

Title: Alcoholism is Treatable

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Abstract:

For individuals with alcoholism also known as "alcohol dependency", meeting with a health care provider and the addition of naltrexone, combined behavioral intervention (CBI), or both naltrexone and CBI improved sobriety. Acamprosate, with or without CBI, was not shown to be effective at improving sobriety. Naltrexone or CBI alone while meeting with a health care provider produced better sobriety than any combination of acamprosate, naltrexone and CBI therapies. Meeting with a medical provider in a primary care setting and the addition of naltrexone could greatly improve effective treatment of alcohol dependence. For individuals who prefer counseling rather than medication, CBI provided by a therapist and the addition of meeting with a medical provider could also improve sobriety.

This document was created by a medical student enrolled in the Primary Care Clerkship at the University of Minnesota Medical School as part of the course project. The aim of the project is to present information on a medical topic in the format of a patient education handout. It does not necessarily reflect the views of the University of Minnesota Medical School physicians and faculty. These materials are provided for informational purposes only and are in no way intended to take the place of the advice and recommendations of your personal health care provider. The information provided may no longer be up to date since it has not been reviewed since the date of creation. The information provided should not be used to diagnose a health problem or disease, or as a means of determining treatment. In the event of a medical emergency, immediately contact a doctor or call 911.



What is Alcoholism?

Alcoholism also called “**alcohol dependence**” is a disease that makes your body need alcohol. Your life may revolve around alcohol. You may not be able to control how much you drink, even though your drinking is causing serious problems with your relationships, work, finances and health.

You may not have all the signs of alcoholism, but you may still have a problem with alcohol. This is called “**alcohol abuse**,” and means your excessive drinking causes social or health problems. But you don’t feel the same out of control urge to drink as in alcoholism. Also different from alcoholism, you usually don’t experience physical signs such as nausea, sweating, shakiness, or nervousness when you don’t drink.



For further information:

Visit -

www.niaaa.nih.gov
www.alcoholscreening.org
www.alcoholics-anonymous.org
www.al-anon.alateen.org

Or call -

The National Council on Alcoholism
and Drug Dependence Hotline

(800) 475-HOPE

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Alcoholism is Treatable



**University of Minnesota
Primary Care Clerkship
Patient Education Tool**



You are Not Alone in Your Recovery

Do you have a drinking problem?

If you're concerned that your alcohol consumption crosses the line of abuse or dependence, ask yourself these questions:



- **Do you need a drink as soon as you get up?**
- **Do you feel guilty about your drinking?**
- **Do you think you need to cut back on your alcohol consumption?**
- **Are you annoyed when other people comment on or criticize your drinking habits?**

If you answered yes to two or more questions, it's likely that you have a problem with alcohol. It is important to talk with your health care provider about your drinking. A yes answer to just one question may be a sign of a problem.

Alcoholism is a treatable disease. There are therapies to help you recover from alcoholism.

What treatments are right for me?

The correct treatment is established by the level of your dependence on alcohol. If you are not alcohol dependent, the goal of treatment is to drink less. If you are alcohol dependent, simply cutting back does not work. Abstinence must be part of your treatment goal.

Inpatient treatment programs usually include alcohol abstinence, individual and group therapy, participation in alcoholism support groups such as Alcoholics Anonymous (AA), educational lectures, work assignments, activity therapy, and family involvement. You will work with counselors and professional staff experienced in treating alcoholism.

Counseling has many forms. In **cognitive behavioral therapy**, you and your therapist find your unhealthy ways of thinking. You learn new ways to view and cope with stressful events. The goal is to develop a sense of control of your thoughts and feelings. Even when working with a therapist, it is important to meet with your primary health care provider during your recovery.

Where can I find support?

Participation in support groups is an important part of living with the disease, preventing or dealing with relapses, and staying sober.

Alcoholics Anonymous (AA) is a self-help group offering a sober peer group built around 12 steps.

Al-Anon is designed for people who are affected by someone else's alcoholism.

Alateen groups are available for teenage children of those with alcoholism.

What medications are available?



The Food and Drug Administration (FDA) has approved three medications for the treatment of alcoholism.

1. **Disulfiram (Antabuse)** makes your body more sensitive to alcohol. If you drink alcohol, disulfiram causes a strong physical reaction including flushing, nausea, vomiting and headaches. Disulfiram won't cure alcoholism, nor can it stop the urge to drink.
2. **Naltrexone (ReVia)** blocks the high of alcohol and narcotics to lower your urge to drink. This helps in your sobriety. Unlike disulfiram, naltrexone won't make you feel sick after taking a drink of alcohol.
3. **Acamprosate (Campral)** decreases the craving for alcohol. Drinking alcohol for a long time changes the way your brain works. Acamprosate helps your brain work normally again. Acamprosate won't make you feel sick after taking a drink of alcohol.

Talk about these options with your health care provider to find which or if any medication is right for you. Continuing to meet with your primary health care provider is important in your sobriety.