Modifying Alcohol Consumption to Reduce Obesity (MACRO): development and feasibility trial of a complex community-based intervention for men

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Declared competing interests of authors: John Norrie is a member of the National Institute for Health Research (NIHR) Health Technology Assessment (HTA) Commissioning Board and the NIHR HTA and the Efficacy and Mechanism Evaluation Editorial Board. Linda Irvine was the Trial Manager on the NIHR Public Health Research funded study 11/3050/30 [Texting to Reduce Alcohol Misuse (TRAM): a multi-centre randomised controlled trial of a text message intervention to reduce binge drinking among disadvantaged men] while the current study was being conducted.

Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

Published April 2017
DOI: 10.3310/hta21190
Plain English summary

Modifying Alcohol Consumption to Reduce Obesity (MACRO)
Health Technology Assessment 2017; Vol. 21: No. 19
DOI: 10.3310/hta21190

NIHR Journals Library www.journalslibrary.nihr.ac.uk
Plain English summary

Heavy drinking by men who are obese greatly increases their risk of liver disease and of dying prematurely. Effective methods to help such men drink less would have considerable health benefits. We developed an intervention and tested it in a small pilot trial to assess whether or not a large study to evaluate the effectiveness of the intervention could be conducted successfully.

Using focus groups, we explored men’s attitudes and beliefs about drinking and weight. The intervention was designed to encourage men to drink less through the motivation of weight loss. It involved a face-to-face session, followed by a series of reminder text messages to motivate reduced drinking. It was structured around a behaviour change theory. We also used a control intervention called the Screening and Intervention Programme for Sensible drinking. This was based on Department of Health recommendations.

We then tested the feasibility of a randomised trial of the intervention. Men aged 35–64 years who were obese and who drank > 21 units of alcohol per week were recruited from general practitioner registers and by community outreach. They were randomised to either the experimental or the control intervention and followed up for 5 months.

Recruitment was successful and the target recruitment of 60 men was exceeded. On average, participants drank 47 units per week and three-quarters (78%) engaged in binge drinking at least weekly. A very high follow-up rate was achieved (98%). Participants were enthusiastic about the study and found the study methods acceptable.

This study recruited men at very high risk of liver disease, and delivered a novel intervention with which the men engaged, and which retained almost all to the end. This suggests that a full-scale randomised trial is feasible.
Health Technology Assessment

ISSN 1366-5278 (Print)
ISSN 2046-4924 (Online)
Impact factor: 4.058

Health Technology Assessment is indexed in MEDLINE, CINAHL, EMBASE, The Cochrane Library and the ISI Science Citation Index.

This journal is a member of and subscribes to the principles of the Committee on Publication Ethics (COPE) (www.publicationethics.org/).

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This report

The research reported in this issue of the journal was funded by the HTA programme as project number 12/139/12. The contractual start date was in May 2014. The draft report began editorial review in February 2016 and was accepted for publication in November 2016. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors’ report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health.

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