

Appendix 6

A guide for people with alcohol-related problems

This information sheet is a guide for those people who are concerned that they may have a drinking problem, and are thinking about getting help to better control or stop their drinking. It provides an overview of the types of treatment options available, and how to access these services. Talk to your health worker about any issues raised here, and how to get the help that suits your needs.

Some points to think about treatment

A range of different treatment options is available for people with drinking problems. When considering possible treatment options you should remember:

- There is no 'best method' of treatment that will work for everyone. You may need to try a number of options before finding what best suits you. Also, a certain type of treatment may suit a person at one stage in their life, but may not be useful at another time.
- The importance of assessment. Treatment will work best if it fits your own circumstances. Everybody is different, and an assessment by a health professional such as a doctor, drug and alcohol worker or counsellor will help identify the types of treatments and services that best suit your needs.

How does alcohol affect you and those around you?

Alcohol can affect our lives in many different ways. It is often linked to celebrations and social occasions, and many people like the effects of a few drinks. But alcohol, like all drugs, can have negative effects. It is usually when the negatives outweigh the positives that people think about reducing their alcohol use.

Some of the more common negative effects of alcohol are listed below.

Social issues	Physical health	Mental health
Financial problems	Liver disease	Bad memory
Relationship problems	Stomach problems (ulcers, reflux)	Anxiety
Legal problems	Muscle weakness	Depression
Violence	Sexual health problems	Suicidal thoughts
Lost friends	Heart problems	Fits
Employment problems	Poor diet	Blackouts
Drink-driving	Lower immunity to infections	Hallucinations
Accommodation problems	Harm to foetus in pregnancy	Difficulty concentrating

Take a minute to think about how alcohol may be affecting you and those around you. Talk to your health worker about these things, as it will help direct the best treatment approach for you.

Are you dependent on alcohol?

Many people will experience problems linked to their alcohol use, but are not necessarily dependent to alcohol.

Alcohol dependence refers to people with long-term and heavy alcohol use who find it difficult to cut down or stop drinking, despite ongoing physical, psychological and/or social harms.

One aspect of dependence is that the body adapts to regular and heavy alcohol use – it becomes 'tolerant' to the effects of alcohol, and you find that you have to drink much more in order to get intoxicated. After a long period of heavy drinking, your body adapts so that it only really works 'normally' if you have alcohol in your body – and going without alcohol can lead to withdrawal symptoms (such as anxiety, sweats, tremor, nausea, stomach cramps).

Dependent drinkers generally need more intensive treatment than people who are not dependent: they may require a withdrawal program (detoxification) to enable them to stop drinking, and ongoing treatment services (like counselling, medication, self-help programs) to 'stay stopped'.

If you are not sure whether you may have an alcohol problem, or are dependent on alcohol, you can complete the AUDIT questionnaire and discuss this with your health practitioner.

Controlled drinking or abstinence: what is a realistic goal?

Some people would like to continue drinking at 'low levels' or resume 'moderate' drinking soon after a short break.

In general, most dependent drinkers who attempt this find it very difficult, and most relapse to heavy drinking. Therefore, clinicians strongly suggest that dependent drinkers aim to stop drinking all alcohol for at least several months, preferably longer. Counselling programs with the specific goal of 'controlled drinking' are available, but are generally not recommended until the patient has achieved at least 3 to 6 months' abstinence.

Controlled drinking may suit people with no or low levels of dependence, either with the help of a short-term counselling program, or through controlled drinking programs.

What are your treatment options?

Many treatment options are available; they include brief counselling programs, withdrawal programs, counselling services, medications, residential rehabilitation programs and self-help programs.

Talk to your health practitioner about the problems you may need help with, or concerns you may have; look at what steps you can take to address them and which services may be able to help.

Stopping or reducing your alcohol use is often a major step towards sorting out these problems.

Brief counselling programs are designed to assess the level of your alcohol use, and how your drinking may be affecting your life (including health, relationships, work, finances). These programs will help you set realistic goals and examine ways of reducing any alcohol-related problems, and will maintain contact with you to see how things have worked out. Brief counselling programs are usually only 1 to 4 sessions, and can be done with any

trained health practitioner, such as a general practitioner or an alcohol and drug worker. They are best suited to non-dependent drinkers; that is, people who do not have long-term and heavy patterns of alcohol use.

Withdrawal programs (also known as detoxification – detox – programs) are 1 to 2 week programs aimed at helping heavy long-term drinkers to stop drinking. Sometimes you can undertake withdrawal at home (if you have good supports and your withdrawal is not expected to be severe), but if you have severe health problems it is safer to go through withdrawal in special detox units or in hospital. Withdrawal programs involve supportive counselling and sometimes medication.

Most heavy drinkers will return to heavy drinking after a withdrawal program unless they take part in some form of ongoing treatment – as one saying goes: 'stopping is easy – it's staying stopped that's hard'.

Counselling services for drinking problems are many and varied. Programs can be one-to-one with a counsellor or group-based, where you will also learn from other people's experiences. Many counselling programs are based on 'relapse prevention' that aims to help you stay off alcohol by:

- identifying your likely risks and 'triggers' for drinking (such as places, people, routines, emotions)
- helping you find other ways of coping with these risks
- identifying ways to stop a 'slip up' (or lapse) from becoming a full blown relapse to heavy drinking.

You may also benefit from counselling for other issues, such as dealing with mood or anxiety problems, relationship issues, unresolved grief or stress, anger management, sleep problems or domestic violence. Talk to your health practitioner about your concerns, and what services may be best suited to you.

Medications can help reduce alcohol use after withdrawal.

- **Naltrexone** (brand name Revia®) reduces cravings for alcohol, reduces the number of drinking days, and the amount consumed on any drinking day. It has some benefits in about 40 to 60 per cent of the people who take the medication. It does not block the effects of alcohol, but it does block the effects of opiate medications (such as morphine), so it is best avoided if you need opioid analgesia. A standard dose is one tablet (50 mg) per day.
- **Acamprosate** (brand name Campral®) works to reduce alcohol cravings. It has some benefits in about 30 to 50 per cent of people taking the medication. A standard dose is two tablets three times a day.
- **Disulfiram** (brand name Antabuse®) works by causing a severe reaction (nausea, headache, abdominal discomfort) if you drink alcohol. It is only suitable for people who are very motivated to stop drinking, and usually works best if a family member or carer helps make sure you take your medication each day (see Appendix 7).

Talk to your health practitioner about these medications, as they can have side effects and are not recommended for some patients who have other health problems. If your prescribed medication is working, it should generally be continued for at least 6 months.

Residential rehabilitation – rehab – programs (also known as therapeutic communities) are usually long-term programs where people live and work in a community of other users, ex-users and professional staff. Programs can last anywhere between one and 12 months (or more). Rehab programs aim to help you build the skills and attitudes to make positive, long-term changes towards an alcohol and drug-free lifestyle. Programs usually include activities such as employment, education and skills training, counselling, group work, relapse prevention, and a 're-entry' part where you are helped return to your community.

Self-help programs for alcohol dependence consist of people helping each other to stay alcohol free, and are usually group programs run by their own members rather than by professionals. The main self-help program is the Alcoholics Anonymous 12-step program; another, for people not keen to attend Alcoholics Anonymous, is Smart Recovery®.

Taking care of physical, mental and social issues

You may have a range of physical (such as hypertension, gastritis, liver disease) and/or mental health (such as anxiety, depression) problems linked to your alcohol use. Often, these health problems can get better after a period of abstinence, but this can take several weeks (and in some cases months) before major improvement occurs.

You may also need social and welfare help for financial, legal, accommodation, child support or employment problems. Your health practitioner can guide you to the appropriate support service (see also 'Contact details for further help and services' below).

Support for families

Family members, friends or carers of heavy drinkers experience a range of emotions in living with, and trying to support drinkers. Many benefit from support and the opportunity to discuss how they are coping. Self-help groups (such as Al-Anon) and professional services for families and carers are available (see also 'Contact details for further help and services' below).

Contact details for further help and services

Alcoholics Anonymous (AA)	http://www.aa.org.au/
Al-Anon (for friends and relatives)	http://www.al-anon.org/australia/
SMART Recovery®	www.smartrecoveryaustralia.com.au
Controlled drinking	http://www.acar.net.au/cdcp01.html

Guidelines for the Treatment of Alcohol Problems

For information about local treatment services and referral options, contact the local Alcohol and Drug Information Service (ADIS), the Drug and Alcohol Specialist Advisory Service (DASAS) or The Australian National Council on Drugs at <<http://www.ancd.org.au>> or:

NSW	http://www.nsw.gov.au/package.asp?PID=9538 Phone: 1800 023 687 or (02) 9361 8006 (for professionals)
Vic.	< http://drugsandalcohol.dhs.vic.gov.au/directline.htm > Phone: 1800 888 236
Qld	http://www.health.qld.gov.au/atod/ Phone: 1800 177 833 or (07) 3837 5989
SA	http://www.dassa.sa.gov.au/site/page.cfm?u=110 Phone: 1300 131 340 or (08) 8363 8618
WA	www.dao.health.wa.gov.au/tabid/69/Default.aspx Phone: 1800 198 024 or (08) 9442 5000
NT	1800 131 350 or 1800 629 683 Alice Springs (08) 8951 7580 Darwin (08) 8922 8399 Amity House 1800 684 372 or (08) 8944 6565
Tas.	(03) 9416 1818 or 1800 811 994
ACT	< http://health.act.gov.au/c/health?a=da&did=10038160&pid=1058840628 > Phone: (02) 6207 9977 or (02) 6205 4545