ALCOHOLISM

BASIC INFORMATION

DESCRIPTION
A psychological and physiological dependence on alcohol, resulting in chronic disease and disruption of interpersonal, family and work relationships.

FREQUENT SIGNS AND SYMPTOMS
Early stages:
- Low tolerance for anxiety.
- Need for alcohol at the beginning of the day, or at times of stress.
- Insomnia; nightmares.
- Habitual Monday-morning hangovers and frequent absences from work.
- Preoccupation with obtaining alcohol and hiding drinking from family and friends.
- Guilt or irritability when others suggest drinking is excessive.

Late stages:
- Frequent blackouts; memory loss.
- Delirium tremens (tremors, hallucinations, confusion, sweating, rapid heartbeat). These occur most often with alcohol withdrawal.
- Liver disease (yellow skin or eyes).
- Neurological impairment (numbness and tingling in hands and feet, declining sexual interest and potency, confusion, coma).
- Congestive heart failure (shortness of breath, swelling of feet).

CAUSES
Not fully understood, but include:
- Personality factors, especially dependency, anger, mania, depression or introversion.
- Family influences, especially alcoholic or divorced parents.
- Hereditary factors.
- Social and cultural pressure to drink.
- Body chemistry disturbances (perhaps).

RISK INCREASES WITH
- Cultural factors. Some ethnic groups have high alcoholism rates for either social or biological reasons.
- Use of recreational drugs.
- Crisis situations, including unemployment, frequent moves, or loss of friends or family.
- Environmental factors such as ready availability, affordability and social acceptance of alcohol in the culture group, work group or social group.
- Too much free unconstructed time, as with retirement.

PREVENTIVE MEASURES
- Use alcohol in moderation—if at all—to provide a healthy role model. Set limits, drink slowly, dilute drinks and don’t drink alone.
- Help a spouse, friend or co-worker to admit when an alcohol problem exists, and seek help.

EXPECTED OUTCOMES
With abstinence (absence of alcohol or drugs), sobriety is a way of life. The lifestyle change is difficult and relapses frequently occur. If determined you can give up alcohol.

POSSIBLE COMPLICATIONS
- Chronic and progressive liver disease.
- Gastric erosion with bleeding; stomach inflammation.
- Neuritis, tremors, seizures and brain impairment; falls at home.
- Inflammation of the pancreas.
- Inflammation of the heart.
- Mental and physical damage to the fetus if a woman drinks during pregnancy (fetal alcohol syndrome).
- Family members of alcoholics may develop psychological symptoms requiring treatment and support groups such as Al-Anon.

TREATMENT

GENERAL MEASURES
- Treatment involves short-term care that stops the drinking and long-term help to change the problems that caused the alcoholism.
- May require detoxification (medical help in getting over the physical withdrawal symptoms when drinking is stopped).
- Sometimes, inpatient care at a special treatment center.
- Keep appointments with doctors and counselors.
- Join a local Alcoholics Anonymous group or other support group and attend meetings regularly.
- Reassess your lifestyle, friends, work, and family to identify and alter factors that encourage drinking.

MEDICATIONS
- Disulfiram (Antabuse), which causes unpleasant physical symptoms when alcohol is consumed, or naltrexone, which lessens the pleasure of alcohol.
- Drugs used for withdrawal symptoms include benzodiazepines, tranquilizers, antipsychotics and anticonvulsants (if seizures occur).

ACTIVITY
Don’t drink and drive.

DIET
Eat a normal, well-balanced diet. Vitamin supplements may be recommended.

NOTIFY OUR OFFICE IF
You or a family member has symptoms of alcoholism.

Important Phone Numbers:
USI Student Health Center  465-1250
Monday - Friday 8 am- 4:30 pm
USI Wellness Center  464-1807
Deaconess Hospital-ER  450-3405

Adapted from Instructions for Patients, Sixth Edition, H. Winter Griffith, M.D., W. B. Saunders Company.