

Abstract

Background: Modern technology is developing quite fast on every level of many systems. For example the implementation of eHealth to national strategies and the implementation of technology tools in a care health system or in specialized services. Today, mobile phone are readily available and enhanced and mobile technology is an example of medium that is used in everyday life. Mobile applications (apps) aiming on reduction of alcohol consumption are nowadays observably more available on the market but their effectiveness and evaluation is still unclear.

Aim: The main aim of this study is to map selected user-accessible applications available for reduction of alcohol consumption available on digital distribution services of the Android and iOS mobile systems and to describe their basic features.

Methods: The study combines content analysis of provided features and functions of user-accessible mobile applications for reduction of alcohol consumption and user testing of a total of four applications. A self-assessment tool was developed for the testing purposes. The tools described the application in the specified categories (basic technical specifications, design, software, techniques and interventions for the reduction of alcohol consumption). Two Android apps and two iOS apps that met predefined criteria were selected for user testing.

Results: The tested applications do not provide full range of interventions defined by the evaluation tool or only partly fulfill the criteria used in the tool. Only one application is available in Czech language, which furthermore offers translation in a poor quality. There are many applications on the distribution platforms that are not expertly reviewed and which are not clinically validated on their efficacy. This also implies the inclusion of the health information contained in applications that are not properly cited and professionally revised.

Conclusion: Distribution platforms do not provide quality and efficiency of provided mobile applications. There is significant absence of mHealth interventions in czech language. Available applications should be evaluated and checked for the level of evidence-based and expertised data. The categorization of mobile apps is currently insufficient and the evaluation tool also deserves to be revised due to greater objectivity and evaluation details.

Key words: mobile applications – mobile app – alcohol – alcohol reduction – eHealth – mHealth – alcohol use - smartphone