**Drinking: Alcoholism**

Getting the Facts

For many people, the facts about alcoholism are not clear. What is alcoholism, exactly? How does it differ from alcohol abuse? When should a person seek help for a problem related to his or her drinking? This information will explain alcoholism and alcohol abuse, symptoms of each, when and where to seek help, treatment choices, and additional helpful resources.

A Widespread Problem

For most people, alcohol is a pleasant accompaniment to social activities. Moderate alcohol use--up to two drinks per day for men and one drink per day for women and older people (A standard drink is one bottle of beer or wine, one glass of wine) - is not harmful for most adults. Nonetheless, a substantial number of people have serious trouble with their drinking. Currently, nearly 30 million Russians - abuse alcohol or are alcoholic. Several million more adults engage in risky drinking patterns that could lead to alcohol problems. In addition, approximately 53 percent of men and women in Russian Federation report that one or more of their close relatives have a drinking problem. The consequences of alcohol misuse are serious--in many cases, life-threatening. Heavy drinking can increase the risk for certain cancers, especially those of the liver, esophagus, throat, and larynx (voice box). It can also cause liver cirrhosis, immune system problems, brain damage, and harm to the fetus during pregnancy. In addition, drinking increases the risk of death from automobile crashes, recreational accidents, and on-the-job accidents and also increases the likelihood of homicide and suicide.

What Is Alcoholism?

Alcoholism, which is also known as "alcohol dependence syndrome," is a disease that is characterized by the following elements:

· Craving: A strong need, or compulsion, to drink.
· Loss of control: The frequent inability to stop drinking once a person has begun.
· Physical dependence: The occurrence of withdrawal symptoms, such as nausea, sweating, shakiness, and anxiety, when alcohol use is stopped after a period of heavy drinking. These symptoms are usually relieved by drinking alcohol or by taking another sedative drug.
· Tolerance: The need for increasing amounts of alcohol in order to get "high."

Alcoholism has little to do with what kind of alcohol one drinks, how long one has been drinking, or even exactly how much alcohol one consumes. But it has a great deal to do with a person's uncontrollable need for alcohol. This description of alcoholism helps us understand why most alcoholics can't just "use a little willpower" to stop drinking. He or she is frequently in the grip of a powerful craving for alcohol, a need that can feel as strong as the need for food or water. While some people are able to recover without help, the majority of alcoholic individuals need outside assistance to recover from their disease. With support and treatment, many individuals are able to stop drinking and rebuild their lives.

Many people wonder: Why can some individuals use alcohol without problems, while others are utterly unable to control their drinking? Yet it is important to recognize that aspects of a person's environment, such as peer influences and the availability of alcohol, also are significant influences. Both inherited and environmental influences are called "risk factors." But risk is not destiny. Just because alcoholism tends to run in families doesn't mean that a child of an alcoholic parent will automatically develop alcoholism.

What Is Alcohol Abuse?

Alcohol abuse differs from alcoholism in that it does not include an extremely strong craving for alcohol, loss of control, or physical dependence. In addition, alcohol abuse is less likely than alcoholism to include tolerance (the need for increasing amounts of alcohol to get "high"). Alcohol abuse is defined as a pattern of drinking that is accompanied by one or more of the following situations within a 12-month period:

· Failure to fulfill major work, school, or home responsibilities;
· Drinking in situations that are physically dangerous, such as while driving a car or operating machinery;
· Recurring alcohol-related legal problems, such as being arrested for driving under the influence of alcohol or for physically hurting someone while drunk;
· Continued drinking despite having ongoing relationship problems that are caused or worsened by the effects of alcohol.

While alcohol abuse is basically different from alcoholism, it is important to note that many effects of alcohol abuse are also experienced by alcoholics.

What Are the Signs of a Problem?

How can you tell whether you, or someone close to you, may have a drinking problem? Answering the following four questions can help you find out. (To help remember these questions, note that the first letter of a key word in each of the four questions spells "CAGE.")

· Have you ever felt you should Cut down on your drinking?
· Have people Annoyed you by criticizing your drinking?
· Have you ever felt bad or Guilty about your drinking?
· Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover (Eye opener)?

One "yes" response suggests a possible alcohol problem. If you responded "yes" to more than one question, it is highly likely that a problem exists. In either case, it is important that you see your doctor or other health care provider right away to discuss your responses to these questions. He or she can help you determine whether you have a drinking problem and, if so, recommend the best course of action for you.

Even if you answered "no" to all of the above questions, if you are encountering drinking-related problems with your job, relationships, health, or with the law, you should still seek professional help. The effects of alcohol abuse can be extremely serious--even fatal--both to you and to others.

The Decision To Get Help

Acknowledging that help is needed for an alcohol problem may not be easy. But keep in mind that the sooner a person gets help, the better are his or her chances for a successful recovery. Any reluctance you may feel about discussing your drinking with your health care professional may stem from common misconceptions about alcoholism and alcoholic people. In our society, the myth prevails that an alcohol problem is somehow a sign of moral weakness. As a result, you may feel that to seek help is to admit some type of shameful defect in yourself. In fact, however, alcoholism is a disease that is no more a sign of weakness than is asthma or diabetes. Moreover, taking steps to identify a possible drinking problem has an enormous payoff--a chance for a healthier, more rewarding life.

When you visit your health care provider, he or she will ask you a number of questions about your alcohol use to determine whether you are experiencing problems related to your drinking. Try to answer these questions as fully and honestly as you can. You also will be given a physical examination. If your health care professional concludes that you may be dependent on alcohol, he or she may recommend that you see a specalist in diagnosing and treating alcoholism. You should be involved in making referral decisions and have all treatment choices explained to you.

Getting Well

Alcoholism Treatment

The nature of treatment depends on the severity of an individual's alcoholism and the resources that are available in his or her community. Treatment may include detoxification (the process of safely getting alcohol out of one's system); taking doctor-prescribed medications, such as disulfiram or naltrexone, to help prevent a return to drinking once drinking has stopped; and individual and/or group counseling. There are promising types of counseling that teach recovering alcoholics to identify situations and feelings that trigger the urge to drink and to find new ways to cope that do not include alcohol use. Any of these treatments may be provided in a hospital or residential treatment setting or on an outpatient basis.

Because the involvement of family members is important to the recovery process, many programs also offer brief marital counseling and family therapy as part of the treatment process. Some programs also link up individuals with vital community resources, such as legal assistance, job training, child care, and parenting classes.

Alcoholics Anonymous

Virtually all alcoholism treatment programs also include meetings of Alcoholics Anonymous (AA), which describes itself as a "worldwide fellowship of men and women who help each other to stay sober." While AA is generally recognized as an effective mutual help program for recovering alcoholics, not everyone responds to AA's style and message, and other recovery approaches are available. Even those who are helped by AA usually find that AA works best in combination with other elements of treatment, including counseling and medical care.

Can Alcoholism Be Cured?

While alcoholism is a treatable disease, a cure is not yet available. That means that even if an alcoholic has been sober for a long while and has regained health, he or she remains susceptible to relapse and must continue to avoid all alcoholic beverages. "Cutting down" on drinking doesn't work; cutting out alcohol is necessary for a successful recovery.

However, even individuals who are determined to stay sober may suffer one or several "slips," or relapses, before achieving long-term sobriety. Relapses are very common and do not mean that a person has failed or cannot eventually recover from alcoholism. Keep in mind, too, that every day that a recovering alcoholic has stayed sober prior to a relapse is extremely valuable time, both to the individual and to his or her family. If a relapse occurs, it is very important to try to stop drinking once again and to get whatever additional support is needed to abstain from drinking.

Help for Alcohol Abuse

If your health care provider determines that you are not alcohol dependent but are nonetheless involved in a pattern of alcohol abuse, he or she can help you:

· Examine the benefits of stopping an unhealthy drinking pattern.
· Set a drinking goal for yourself. Some people choose to abstain from alcohol, while others prefer to limit the amount they drink.
· Examine the situations that trigger your unhealthy drinking patterns, and develop new ways of handling those situations so that you can maintain your drinking goal.

Some individuals who have stopped drinking after experiencing alcohol-related problems choose to attend AA meetings for information and support, even though they have not been diagnosed as alcoholic.

New Directions

· Genetic research: Scientists are now studying 3,000 individuals from several hundred families with a history of alcoholism in order to pinpoint the location of genes that influence vulnerability to alcoholism. This new knowledge will help identify individuals at high risk for alcoholism and also will pave the way for the development of new treatments for alcohol-related problems. Other research is investigating the ways in which genetic and environmental factors combine to cause alcoholism.
· New medications: Studies have led to the Food and Drug Administration's approval of the medication naltrexone for the treatment of alcoholism. When used in combination with counseling, this prescription drug lessens the craving for alcohol in many people and helps prevent a return to heavy drinking. Naltrexone is the first medication approved in 45 years to help alcoholics stay sober after they detoxify from alcohol.

Together, these investigations will help to prevent alcohol problems; identify alcohol abuse and alcoholism at earlier stages; and make available new, more effective treatment approaches for individuals and families.

Alcohol Availability.

The availability and accessibility of alcohol may influence employee drinking. More than two-thirds of the 984 workers surveyed at a large manufacturing plant said it was "easy" or "very easy" to bring alcohol into the workplace, to drink at work stations, and to drink during breaks. Twenty-four percent reported any drinking at work at least once during the year before the survey. In a survey of 6,540 employees at 16 worksites representing a range of industries, 23 percent of upper-level managers reported any drinking during working hours in the previous month. Restricting workers' access to alcohol may reduce their drinking.

Supervision.

Limited work supervision, often a problem on evening shifts, has been associated with employee alcohol problems. In one study of 832 workers at a large manufacturing plant, workers on evening shifts, during which supervision was reduced, were more likely than those on other shifts to report drinking at work.

Alcohol Policies.

There is wide variation in the existence of alcohol policies, in employees' awareness of them, and in their enforcement in workplaces across the country. Researchers found that most managers and supervisors in one large manufacturing plant had little knowledge of the company's alcohol policy. In addition, supervisors were under constant pressure to keep production moving and were motivated to discipline employees for drinking only if the drinking was compromising production or jeopardizing safety. Workers' knowledge that policies were rarely enforced seemed to encourage drinking.

Effects of Employee Drinking

Alcohol-related job performance problems are caused not only by on-the-job drinking but also by heavy drinking outside of work. Ames and colleagues found a positive relationship between the frequency of being "hungover" at work and the frequency of feeling sick at work, sleeping on the job, and having problems with job tasks or co-workers. The hangover effect was demonstrated among pilots whose performance was tested in flight simulators. Yesavage and Leirer (20) found evidence of impairment 14 hours after pilots reached blood alcohol concentrations (BACs) of between 0.10 percent and 0.12 percent. Morrow and colleagues found that pilots were still significantly impaired 8 hours after reaching a BAC of 0.10 percent. Drinking at work, problem drinking, and frequency of getting "drunk" in the past 30 days were positively associated with frequency of absenteeism, arriving late to work or leaving early, doing poor work, doing less work, and arguing with co-workers.

Preventing Alcohol Problems in the Workplace

Health promotion programs offered in the workplace may reduce employees' alcohol-related problems. An employee health promotion program delivered in three 2-hour sessions at one manufacturing plant was designed to increase participants' awareness of the health risks related to stress and drinking. More than one-half of the 294 workers attended the sessions. Researchers based their results on data from 120 employees who completed prestudy and poststudy evaluations. After 6 months, 76 percent of the heaviest drinkers reportedly reduced their alcohol consumption. Moderate drinkers also reduced their consumption, and participants reported changes in their attitudes toward drinking and drinking and driving, knowledge about problem drinking, and recognition of signs of a drinking problem.

A 15-session worksite coping-skills intervention designed to reduce work- and family-related risk, to enhance protective factors, and to reduce negative health outcomes was conducted among 136 female secretaries. Six months later, participants reported less work-related stress, higher social support, and less alcohol use compared with a control group. Twenty-two months later, participants reported greater use of coping strategies and less drinking.