

Local referral pathways – making your listing

This section provides a simple template for recording the contact details of services that help you support the health and wellbeing of your Indigenous clients. The template includes a list of some key contacts, but because it is not a comprehensive list, blank spaces have been left for you to add other service types or contacts that are relevant to your local setting.

Service type	Contact names, for example: <ul style="list-style-type: none"> • Workers • Organisation 	Contact details, for example: <ul style="list-style-type: none"> • Phone • Fax • Email
Emergency/crisis general health care		
Emergency/crisis mental health care		
Emergency housing		
Aboriginal Health Service/Aboriginal Medical Service		
Aboriginal Family Violence/Domestic Violence (DV) Services		
Aboriginal legal rights		
Aged care		
AIDS Council		
Alcohol, tobacco and other drugs information		
Alcohol support groups		
Carers Association of Australia		
Dental care		
Diabetes		
Disability		
Division of General Practice		
Education		
Employment and training/CDEP		
Financial assistance/counselling		
Gambling		
Guardianship Board		

Health organisations and information services

This section lists contact details of health organisations and reliable information services that may help you to identify your own local services, as well as the titles of resources that may assist you in understanding and working with your Indigenous clients and their families in regard to alcohol (and other drug) related issues.

Also provided are contact details for organisations that can assist you with training and workforce development. These include professional services that can send you resources to give to your clients, their families and community members.

Please note that the resources and contacts listed in this section are provided as a guide only and should not be considered a comprehensive list. All contact details were verified as correct at the time of publication, but readers should note that contact details may be subject to change.

Aboriginal and Torres Strait Islander health information service

Australian Indigenous HealthInfo Net

www.healthinfonet.ecu.edu.au

Aboriginal and Torres Strait Islander peak health organisations

Aboriginal Health and Medical Research Council of New South Wales (AHMRC)

Phone: 02 9212 4777

Fax: 02 9212 7211

www.ahmrc.org.au

Aboriginal Health Council of South Australia (AHCSA)

Phone: 08 8132 6700

Fax: 08 8132 6799

www.ahcsa.org.au

Aboriginal Health Council of Western Australia (AHCWA)

Phone: 08 9227 1631

Fax: 08 9228 1099

www.ahcwa.org

Tasmanian Aboriginal Health Service (TAHS)

Phone: 03 6231 3527

Fax: 03 6231 1348

Aboriginal Medical Services Alliance – Northern Territory (AMSANT)

Phone: 08 8981 8433

Fax: 08 8981 4825

www.amsant.com.au

Queensland Aboriginal and Islander Health Council (QAIHC)

Phone: 07 3360 8444

Fax: 07 3257 7455

www.qaihc.com.au

Victorian Aboriginal Community Controlled Health Organisation (VACCHO)

Phone: 03 9419 3350

Fax: 03 9417 3871

www.vaccho.org.au

Accommodation: temporary

Aboriginal Hostels Ltd (Central Office)

Phone: 02 6212 2001

Fax: 02 6212 2022

www.ahl.gov.au

Alcohol and mental health problems (comorbidity)

Hard copies of the following resources can be ordered free of charge from the Department of Health and Ageing:

www.alcohol.gov.au

Email: nmm@nationalmailing.com.au

National free call Monday to Friday, 8 am to 6 pm EST: 1800 020 103

Order publications on extension 8654

Quote hardcopy publication numbers

Publications for clients

Proudfoot, H, Teeson, M & Dillon, P 2005, *Feeling good? Answering your questions about alcohol, drugs and mental health*, National Drug and Alcohol Research Centre & Mental Health Services Conference Inc. of Australia and New Zealand, Canberra.

Hardcopy publication order number: ID53

Publications for health professionals

McCabe, D & Holmwood, C 2003, *Comorbidity of mental disorders and substance use in general practice*, Primary Mental Health Care Australian Resource Centre, Australian Government Department of Health and Ageing, Canberra.

Hardcopy publication order number: ID24

Holmwood, C 2003, *Comorbidity of mental disorders and substance use: A brief guide for the primary health clinician*, Primary Mental

Health Care Australian Resource Centre, Australian Government
Department of Health and Ageing, Canberra.

Hardcopy publication order number: ID22

Care plan package

Australian Integrated Mental Health Initiative, Northern Territory (AIMhi NT)

An Indigenous Australian mental health package developed through the Top End Mental Health Service for remote communities.

Resources include mental health assessment tools, fact sheets, flipcharts and animated stories.

Many of the resources are available to download from the Auseinet website www.auseinet.com or contact:

Dr Tricia Nagel
Top End Mental Health Service
PO Box 40596
Casuarina NT 0811
Email: trish.nagel@nt.gov.au

Information service and resources

Auseinet: Australian Network for Promotion, Prevention and Early Intervention for Mental Health

Phone: 08 8201 7670
Fax: 08 8201 7673
Email: auseinet@flinders.edu.au
www.auseinet.com

Alcohol-related brain injury

Information service

arbias inc. – Specialists in alcohol and substance related brain injury

Phone: 03 8388 1222

Fax: 03 9387 9925

Email: arbias@arbias.com.au

www.arbias.org.au

Publications

arbias inc. 2005, *Alcohol related brain injury: Looking forward*, arbias inc., Melbourne.

Sedunary, C 1997, *Our health our way: Information about acquired brain injury for the Victorian Koori community*, arbias inc., Melbourne.

PDF versions of both publications are available to download free of charge from www.arbias.org.au.

Community development

Publication

Brady, M 2005, *The grog book: Strengthening indigenous community action on alcohol*, revised edition, Australian Government Department of Health and Ageing, Canberra.

Copies can be ordered free of charge from the Department of Health and Ageing:

www.alcohol.gov.au

Email: nmm@nationalmailing.com.au

National free call Monday to Friday, 8 am to 6 pm EST: 1800 020 103

Order publications on extension 8654

Quote publication order number AG42

Community health promotion resources

Many of these organisations and services offer free or low-cost resources, such as flipcharts, magnets, pamphlets, posters and videos, that have been designed especially for Aboriginal communities.

Aboriginal Drug and Alcohol Council (SA) Inc. (Adelaide)

Phone: 08 8362 0395

Fax: 08 8362 0327

Email: adac@adac.org.au

www.adac.org.au

Australian Government Department of Health and Ageing alcohol website

www.alcohol.gov.au

Australian Government Department of Health and Ageing National Drug Strategy Resources Catalogue

Email: nmm@nationalmailing.com.au

National free call Monday to Friday, 8 am to 6 pm EST: 1800 020 103

Order publications on extension 8654

Quote publication order number AG43

Community Drug Action (NSW)

Phone: 02 9424 5946

Fax: 02 9424 5757

Email: drugaction@doh.health.nsw.gov.au

www.communitybuilders.nsw.gov.au/drugs_action

Koori DrugInfo

Phone: 1300 858 584
Fax: 03 9328 3008
Email: druginfo@adf.org.au
www.kooridruginfo.adf.org.au

Strong Spirit, Strong Mind: Aboriginal ways to reduce harm from alcohol and other drugs – Western Australia Drug and Alcohol Office (DAO)

Head Office: 08 9370 0333
Fax: 08 9272 6605
www.dao.health.wa.gov.au

Counselling

Social and emotional wellbeing

Link-Up centres and social and emotional wellbeing counsellors are available in most states and territories.

Link-Up services

National free call: 1800 624 332

A 'Bringing Them Home' map that shows the Australia-wide locations of these services is available from the Office for Aboriginal and Torres Strait Islander Health (OATSIH):

Phone: 02 6289 5291

Fax: 02 6289 4603

Email: oatsih.enquiries@health.gov.au

You can also check the following website for your state or territory OATSIH and nearest Aboriginal and/or Torres Islander health service contact details:

www.health.gov.au/internet/wcms/publishing.nsf/Content/Indigenous+Health-11p

Indigenous Psychological Services (Perth)

National free call: 1800 098 550

Phone: 08 9362 2036

Fax: 08 9362 5546

www.indigenoupsychservices.com.au

Narrative therapy services or training

Dulwich Centre (Adelaide)

Phone: 08 8223 3966

Fax: 08 8232 4441

www.dulwichcentre.com.au

Training videos

Strong Spirit, Strong Mind: Aboriginal ways to reduce harm from alcohol and other drugs: Culturally secure counselling

Strong Spirit, Strong Mind: Aboriginal ways to reduce harm from alcohol and other drugs: Working with the story telling board

Available from: Western Australia Drug and Alcohol Office (DAO)

Head Office: 08 9370 0333

Fax: 08 9272 6605

www.dao.health.wa.gov.au

Cultural respect and communication

Publications

Australian Health Ministers' Advisory Council Standing Committee on Aboriginal and Torres Strait Islander Health Working Party 2004, *Cultural respect framework for Aboriginal and Torres Strait Islander health*, Department of Health South Australia, Adelaide.

Cass, A, Lowell, A, Christie, M, Snelling, P, Flack, M, Marrnganyin, B & Brown, I 2002, 'Sharing the true stories: Improving communication

between Aboriginal patients and healthcare workers', *Medical Journal of Australia*, vol 176, no 10, pp 466–70.

Eckerman, A, Dowd, T, Chong, E, Nixon, L, Gray, R & Johnson, S 2005, *Binan Goonj: Bridging cultures in Aboriginal health*, 2nd edn, Churchill Livingstone, Sydney.

Franks, C & Curr, B 1996, *Keeping company: An inter-cultural conversation*, Centre for Indigenous Development Education and Research, University of Wollongong.

Trudgen, R 2000, *Why warriors lie down and die: Towards an understanding of why the Aboriginal people of Arnhem Land face the greatest crisis in health and education since European contact. Djambatj Mala*, Aboriginal Resource and Development Services Inc., Darwin.

Australian author and specialist in languages Diana Eades has written and contributed to various books on Aboriginal English. These should be available through university bookshops.

Drug and alcohol research centres

National Centre for Education and Training on Addiction (NCETA)

Flinders University

Phone: 08 8201 7535

Fax: 08 8201 7550

www.nceta.flinders.edu.au

National Drug and Alcohol Research Centre (NDARC) ***University of New South Wales***

Phone: 02 9385 0333

Fax: 02 9385 0222

www.ndarc.med.unsw.edu.au

***National Drug Research Institute (NDRI)
Curtin University of Technology***

Phone: 08 9266 1600
Fax: 08 9266 1611
www.ndri.curtin.edu.au

Turning Point: Alcohol and Drug Centre

Phone: 03 8413 8413
Fax: 03 9416 3420
www.turningpoint.org.au

Medicines and pharmacotherapies

Publications

Australian Medicines Handbook (AMH)

The *AMH* is a joint project of the Royal Australian College of General Practitioners, the Pharmaceutical Society of Australia and the Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists.

The *AMH* is updated in January and July each year and can be purchased as a book or CD-ROM, online or downloaded onto a pocket personal computer. Prices vary with choice of medium and student discounts are available.

The *AMH* is available from Australian Medicines Handbook Pty Ltd
Phone: 08 8303 6977
Fax: 08 8303 6980
www.amh.hcn.net.au

Central Australian Division of Primary Health Care Inc. 2005, *CARPA medicines book for Aboriginal Health Workers*, 1st edn, Central Australian Division of Primary Health Care Inc., Alice Springs.

Available to purchase for \$25.00 plus postage

Phone: 08 8950 4800

Fax: 08 8952 3536

www.carpa.org.au

Gowing, LR 2005, *Pharmacotherapies for relapse prevention on alcohol dependence*, DASSA Monograph No. 17, Drug and Alcohol Services South Australia, Adelaide.

Available only as a PDF document; download free of charge from www.dassa.sa.gov.au/webdata/resources/files/Monograph_17.pdf

Information service

National Prescribing Service (NPS), Therapeutic Advice and Information Service (TAIS)

Phone: 1300 138 677

Fax: 03 9459 4546

Email: tais@nps.org.au

www.nps.org.au

Pregnancy

Publications

NSW Department of Health 2006, *National clinical guidelines for the management of drug use during pregnancy, birth and the early development years of the newborn*, Ministerial Council on Drug Strategy Cost Shared Funding Model, Commonwealth of Australia, Sydney.

PDF version is available to download free of charge from: www.health.nsw.gov.au/pubs/2006/pdf/ncg_druguse.pdf

Western, J 2006, *Fetal alcohol spectrum disorders: A guide for midwives*, Drug and Alcohol Services South Australia, Adelaide.

Booklet with CD-ROM available to purchase from the Alcohol and Drug Information Service (ADIS) South Australia

Phone: 1300 131 340

Fax: 08 8363 8666

www.dassa.sa.gov.au

Pregnancy drug information services

Australian Capital Territory

Canberra Hospital

Phone: 02 6244 2222

New South Wales

MotherSafe

Royal Hospital for Women

Phone: 02 9382 6539

Outside Sydney: 1800 647 848

Northern Territory

Royal Darwin Hospital

Phone: 08 8922 8888

Queensland

Queensland Drug Information Centre

Phone: 07 3636 7098

Email: Queensland_Drug_Information_Centre@health.qld.gov.au

South Australia

Women's and Children's Hospital

Phone: 08 8161 7000

Tasmania

Royal Hobart Hospital

Phone: 03 6222 8308

Victoria

Royal Women's Hospital
 Phone: 03 9344 2000
 Email: drug.information@rwh.org.au

Western Australia

Kind Edward Memorial Hospital for Women
 Phone: 08 9340 2222

Screening and brief intervention tools**Paper-based tools (such as books and flipcharts)*****Indigenous Risk Impact Screen (IRIS) and brief intervention***

An Indigenous Australian screening tool for alcohol and mental health problems, developed by Coralie Ober and Carla Schlesinger, in conjunction with Queensland Health (Brisbane)

Phone: 07 3237 5655
www.health.qld.gov.au/atods/programs/iris_project.asp

Brady, M & Hunter, E 2003, *Talking about alcohol with Aboriginal and Torres Strait Islander patients: A brief intervention tool for health professionals*, 2nd edn, Australian Government Department of Health and Ageing, Canberra.

Copies are available free of charge from the Department of Health and Ageing

www.alcohol.gov.au
 Email: nmm@nationalmailing.com.au
 National free call Monday to Friday, from 8 am to 6 pm EST: 1800 020 103

Order publications on extension 8654

Quote publication flipchart order number: AG25

Brady, M 1995, *Giving away the grog: Aboriginal accounts of drinking and not drinking*, Australian Government Department of Health and Ageing, Canberra.

Copies are available free of charge from the Department of Health and Ageing

www.alcohol.gov.au

Email: nmm@nationalmailing.com.au

National free call Monday to Friday, from 8 am to 6 pm EST: 1800 020 103

Order publications on extension 8654

Quote publication number: ATSI43

Computer-based tools

The grog kit: An interactive CD for health practitioners

An Indigenous Australian CD-ROM developed by Ernest Hunter and Helen Travers in 2005, through the National Health Information Touchscreen Development Program, University of Queensland

Available free of charge

Phone: 07 4050 3646

Fax: 07 4051 4322

Email: info@hitnet.com.au

www.hitnet.com.au

The drink-less program

Computerised AUDIT screening tool, handy advice card and supporting pamphlets for health professionals, reception staff and clients can be downloaded free of charge or printed materials (complete kit \$60.00 plus \$10.00 postage) can be purchased

Phone: 02 9515 8650

Fax: 02 9515 8970

www.cs.nsw.gov.au/drugahol/drinkless

State and territory alcohol and drug information services

Australian Capital Territory

24-hour telephone service for health professionals and community members

Community Health Helpline

Phone: 02 6207 9977

New South Wales

24-hour telephone service for health professionals

NSW Drug and Alcohol Specialist Advisory Service (DASAS)

Phone: 1800 023 687 Outside Sydney

Phone: 02 9361 8006 Sydney

24-hour telephone service for community members

Alcohol and Drug Information Service (ADIS)

Phone: 1800 422 599 Outside Sydney

Phone: 02 9361 8000 Sydney

Northern Territory

24-hour telephone service for health professionals

Drug and Alcohol Clinical Advisory Service (DACAS)

Phone: 1800 111 092

24-hour telephone service for community members

Alcohol and Drug Information Service (ADIS)

Phone: 1800 131 350

Queensland

24-hour telephone service for health professionals and community members

Alcohol and Drug Information Service (ADIS)

Phone: 1800 177 833 Outside Brisbane

Phone: 07 3236 2414 Brisbane

South Australia

24-hour telephone service for health professionals and community members

Alcohol and Drug Information Service (ADIS)

Phone: 1300 131 340

Tasmania

24-hour telephone service for health professionals

Drug and Alcohol Clinical Advisory Service (DACAS)

Phone: 1800 630 093

24-hour telephone service for community members

Alcohol and Drug Information Service (ADIS)

Phone: 1800 811 994 Outside Hobart

Phone: 03 6233 6722 Hobart

Victoria

24-hour telephone service for health professionals

Drug and Alcohol Clinical Advisory Service (DACAS)

Phone: 1800 812 804 Outside Melbourne

Phone: 03 9416 3611 Melbourne

24-hour telephone service for community members

DirectLine

Phone: 1800 888 236

Western Australia

24-hour telephone service for health professionals and community members

Alcohol and Drug Information Service (ADIS)

Phone: 1800 198 024 Outside Perth

Phone: 08 9442 5000 Perth

Suicide

Publication

Ministerial Council for Suicide Prevention 2005, *Aboriginal people working together to prevent suicide and self harm*, Ministerial Council for Suicide Prevention, Department of Health and Ageing, Perth.

PDF version is available to download free of charge from www.mcsp.org.au

Information service and resources

Lifeline's Just Ask: rural mental health information service
Phone: 1300 131 114 (9am to 5pm Eastern Standard Time)
Email: justask@lifeline.org.au
www.justask.org.au

Important note: This is not a counselling service; call 131 114 for Lifeline's 24-hour telephone counselling service.

Translator services

Aboriginal Interpreter Services (for Indigenous Australian languages spoken in the Northern Territory)

Darwin office: 08 8999 8353
Alice Springs office: 08 8951 5576
www.dlghs.nt.gov.au/ais

Kimberley Interpreting Service (for Indigenous Australian languages spoken in the Kimberley Region)

Phone: 08 9192 3981
www.kimberleyinterpreting.org.au

Australian Government Translating and Interpreting Service

National 24-hour service: 131 450 local call cost
www.immi.gov.au/living-in-australia/help-with-english/help_with_translating/index.htm

Workforce Development

Australian Indigenous Health Promotion Knowledge Network

Phone: 02 9036 7113
www.indigenouthealth.med.usyd.edu.au

Council for Aboriginal Alcohol Program Services Inc. (Northern Territory)

Phone: 08 8922 4800
Fax: 08 8922 4832
www.caaps.org.au

Diploma of Narrative Approaches for Aboriginal People (Adelaide)

Nunkuwarnin Yunti: Working Together
Phone: 08 8223 5217
Fax: 08 8232 0949
www.nunku.org.au

Gnibi – College of Indigenous Australian Peoples, Southern Cross University

National free call: 1800 816 676
Phone: 02 6620 3955
Fax: 02 6620 3438
www.scu.edu.au/schools/gnibi

Indigenous Psychological Services (Perth)

Phone: 08 9362 2036

Fax: 08 9362 5546

www.indigenoussychservices.com.au

Indigenous Risk Impact Screen (IRIS) and brief intervention (Brisbane)

Phone: 07 3238 4065

www.health.qld.gov.au/atods/programs/iris_project.asp

Koori Health

Koori Human Services Unit, Department of Human Services, Victoria

Phone: 03 9096 7032

www.health.vic.gov.au/koori

Strong Spirit, Strong Mind: Aboriginal ways of reducing harm from alcohol and other drugs (Perth)

Western Australia Drug and Alcohol Office (DAO)

Head Office: 08 9370 0333

Fax: 08 9272 6605

www.dao.health.wa.gov.au

Turning Point: Alcohol and Drug Centre (Melbourne)

Phone: 03 8413 8413

Fax: 03 9416 3420

www.turningpoint.org.au

Glossary

abstinence – Not drinking (refraining from) any alcohol or engaging in other drug use. This lifestyle decision may be based on health, personal, social, religious, moral, legal or other reasons (National Drug Strategy Unit 2003).

alcohol – In these guidelines, alcohol refers specifically to the range of drinks (beverages) designed for human consumption that contain the depressant drug ethyl alcohol or ethanol (NHMRC 2001).

alcoholic diabetes – see diabetes -

alcoholic hallucinosis – An acute mental syndrome characterised by vivid auditory hallucinations which can occur shortly after stopping or reducing alcohol consumption.

anaphylactic shock or **anaphylaxis** – A sudden, severe and potentially life-threatening allergic reaction to food, stings, bites or medicines.

aspiration – Inhalation of fluid or other matter into the lungs.

ataxia – The word ataxia means without coordination. People with ataxia have problems with coordination because parts of the nervous system that control movement and balance are affected. Ataxia may affect the fingers, hands, arms, legs, body, speech, and eye movements

atherosclerosis – When the heart arteries have become narrowed or blocked by fatty deposits on their walls; it is this that causes angina and heart attack.

binge – Refers to either occasional sessions of heavy drinking by a person who is not alcohol dependent, or a 'bender' lasting days or weeks by a person who is alcohol dependent (NHMRC 2001).

blood alcohol concentration (BAC) – The amount of alcohol contained in a person’s blood, which is expressed as grams of alcohol per 100 millilitres of blood (NHMRC 2001). It is also known as blood alcohol level (BAL).

The terms positive BAC and negative (zero) BAC are often used by law enforcement agencies to describe the presence or absence of alcohol in a person’s bloodstream. Positive BAC is used to describe a person who has exceeded the legal amount of alcohol allowed when operating a vehicle or machinery.

For the purposes of these guidelines, a positive BAC means any recorded amount of alcohol concentration in the blood, and negative BAC means no alcohol in the blood.

cardiac arrhythmia – An abnormality in the heart’s electrical system that causes the heart to beat irregularly, too slowly or too quickly. When this happens the pumping action of the heart may be affected. People with arrhythmias may experience palpitations, heart racing, dizziness, shortness of breath, fatigue or fainting. Some people seem to have no symptoms. (MainLine Health USA, www.mainlinehealth.org/mlh/centprog/heart/article_2289.asp, accessed 24 December 2006.)

cardiomyopathy – Weakening of the heart muscle.

cardiovascular – To do with the heart (cardio) and the blood vessels (vascular) (NHMRC 2001).

cirrhosis – A chronic disease affecting the liver. The liver is the largest organ in the body and is located in the upper right side of the abdomen, below the ribs. When chronic diseases cause the liver to become permanently injured and scarred, the condition is called cirrhosis. The scar tissue that forms in cirrhosis harms the structure of the liver, blocking the flow of blood through the organ. The loss of normal liver tissue slows the processing of nutrients, hormones, drugs and toxins by the liver. The production of essential proteins and other substances made by the liver is also slowed.

[American Gastroenterological Association, www.gastro.org/wmspage.cfm?parm1=681, accessed 9 January 2007.]

cognition – Mental functions and processes, including thinking, problem solving, planning, memory recall, perception and recognition, judgment and language (NHMRC 2001).

cognitive dysfunction – Difficulties in memory, problem solving and learning new things.

comorbidity – The presence of two or more health conditions or illnesses at the same time. For example, a person with an alcohol and mental health comorbidity may have a diagnosis of alcohol dependence and depression. A person with multiple comorbidities might have regular excessive alcohol use, anxiety, diabetes, high blood pressure and heart disease.

contraindication – A specific situation in which a drug, procedure or surgery should not be used because it may be harmful to the patient.

cultural awareness – Having knowledge and understanding of a different culture's history, values, belief systems, experiences and lifestyles. Developing awareness does not mean becoming an 'expert' of another culture, but rather involves appreciating the potential for cultural differences, accepting that differences exist, and understanding those differences. It also involves personal self-reflection about one's own culture, biases and tendency to stereotype (Thomson 2005).

cultural respect – The recognition, protection and continued advancement of the inherent rights, cultures and traditions of Aboriginal and Torres Strait Islander peoples (Australian Health Ministers' Advisory Council Standing Committee on Aboriginal and Torres Strait Islander Health Working Party 2004).

delirium tremens (the DTs) – A disorder involving sudden and severe mental changes (psychosis) or neurological changes (including seizures) caused by abruptly stopping the use of alcohol.

Rapid pulse rate, elevated blood pressure and a high temperature also may be present. Symptoms occur because of the toxic effects of alcohol on the brain and nervous system, and may be severe and progress rapidly. Symptoms most commonly occur within 72 hours after the last drink, but may occur up to 7 to 10 days after the last drink. Delirium tremens (and alcohol withdrawal in general) can be fatal. (Medline Plus 2005, www.nlm.nih.gov/medlineplus/ency/article/000766.htm, accessed 19 December 2006.)

dependence – A phenomenon with biological, psychological and social elements, whereby a person gives priority to using a particular drug (for example, alcohol) over other behaviours that were once much more important to the person. Dependence is not an all or none phenomenon, but exists in degrees along a continuum (NHMRC 2001).

depressant – A medicine, drug or other agent that slows the activity of the central nervous system (brain) and vital organs of the body. Depressants acting on the central nervous system include general anaesthetics, opiates, alcohol, sedatives and hypnotics

detoxification or detox – The physiological process by which a person dependent on alcohol stops drinking and the body removes toxic substances. Ideally, detoxification should be supervised by nursing or other healthcare staff to minimise symptoms and risk of harm. This process may or may not involve the administration of prescribed medication. Detoxification is a treatment stage prior to abstinence-based rehabilitation.

diabetes – The term diabetes mellitus describes a metabolic disorder of multiple causes. It is characterized by chronic high blood glucose levels (hyperglycaemia) and disturbances of carbohydrate, fat and protein metabolism. These result from defects in insulin secretion, insulin action, or both. The effects of diabetes mellitus include long-term damage, dysfunction and failure of various organs.

diabetic coma – See **ketoacidosis**.

foetal alcohol spectrum disorders – An umbrella term used to describe a continuum of permanent physical and intellectual birth-defect syndromes caused by the mother’s consumption of alcohol during pregnancy. It may also be referred to as fetal alcohol spectrum disorders, which is the American English spelling (Chudley et al 2005).

foetal alcohol syndrome – A relatively uncommon cluster of mainly facial abnormalities and poor physical and intellectual development observed in children born to women who drank heavily during their pregnancy. This may also be referred to as fetal alcohol syndrome, which is the American English spelling (NHMRC 2001).

gastritis – Gastritis is an inflammation (swelling) of the lining of the stomach.

haemorrhagic stroke – A stroke caused by bleeding either into the brain (intracerebral haemorrhage) or over the surface of the brain (subarachnoid haemorrhage) (NHMRC 2001).

healthcare provider – In the context of these guidelines, healthcare provider refers to a person who is appropriately trained, is formally recognised and practices within a designated healthcare role such as a doctor, registered nurse, pharmacist or Aboriginal Health Worker.

hepatic encephalopathy – When toxic substances pass from the liver into the blood, damaging the central nervous system and brain cells.

high risk [drinking] – Defines a level of drinking at which there is considerable risk of short- and/or long-term physical harm, and above which risks to health and wellbeing continue to increase rapidly (NHMRC 2001).

For healthy adult men:

- Short-term high risk: 11 or more standard drinks on any one day
- Long-term high risk: on average seven or more standard drinks per day, or 43 or more standard drinks per week.

For healthy adult women (who are not pregnant or not soon to become pregnant):

- Short-term high risk: seven or more standard drinks on any one day
- Long-term high risk: on average five or more standard drinks per day, or 20 or more standard drinks per week.

hypertension – High blood pressure (NHMRC 2001).

hyperglycaemia –When there is too much sugar in the blood because the body is not producing or getting enough insulin or when the body cannot use insulin properly. It is also known as high blood sugar. Stress and illness can cause hyperglycaemia in clients with diabetes (Diabetes Australia 2003a).

hypoglycaemia –When there is not enough sugar in the blood because the body is producing or getting too much insulin or not enough sugar (glucose). It is also known as low blood sugar. Skipping meals and drinking alcohol without food can cause hypoglycaemia in clients with diabetes (Diabetes Australia 2003b).

hypothermia – When the body's control mechanisms fail to maintain a normal body temperature. Signs and symptoms that may develop include gradual loss of mental and physical abilities. Severe hypothermia can lead to death. (Mayo Clinic.Com www.mayoclinic.com/health/hypothermia/DS00333, accessed 8 January 2007.)

hypoxia – The term cerebral hypoxia is lack of oxygen supply to the cerebral hemispheres (the outer portion of the brain). It is often used to refer to a lack of oxygen supply to the entire brain.

Indigenous Australians – All Australian Aboriginal and Torres Strait Islander peoples. They were the first inhabitants of the Australian continent and its nearby islands, and are referred to as the traditional owners of the land.

intoxication – There is no consistent or formally agreed definition of intoxication; however, it is usually taken to refer to an elevated blood alcohol concentration such that a person cannot function within their normal range of physical and intellectual abilities. It is a subjective state that involves the experience of a substantial effect of alcohol on mood, thoughts and physical movement (NHMRC 2001).

ischaemia – An inadequate flow of blood to a part of the body due to blockage or constriction of the blood vessels that supply it (NHMRC 2001).

ischaemic stroke – A stroke caused by blockage of a blood vessel in the brain (NHMRC 2001).

ketoacidosis (also known as diabetic coma) – Diabetic ketoacidosis is a complication of diabetes. It is caused by the build-up of by-products of fat breakdown, called ketones. This occurs when glucose is not available as a fuel source for the body, and fat is used instead.

kinship – In Indigenous Australian culture, kinship is far broader than biological or matrimonial family and relationship ties, such as parents and children, aunts and uncles. Kinship relationships are also based on shared cultural concepts of country, family and community.

Korsakoff's syndrome (also known as Korsakoff's psychosis or amnesic-confabulatory syndrome) – A condition often seen in people who have been alcohol dependent, characterised by a

loss of short-term memory and an inability to learn new skills. The cause of the condition can often be traced to a deficiency of B complex vitamins, especially thiamine and B12. The heart, vascular and nervous system are involved. Symptoms include amnesia, confabulation, attention deficit, disorientation, and vision impairment. The main features are impairments in acquiring new information or establishing new memories, and in retrieving previous memories. Korsakoff's syndrome represents the chronic (long-term) phase of Wernicke-Korsakoff syndrome. (National Institute for Alcohol Abuse and Alcoholism, etoh.niaaa.nih.gov/dbtw-wpd/exec/dbtwpcgi.exe, accessed 19 December 2006.)

long-term risk [to health] – Refers to the long-term harmful effects from drinking at risky and high-risk levels on a regular basis, for example on most days of the week. Long-term risks of harm include alcohol-related brain damage, pancreatitis, cirrhosis of the liver, nerve damage, lowered immune system function and susceptibility to infection, blood disorders, heart disease and cancers, and mental health problems including anxiety, depression and sleep disorders.

low risk [drinking] – A level of drinking at which there is only a minimal risk of harm. At this level, there may be health benefits for some of the population (NHMRC 2001).

For healthy adult men:

- Short-term low risk: up to six standard drinks on any one day, and no more than three days per week
- Long-term low risk: on average four standard drinks per day, or up to 28 standard drinks per week.

For healthy adult women (who are not pregnant or not soon to become pregnant):

- Short-term low risk: up to four standard drinks on any one day, and no more than three days per week
- Long-term low risk: on average two standard drinks per day, or up to 14 standard drinks per week.

nystagmus – Rapid involuntary rhythmic eye movement; it is a clinical sign of Wernicke’s encephalopathy.

ophthalmoplegia – Paralysis of one or both eyes; it is a clinical sign of Wernicke’s encephalopathy.

opioid – Possessing some properties characteristic of opiate narcotics but not derived from opium. Examples are fentanyl and methadone.

pancreatitis – Acute inflammation of the pancreas. The two main causes are alcohol consumption and gall stones.

paroxysmal sweats – One-off or recurring ‘sudden attacks’ of symptoms such as sweating (perspiration) under the arms or on the forehead, face and palms of hands. (Medline Plus’ Medical Dictionary online, www.uwo.ca/pathol/glossary.html#P, accessed 8 January 2007.)

pattern of drinking – Refers to aspects of drinking behaviour other than the level of drinking, and includes when and where drinking takes place, the number and characteristics of drinking occasions, activities associated with drinking, personal characteristics of the drinker and drinking companions, the types of drinks consumed, and the drinking norms and behaviours that comprise a ‘drinking culture’ (NHMRC 2001).

peripheral neuropathy – Failure of the nerves that carry information to and from the brain and spinal cord and the extremities (hands and feet). This produces pain, loss of sensation, and possible inability to control muscles. The term can be broken down as follows: ‘neuro’ meaning nerves, ‘pathy’ meaning abnormal, and ‘peripheral’ meaning nerves beyond the brain and spinal cord.

Risk factors for peripheral neuropathy include diabetes, heavy alcohol use and exposure to certain chemicals and drugs. Some people have a family history of (or hereditary predisposition for) the condition.

peripheral vascular disease – A disease of the blood vessels (atherosclerosis) causing narrowing of the arteries in the leg (NHMRC 2001).

relapse – The recurrence of harmful alcohol or drug use after a period of significant improvement. Relapse is common among people who have been alcohol- or drug dependent during the period they are attempting to stop their alcohol or drug use.

kidney disease – Relates to impaired function of the kidneys, which may be acute or chronic and lead to kidney failure. The kidneys, a pair of bean-shaped organs, are located at the bottom of the ribcage in the right and left sides of the back. The kidneys control the quantity and quality of fluids of the body and produce hormones and vitamins that direct cell activities in many organs; for example, the hormone renin helps control blood pressure. When the kidneys are not working properly, waste products and fluid can build up to dangerous levels, creating a life-threatening situation. (Lab Tests Online. <http://www.labtestsonline.org/understanding/conditions/kidney.html>, accessed 1 January 2007.)

risk factor – Anything that increases a person's chance of developing a particular disease or condition. Smoking, high blood pressure and old age, for example, are all risk factors for stroke (NHMRC 2001).

risky [drinking] – A level of drinking at which risk of harm is significantly increased beyond any possible health benefits (NHMRC 2001).

For healthy adult men:

- Short-term risky: seven to 10 standard drinks on any one day
- Long-term risky: on average five to six standard drinks per day, or between 29 and 42 standard drinks per week.

For healthy adult women (who are not pregnant or not soon to become pregnant):

- Short-term risky: five to six standard drinks on any one day
- Long-term risky: on average three to four standard drinks per day, or between 15 and 28 standard drinks per week.

sensorium – The area of the brain considered responsible for receiving and integrating sensations from the outside world. It represents the entire sensory and intellectual apparatus of the body (*New Collins Concise English Dictionary*, Australian Edition, 1983, p 1050).

short-term risk [to health] – Refers to intoxication and the immediate unwanted or dangerous effects from drinking a large amount of alcohol in a single session (such as in a single day). Short-term risks of harm include injury or death from accidents or violence, vomiting and choking, difficulty in perceiving and managing the physical environment, impaired communication, poor problem-solving ability, memory loss, alcohol poisoning (overdose), and suicide or self-harm.

standard drink – A drink containing 10 grams of pure alcohol (equivalent to 12.5 millilitres of alcohol) (NHMRC 2001).

stimulant – (also known as psycho-stimulant) - Stimulants are drugs that increase brain activity, increasing the person's level of alertness, wakefulness, energy and physical activity, and decreases their appetite. These include prescribed medications, other drugs such as caffeine and nicotine, and illicit drugs such as amphetamines, methamphetamines and cocaine.

stroke – Sudden and unexpected damage to brain cells that causes symptoms in the parts of the body controlled by those cells. It can affect thinking, movement, speech and/or the senses. It occurs when the blood supply to part of the brain is suddenly disrupted, either through blockage of an artery in the brain from a blood clot (ischaemic stroke) or bleeding into the brain (haemorrhagic stroke) (NHMRC 2001).

tolerance – Relates to a person's capacity to become intoxicated. When a person drinks alcohol for the first time, the amount of alcohol required to make them feel intoxicated is small. Once they drink regularly they require more alcohol to reach their early experience of intoxication because their brain and liver develop tolerance to the intoxicating effects of alcohol. Having adapted to the presence of alcohol, the liver produces more of the enzymes needed to break down (metabolise) alcohol more efficiently and faster. This explains why an alcohol-tolerant person will seem less intoxicated than a first or occasional drinker who has drunk the same amount of alcohol. In addition, as the person becomes a more experienced drinker, they learn to manage and compensate for the acute effects of alcohol. An experienced drinker's speech, physical movements and ability to pay attention may appear normal even when they have a high blood alcohol concentration.

Wernicke's encephalopathy – A serious and acute degenerative brain disorder caused by a lack of thiamine (vitamin B1). It may result from alcohol abuse, dietary deficiencies, prolonged vomiting, eating disorders or the effects of chemotherapy. Symptoms include mental confusion, visual impairment, stupor, coma, hypothermia, hypotension and ataxia. *Korsakoff's syndrome* – a memory disorder – also results from a deficiency of thiamine, and is associated with alcohol dependence.

Although Wernicke's and Korsakoff's may appear to be two different disorders, they are generally considered to be different stages of the same disorder, which is called *Wernicke-Korsakoff syndrome*. Wernicke's encephalopathy represents the acute phase of the disorder, and Korsakoff's syndrome represents the chronic phase. (National Institute of Neurological Disorders and Stroke, www.ninds.nih.gov/about_ninds/addresses.htm, accessed 7 January 2007.)

Glossary

AIHW	Australian Institute of Health and Welfare
AUDIT	Alcohol Use Disorders Identification Test
BAC	blood alcohol concentration
CIWA-Ar	Clinical Institute Withdrawal Assessment of Alcohol Scale – Revised
IM	intramuscular
IV	intravenous
NHMRC	National Health and Medical Research Council

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Note: *Indicates references quoted in the literature review commissioned by the NHMRC to form the primary evidence base for these Guidelines.

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