

ALCOHOL INFORMATION

General Information & Health Warning

'First you take a drink, then the drink takes a drink and then the drink takes you.' F. Scott Fitzgerald

For most people drinking alcohol in sensible, healthy amounts is pleasurable and can initially make you feel more relaxed. (However, there are other things we can do to make us feel more relaxed, as well as alcohol!). Too much alcohol, however can make you depressed, as alcohol is a depressant drug. The more you drink the less you are able to judge accurately what alcohol is really doing to your mind and body.

Different people have different drinking patterns:

- Social drinking one or more times a week
- Irregular and irregular binge drinking
- Drinking heavily spread over a week or every day.

If you are one of these heavier drinkers you are:

- Twice as likely to die of heart disease
- Twice as likely to die of cancer
- Twelve times more likely to die of cirrhosis of the liver
- Three times more likely to die in a road traffic accident
- Six times more likely to commit suicide

Alcohol & Addiction

The terms alcohol addiction, alcoholism, and alcohol dependence all mean the same thing. No one term is more serious than the other.

If you have ever been physically dependant on alcohol (needing a drink every day to get through for example and worse, having withdrawal signs if you don't get the drink) for 6 months, then any alcohol is likely to be harmful. You are likely to find it difficult to become a social or controlled drinker and it is best to abstain altogether.

Heavy drinkers or those addicted to alcohol can effect relationships and family life, financial independence, an eventual loss of social friendships and work security. You could lose your driving licence and/or put others in danger. Finally you can become physically and emotionally unwell. You can die.

The Consequences of Alcohol Abuse

The four most common medical consequences of alcohol abuse are:

1. High blood pressure
2. Liver damage
3. Red blood cell damage
4. Depression

Recommended Amounts of Alcohol

Alcohol measures are usually calculated by 'Standard Drinks'

Standard drinks: The thing to remember when you are counting drinks is the amount of alcohol in a drink. Some drinks vary and it always useful to check the label for the alcohol content.

General guidelines for standard drinks are as follows:

Spirits 30ml (10g of pure alcohol)

Glass of table wine 100ml (10g of pure alcohol). If you get four glasses of wine from a bottle displaying 8 standard drinks, then each glass contains 2 standard drinks.

Can of beer 330ml (10g of pure alcohol)

Mixed drinks: A mixed drink with 30ml (a single shot) of spirits gives you about the same amount of alcohol as a 330ml can of beer or a small 100ml glass of wine. They are all around 1 to one and a half standard drinks

The Alcohol Advisory Council of NZ recommend the following for safe drinking:

For women: No more than 4 standard drinks at one session; no more than 14 standard drinks a week

For men: no more than 6 standard drinks a one session; no more than 21 standard drinks a week

The WHO guidelines suggest no more than 2 drinks per day, and no more than 5 drinking days per week. They recommend 2 non-drinking days. It is advisable that you don't stockpile your drinks, and have them all at the end of the week.

Why the gender difference?

- Men are generally heavier than women
- Women metabolise alcohol quicker
- Women carry more water than men

When you should not drink

1. If you are pregnant or thinking about becoming pregnant.
2. If you are on medication or if you have a condition made worse by drinking
3. If you feel unwell, depressed, tired or cold as alcohol could make things worse.
4. If you are about to operate machinery or a vehicle or do anything that is risky or requires skill.
5. Drinking and driving is never recommended as it can limit your vision, concentration and perception and make you less aware and vigilant in looking for danger.

Facts to Know about Alcohol:

What happens to the body and the brain as alcohol travels through?

Absorption of alcohol occurs partially through the walls of the stomach and mainly in the upper part of the small intestine, once the contents of the stomach have passed through the pyloric valve. It becomes distributed through the body tissues in proportion to the water content.

Alcohol first enters the stomach and within minutes some of the alcohol is absorbed but the rest passes into the blood via the small intestine. The liver cannot immediately remove all the alcohol passing through it. Therefore most of the alcohol escapes, unchanged into the veins leading out of the liver for oxidation. The alcohol laden blood is transported from the liver to the heart.

The heart pumps it to other parts of the body, including the brain, where the blood-alcohol starts to take effect. The blood eventually returns to the liver for a second attempt.

Because the brain has a high water content, any alcohol starts to affect the central nervous system within a matter of minutes after it has been consumed. After the peak blood alcohol level has been attained, the total alcohol level of the body will slowly diminish, if no further alcohol is drunk.

The amount and circumstances of consumption play a large part in determining the extent of intoxication; for example, consuming alcohol after a heavy meal causes alcohol to absorb more slowly.

Hydration also plays a role, especially in determining the extent of hangovers. The concentration of alcohol in blood is usually measured in terms of the blood alcohol content.

Therefore too much alcohol consumption at one time will increase the risk of alcohol poisoning and the following day there would still be a level of alcohol in your blood stream. Depending on how much you drank and how much water and food you consumed, there could be a dangerous level of alcohol in your system, the following day which would put you at risk when driving and concentrating.

Strategies if you want to reduce your alcohol use, but don't want to stop

DRINKING THINKING

- Admit to yourself and others that you are drinking too much and that you are going to change
- Make three lists; list all the problems that you have that might be associated with drinking too much such as poor health, problems at work, damaged relationships. Second make a list of all the reasons why you like drinking. You need to recognise these in order to be able to tackle changing your lifestyle. Third, list all your reasons for wanting to cut down such as I want to be a better Father/Partner or I want to live and along and healthy life.
- Work out a set of drinking rules for yourself and write them down, this could include:

'I will never drink before 8pm,'

'I will never drink more than three hours at a time,'

'I will never drink for more than 3 hours at a time.'

'I will stop drinking with...'

'I will stop drinking strong lager.'

If you have a trustworthy friend or partner that can support you in meeting your drinking rules, this will help you reinforce your commitment. Agree with them that they can remind you of them if they see you changing and congratulate you when you have/are achieving them.

- Look for alternatives to alcohol. This involves looking at why you drink. Is it to reduce boredom, to increase confidence or to beat feelings of

depression? Do something else about these problems instead of using alcohol as the 'cover-up.'

- If you get a craving to drink, delay your drinking for as long as possible. Distract yourself, challenge your thoughts; 'Why do I need a drink?' 'What do I really need?'

DRINKING MONITORING

- **Keep an honest journal of your drinking.** This helps you become mindful of your drinking. This diary needs to include the times you have been drinking, where and who with and total your standard drinks/units for each week. Identify your most vulnerable high risk times of the day, week and who you are likely to be with. See if there is any pattern to your drinking. For example, mood states, feeling good or bad, rows or conflicts or social situations.
- **Count your drinks;** take some control of your own drinking.
- **Reward your successes** if you have managed to reduce your drinking by buying yourself a present or giving a present to someone else.
- **Expect occasional relapses** and don't be devastated by them. Old habits are hard to break. A lapse does not have to mean a full relapse. Keep trying.

DRINKING BEHAVIOUR

- **Set a goal** of how much and how often you would like to drink; per day, per week or per occasion and stick to it.
- **Alternate water** with drinks. Don't drink your allotted drinks all at once, or you may be tempted to drink more. Instead have at least one glass of water before each alcoholic drink.
- **Keep at least two separate days of the week** (more if you can) when you are alcohol free and try and make these a routine. This gives your body time to offset some of the impact of drinking.
- **Slow down.** Pace your drinking; if you are going to a pub for 3 hours decide how much you are going to drink and spread the times out. Intersperse with non-alcoholic drinks. Take smaller sips. Always put your glass down between sips.

Occupy yourself whilst in the pub; dart, snooker etc..

- **The more you drink in a session** the more difficult it is to stop and say no. So it is important that you set yourself a limit every time you have a drinking session.
- **Eat before you drink** and while you are drinking.
- **Have some non-alcoholic drinks.**
- **Don't allow others to top up your drink.**

DRINKING ENVIRONMENTS

- **Avoid heavy drinking situations.** Even if you only want to cut back, there will still be certain situations that will trigger you to break your limit, therefore learn to recognize them and avoid those situations. Look and see at which times and places you are more vulnerable to drinking more and change this.
- **Do more activities** that don't involve drinking; avoid or limit your exposure to alcohol environments, especially if you have some difficulties with limiting your drinks and resisting the temptation to drink.

DRINKING SUPPORT

- **Tell your friends** you are cutting down.
- **Ask a friend or your partner** to become an accountable person for you to monitor with you your drinking habits.
- **Drug/Alcohol Helpline is a free,** confidential advice and resources to help you cut down on 0800 787 797
- **You may need some help to manage your drinking more effectively** and to understand your drinking behaviour. See you GP in the first instance who will be able to refer you to a health professional.

The short-term effects of alcohol on the human body can take several forms.

The effects of alcohol are dependent on a variety of factors, including a person's size, weight, age, and sex, as well as the amount of food and alcohol consumed.

Initially, alcohol generally produces feelings of relaxation and cheerfulness, but further consumption can lead to **blurred vision** and **coordination** problems.

The **disinhibiting** effect of alcohol is one of the main reasons it is used in so many social situations. After excessive drinking, **unconsciousness** can occur and extreme levels of consumption can lead to **alcohol poisoning and, head injuries and death**. Death can also occur through **asphyxiation** by vomiting.

Other effects of moderate alcohol intake include dizziness and talkativeness. The immediate effects of a larger amount of alcohol include **slurred speech, disturbed sleep, nausea, and vomiting**. Alcohol, even at low doses, significantly impairs the **judgment and coordination** required to drive a car safely. Low to moderate doses of alcohol can also increase the incidence of a variety of **aggressive acts, including domestic violence and child abuse**.

Hangovers are another possible effect after large amounts of alcohol are consumed. A **hangover** consists of headache, nausea, thirst, dizziness, and fatigue. For some people the effects of alcohol abuse can be felt a long time after and repeated abuse will affect reflux and digestion.

The long term effects of alcohol

Alcohol in excessive quantities is capable of damaging nearly every organ and system in the body. Regularly consuming alcohol is correlated with an increased risk of developing alcoholism, cardiovascular disease, malabsorption, chronic pancreatitis, alcoholic liver disease, and cancer.

Sudden cessation of long term, extensive alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations and convulsions.

Long-term effects of consuming large quantities of alcohol, especially when combined with poor

nutrition, can lead to permanent damage to vital organs such as the brain and liver.

In addition, mothers who drink alcohol during pregnancy may give birth to infants with foetal alcohol syndrome. These infants may suffer from mental retardation and other irreversible physical abnormalities.

Research indicates that children of alcoholic parents are at greater risk than other children of becoming alcoholics.

REFERENCES/RESOURCES

Alcohol Advisory Council of NZ/ Kaunihera Whakatupato Waipiro o Aotearoa, (2004) 'Had Enough?' DVD www.alac.org.nz

Alcohol Advisory Council of New Zealand/Kaunihera Whakatupato Waipiro o Aotearoa, (2006) **Drink Check: Is Your Drinking OK?**, Leaflet, November 06

Alcohol Advisory Council of New Zealand/Kaunihera Whakatupato Waipiro o Aotearoa, (2006) **The Straight Up Guide to Standard Drinks: Know how much alcohol you're really drinking**, Leaflet, July 2006

Alcohol Health Watch-New Zealand www.ahw.co.nz

Ironbar N.O. & Hooper A. (2001) **Self-Instruction in Mental Health Nursing (2nd Ed)**, Bailliere Tindall, London

Laraia M.T. & Jefferson L.V. (2005) **Chemically Mediated Responses & Substance Related Disorders** in Stuart G.W. & Laraia M.T. (2005) (Eds) **Principles & Practice of Psychiatric Nursing (8th Edition)** Elsevier/Mosby, St. Louis, Missouri USA pgs 423-444

Lowe G. (1995) **Alcohol and Drug Addiction** in Lazaraus A.A. & Coleman A.M. (1995) **Abnormal Psychology**, Longman, London

Mindfield's College (European Therapy Studies Institute) (2001) **Understanding & Stopping Addictive Behaviour, Seminar Notes**, Mindfield's College

NZ Drug Foundation, 3rd Floor, 111, Dixon Street, PO Box 3082, Wellington, NZ 04-8016303 www.drugfoundation.org.nz

Powell T. (2000) **The Mental Health Handbook**, Speechmark, Brackley, UK

Rinomhota A.S. & Marshall P. (2000) **Biological Aspects of Mental Health Nursing**, Churchill Livingstone, Edinburgh