financial, legal, relationship) as a result of your current pattern of use and you could be dependent.

Are you concerned about your substance use?

Tobacco	Alcohol	Cannabis	Stimulants	Sedatives or sleeping pills	Opioids
<p>Your risk of experiencing these harms is: (tick one)</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Tobacco smoking in pregnancy is associated with:</p>	<p>Your risk of experiencing these harms is: (tick one)</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Alcohol consumption during pregnancy is associated with:</p>	<p>Your risk of experiencing these harms is: (tick one)</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Cannabis use during pregnancy is associated with:</p>	<p>Your risk of experiencing these harms is: (tick one)</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Psychostimulant use during pregnancy is associated with:</p>	<p>Your risk of experiencing these harms is: (tick one)</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Misuse of sedatives or sleeping pills during pregnancy is associated with:</p>	<p>Your risk of experiencing these harms is: (tick one)</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Misuse of opioids and other pain medication during pregnancy is associated with:</p>
<p>Risks to baby:</p> <p>Low-birth weight Small for gestational age Potential for pre-term birth Miscarriage SIDS</p>	<p>Risks to baby:</p> <p>Small for gestational age Pre-term birth for binge drinking Reduced fetal growth Deformities and brain damage FASD</p>	<p>Risks to baby:</p> <p>Low-birth weight Pre-term birth Learning difficulties in children</p>	<p>Risks to baby:</p> <p>Low-birth weight Intrauterine growth restriction Pre-term birth Placental abruption Drowsiness and poor feeding</p>	<p>Risks to baby:</p> <p>Low-birth weight Pre-term birth</p>	<p>Risks to baby:</p> <p>Small for gestational age Pre-term birth</p>
<p>Risks to mother:</p> <p>Premature ageing, wrinkling of skin Vascular disease High blood pressure, diabetes, kidney disease Chronic obstructive pulmonary disease (COPD) Heart disease, stroke, vascular disease and/or cancers</p>	<p>Risks to mother:</p> <p>Accidents or injuries Financial, relationship and/or work problems Mental health problems Liver disease, stroke, muscle and nerve damage Cancers</p>	<p>Risks to mother:</p> <p>Anxiety, panic, depression Bronchitis Psychosis Heart disease, COPD</p>	<p>Risks to mother:</p> <p>Sleep problems, weight loss, dehydration, Mood swings, anxiety, depression, agitation, paranoia Aggressive and violent behaviour, psychosis, heart damage, brain damage, sudden death</p>	<p>Risks to mother:</p> <p>Drowsiness, difficulty concentrating, nausea, headaches Sleep problems, anxiety and depression Tolerance, dependence and severe withdrawal symptoms Overdose and death (if used with alcohol, opioids or other depressant drugs)</p>	<p>Risks to mother:</p> <p>Emotional problems, social problems Tolerance, dependence and severe withdrawal symptoms Overdose and death</p>

Breastfeeding

Maternal use of alcohol and other drugs may have harmful effects on breastfed infants. Experts recommend that not drinking, and not using substances like cannabis while breastfeeding is the safest option. (National Infant Feeding Guidelines, 2012; NHMRC). Experts also recommend that pregnant women do not use sleeping pills or sedatives prior to breastfeeding, to reduce the risk of falling asleep and potentially smothering the infant.