

Influence of Pennsylvania Liquor Store Closures During the COVID-19 Pandemic on Features of Alcohol Withdrawal Syndrome Consultations

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Influence of Pennsylvania Liquor Store Closures During the COVID-19 Pandemic on Features of Alcohol Withdrawal Syndrome Consultations

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Background

Alcohol withdrawal syndrome (AWS) is a serious consequence of alcohol use disorder. Due to the current COVID-19 pandemic, many businesses were shuttered – including a statewide closure of Pennsylvania liquor stores on March 17, 2020.

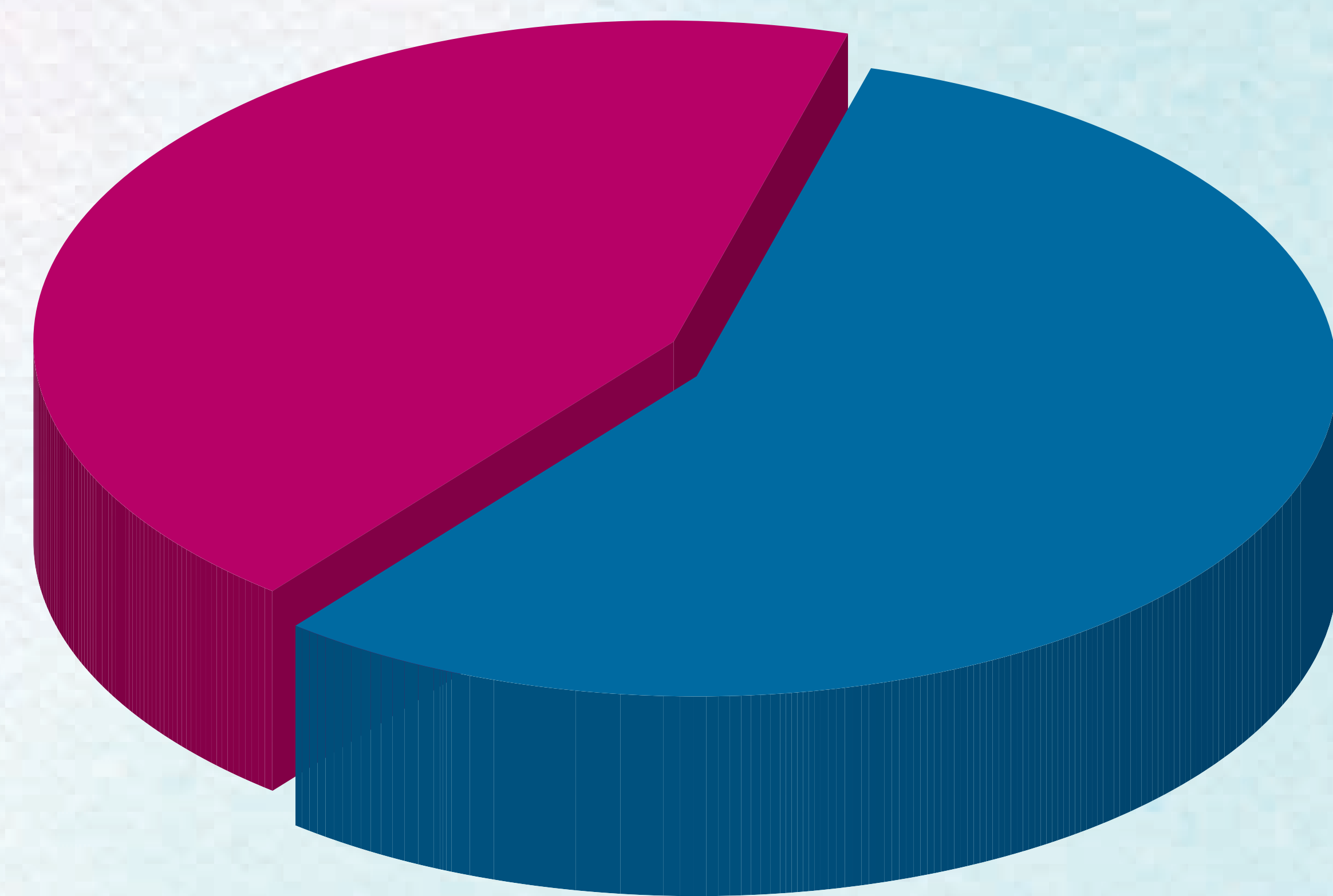
Hypothesis

As a result of statewide liquor store closures, an increase in AWS consultations to medical toxicology would occur.

Methods

This is a retrospective, observational study of AWS patients presenting to a tertiary care hospital. We calculated descriptive statistics for continuous and categorical variables and compared AWS consults placed to the medical toxicology service for 5 months preceding liquor store closure to those placed between March 17, 2020 and August 31, 2020. We evaluated Emergency Department (ED) length of stay (LOS), weekly and monthly consultation rate, and rate of admission and ED recidivism both pre- and post-liquor store closure.

This is a retrospective, observational study of AWS patients presenting to a tertiary care hospital.



AWS consults placed during the 10-month period

■ 43.8% pre-liquor store closure ■ 56.2% post-liquor store closure

Results

A total of 324 AWS consults were placed during the 10-month period. One hundred and forty-two consults (43.8%) were pre- and 182 (56.2%) were post-liquor store closure. There was no significant difference in patient age, gender or race; nor weekly or monthly consultation rate when comparing pre- and post-liquor store periods. The median ED LOS was 7 hours, 95% Confidence Interval (CI) [5,10], and did not significantly differ between the pre- and post-liquor store periods ($p=0.78$). 92.9% of the patients presenting with AWS required an admission with no significant difference between the pre- and post-liquor store closure periods (94.4% vs. 91.8%, $p=0.36$). Following liquor store closure, there was a significant increase in the number of AWS patients requiring a return ED visit: Odds Ratio 2.49; 95% CI [1.38, 4.49].

Conclusion

There was nearly two and a half fold greater odds of ED recidivism among post-liquor store closure patients with AWS as compared with the pre-closure patients.

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