



Alcohol

Alcohol is a drug which relieves anxiety, lifts inhibitions and it is pleasantly, mildly euphoric but when used to excess it is dangerous and causes misery, illness and death. Is it a friend or foe? Surprisingly alcohol is not particularly addictive; unlike for example cocaine or heroin and for the vast majority of people who drink, it does not become a problem. However, alcohol abuse and dependency are real issues for about 10% of the adult population with significant consequences for themselves, their families and society as a whole.

Safe Drinking

About 90% of the adult population is not dependent on alcohol but nevertheless may have problems from drinking too much or inappropriately. A proportion will go on to drink more and eventually lose control so alcohol has an ability to slowly cause addiction over many years. The UK Government has produced guidelines on sensible drinking and the recent trend in the UK towards binge drinking by young women is a worrying new direction.

The unit system introduced by the British Government gives a fair estimation of how much is drunk and how safe it is. The limits are: 21 units for men (later raised to 28 units) and 14 units for women (raised to 21). These unit limits are based on sound medical research which has shown that the risk of death through cirrhosis are low for men who drink less than 21 units (women 14 units), medium risk between 21 and 50 units (14 to 35 for women) and high risk above 50 units (35 for women). It is important to note here that there is a fundamental difference between the male and the female body. A lower proportion of the female body is made up of water compared to men, so women are therefore at greater risk from the effects of alcohol on their bodies.

What are 'units' of alcohol?

Calculating the amount of units you are drinking is easy. A fairly accurate guide is one litre of the alcoholic beverage is equal in units to the percentage alcohol of the drink. One litre of beer of 4.6% alcohol is 4.6 units; one litre of Gin at 40% alcohol is 40 units. Spirits are sold in 25 ml measures and there are 40 measures in a litre bottle. Therefore 1 single measure of spirit is equal to 1 unit of alcohol. Simple isn't it? The average man can safely drink 28 single measures of spirits or 6 litres of beer per week and a woman can drink 21 single measures of spirits or 4 1/2 litres of beer. A word of caution: These drinks should be spread evenly across the week and there should be at least one alcohol free day per week. The setting and time of drinking is also important when assessing safety.

The unit system is only a guide and does not represent a definition of when drinking is acceptable on health. For some people, just a couple of drinks trigger a change in personality, affecting relationships and to drink before driving always impairs performance and judgement. For these people, avoiding alcohol altogether is probably the best policy.

Although alcohol is not a particularly addictive drug it does in time lead to dependency. The average time is usually between 5 and 7 years. The route to alcohol dependency is not a predictable one; the drinker often cannot foresee it. Damage to relationships, poor work performance and a bad health record are a few of the signs of addictive behaviours. If you have lost the ability to say 'no' to a drink and you can't stop when you start, you have a serious problem that needs be addressed.

Abuse or dependency?

A professional assessment is necessary to accurately diagnose an alcohol abuse or addiction problem but there are self administered questionnaires which help identify which is the problem. One of these tools is 'CAGE' which consists of four questions related to behaviour surrounding drinking.

C – Have you ever felt the need to **C**ut down on your drinking use?

A – Do you get **A**nnoyed at criticism by others about your drinking use?

G – Have you ever felt **G**uilty about your drinking use or something you have done while drinking or using other drugs?

E – **E**ye-opener: Have you ever felt the need for a drink early in the morning?

One positive answer indicates that you are developing or have a problem with alcohol. Feedback can provide valuable information to an individual, especially if that person has a family history of alcoholism or other drug addiction or has other risk factors for his/her own substance abuse problems such as childhood trauma.

It is a very fine line between harmful alcohol use and alcohol dependency. After dependency is established, it is difficult to return to controlled drinking and abstinence is often the only option. Problem drinking or alcohol abuse occurs when a person is not dependent on alcohol, but drinks enough to cause actual harm. The amount of alcohol consumed on a regular basis is not important in the definition of alcohol abuse; what is important is that alcohol is affecting your daily life or the lives of those around you.

Alcohol Dependence (Addiction)

Any drug, which causes changes to the mind, can cause a dependence syndrome. This means there are symptoms and behavioural patterns which form a recognised illness:

- There is a strong desire or **compulsion** to drink, which overrides other everyday activities; family, friends, work and hobbies are neglected. They neglect the alternative pleasures of life as the alcohol drinking becomes the major focus for the individual.
- Alcohol normally has a physical **withdrawal** state when the drinking stops. Nausea, sweating, shakiness and anxiety are typical symptoms.
- There is a degree of **tolerance** requiring higher doses to have the same psychological effect. There are difficulties in controlling the amount of use so consumption escalates.
- The user continues to consume alcohol despite evidence of **harm** such as ill health, debts, relationship difficulties or psychological problems.

The people most at risk of alcohol dependency are those who have difficulty dealing with their emotions and who have trouble in facing everyday life. Alcohol is used as an “escape mechanism” for life's problems rather than confronting them. There is an increased risk for those who are shy, with low self-esteem and have problems with family/work. There are genetic risks for susceptibility to addiction. Research, particularly in the USA, shows that the risk for developing alcohol addiction does run in families. The genes a person inherits partially explain this pattern but lifestyle and psychological environment are also factors. However, a genetic predisposition to alcohol addiction does not mean it is inevitable; just because alcohol addiction tends to run in families, it does not mean that a child of an alcoholic parent will automatically become an alcoholic too. Some people develop alcoholism even though no one in their family has a drinking problem.

Effects on the Body and Brain

Alcohol causes Liver disease, Pancreatitis, seizures, impotence, severe short term memory loss, hypertension (which can lead to a stroke), enlarged heart, cancer and many other physical and psychological problems. Alcohol suppresses the part of the brain that controls judgement, resulting in a loss of inhibitions. It affects physical co-ordination, causing blurred vision, slurred speech and loss of balance. Drinking a very large amount at one time can lead to unconsciousness, coma and even death. Vomiting while unconscious can lead to death by asphyxiation (suffocation). Alcohol is implicated in a large number of fatal road accidents, assaults and incidents of domestic violence. Drinking too much too often will cause physical damage, increase the risk of getting some diseases and make other diseases worse. It is dangerous stuff.

Treatment of Alcohol Dependence

For those with dependence there is usually a repeated pattern of failed attempts to give up without seeking help. There will be a need to be admitted into a treatment centre in order to address the underlying personal issues which have promoted the

dependency and to counteract the effects of the illness itself. Invariably once this stage of dependency is reached, the user will never be able to control alcohol use again and abstinence is the only way forward. A return to drinking will cause a return to the original patterns of use and the vicious circle continues. In-patient treatment looks at all factors hidden behind the dependency, such as relationship problems, previous psychological trauma or self-esteem issues. Some dependency is in conjunction with other psychiatric disorder such as depression. Often the user does not recognise the harm that alcohol is doing to themselves or others (denial) or the social isolation that it is causing. The illness is accompanied by guilt/shame so there is a reluctance to accept help. The therapeutic environment enables the return to previous attributes and the ability to ask for help when there is trouble so that they can view the future with confidence without returning to mind-altering substances. Family relationships, which are also damaged by the illness, can be repaired with the help of treatment.

A useful self administered tool is the AUDIT Questionnaire:

1. How often do you have a drink containing alcohol?

- Never (0)
- Monthly or Less (1)
- 2-4 times a month (2)
- 2-3 times a week (3)
- 4 or more times a week (4)

2. How many drinks containing alcohol do you have on a typical day when you are drinking?

- 1 or 2 (0)
- 3 or 4 (1)
- 5 or 6 (2)
- 7-9 (3)
- 10 or more (4)

3. How often do you have 6 or more drinks on an occasion when you are drinking?

- Never (0)
- Less than monthly (1)
- Monthly (2)
- Weekly (3)
- Daily or almost daily (4)

4. How often during the past year have you found that you were not able to stop drinking once you had started?

- Never (0)
- Less than monthly (1)
- Monthly (2)
- Weekly (3)
- Daily or almost daily (4)

5. How often during the past year have you failed to do what was normally expected of you because of drinking?

- Never (0)
- Less than monthly (1)
- Monthly (2)

- Weekly (3)
- Daily or almost daily (4)

6. How often during the past year have you needed a first drink in the morning to get yourself going after a heavy drinking session?

- Never (0)
- Less than monthly (1)
- Monthly (2)
- Weekly (3)
- Daily or almost daily (4)

7. How often during the past year have you had a feeling of guilt or remorse after drinking?

- Never (0)
- Less than monthly (1)
- Monthly (2)
- Weekly (3)
- Daily or almost daily (4)

8. How often during the past year have you been unable to remember what happened the night before because you had been drinking?

- Never (0)
- Less than monthly (1)
- Monthly (2)
- Weekly (3)
- Daily or almost daily (4)

9. Have you or has someone else been injured as a result of your drinking?

- No (0)
- Yes, but not in the past year (2)
- Yes, during the past year (4)

10. Has a relative, friend, doctor or other health care worker been concerned about your drinking or suggested you cut down?

- No (0)
- Yes, but not in the past year (2)
- Yes, during the past year (4)

If you scored between 8-10 or more, it is worth seeking professional advice to talk about your drinking.

If it addressed in the early stages, alcohol abuse can be treated and the drinker helped back to a controlled drinking pattern that removes the harmful effects from their lives. Often some individual sessions with a qualified addictions specialist will help people control their drinking by helping to identify the situations that need to be avoided and addressing the issues that trigger the drinking. Once dependency has been established in-patient treatment may be required.