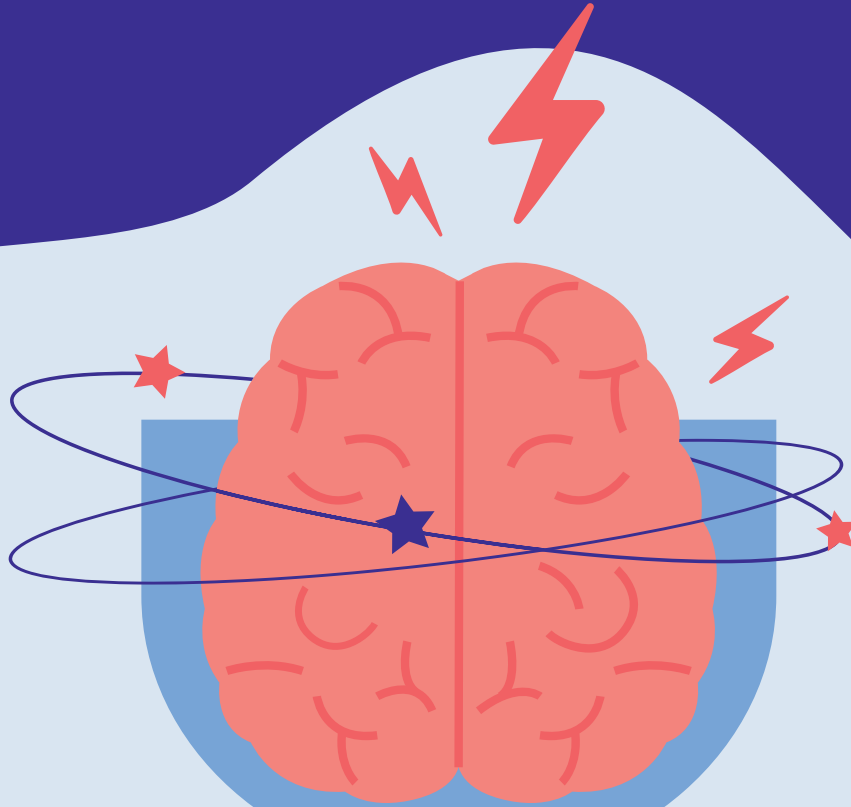


Your Health



Health Partners Newsletter December 2021



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Alcohol

When does it become a problem?

Do you or people close to you think you drink too much? Is it affecting your relationships, financial security, physical and/or mental health or your work? If so, or if someone close to you is drinking too much and you are concerned, read on...

How much is too much?

The UK Chief Medical Officer's guideline for both men* and women* states that:

- To keep health risks from alcohol to a low level, it is safest not to drink more than 14 units a week on a regular basis
- If you regularly drink as much as 14 units per week, it's best to spread your drinking evenly over three or more days
- If you wish to cut down the amount you drink, a good way to help achieve this is to have several drink-free days a week.



There are four levels of alcohol use:

- **Social drinking:**
 - 20% of the UK population do not drink alcohol
 - To keep health risks at a low level, it is considered safest not to drink more than 14 units per week on a regular basis.
- **At risk consumption:**
 - The level of drinking begins to pose a health risk, i.e. more than 14 units a week.
- **Problem drinking:**
 - Drinking causes serious problems to the individual, the family, work, and society in general
 - 24% of the population drink over the UK Chief Medical Officer's guidelines
 - Recent statistics indicated that nearly 2.5million Britons drank more than 50 units a week (3.7% of the population).
- **Dependence and addiction:**
 - Periodic or chronic intoxication
 - Uncontrollable craving for drink when sober
 - Tolerance to the effects of alcohol
 - Psychological and/or physical dependence
 - There are almost 600,000 dependent drinkers in the UK.

Changing trends

Over the last century, the overall amount of alcohol consumed per person in the UK has risen and fallen repeatedly.

Since reaching a peak in the mid-2000s, consumption generally fallen, although the pandemic has reportedly seen increases in consumption. Today, average consumption per adult is about 9.7 litres of pure alcohol per year – or about 18 units a week. Some numbers:

- Higher earners are more likely to drink than those on lower incomes
- Older people are more likely to drink regularly - people aged 55-64 are more likely than anyone else to drink at higher risk levels, and are least likely not to drink at all
- Men are more likely to 'binge drink' than women (though this is less the case among the young)
- Youth drinking has been falling steadily.

Most of the alcohol sold in the UK is bought by people who drink heavily. Indeed, the very heaviest drinkers – who make just 4% of the population - consume around 30% of all the alcohol sold in the UK.

What is alcoholism or alcohol dependence?

Alcoholism is a disease—not a lack of willpower. It alters the part of the brain that controls a person's motivation and ability to make healthy choices. Once it takes hold, it can be hard to shake loose—without the right help.

Alcohol dependence is characterised by craving, tolerance: a preoccupation with alcohol and continued drinking in spite of harmful consequences, e.g. liver disease or depression caused by drinking.

People with alcohol dependency may tend to gulp drinks, have extra drinks before going to social events, drink on their own, lie about how much alcohol they are consuming, drink on the way home and keep alcohol on them or nearby. The following symptoms and signs of alcohol abuse may be seen:

- Recurrent intoxication, nausea, sweating, palpitations
- Blackouts
- Mood swings, depression, anxiety, insomnia, chronic fatigue
- Seizures, hallucinations, confusion

- Indigestion, diarrhoea, bloating, vomiting, jaundice
- Tremor, unsteady gait, pins and needles, memory loss, erectile dysfunction
- Other substance abuse, e.g. cannabis, cocaine, heroin, amphetamines, sedatives, hypnotics, and anti-anxiety medication
- Unexpected medication response (drug interactions)
- Poor nutrition and personal neglect
- Recurrent absenteeism from work
- Frequent falls or minor trauma (particularly in the elderly).

Features of alcohol dependence include:

- A fixed daily routine of drinking to avoid withdrawal (although some people binge drink then have periods where they do not drink at all)
- Drinking taking priority over other activities
- Increased tolerance to alcohol
- Repeated withdrawal symptoms such as tremors, sweating and agitation
- Relief of withdrawal symptoms by further drinking
- Awareness of the compulsion to drink
- Rapid relapse drinking resumed after stopping for a while.

How do I know if I am drinking too much?

If you drink over the units mentioned and/or have some of the above symptoms, you may be a dependent drinker. This is someone who loses control over their drinking and has an excessive desire to drink. It is sometimes called alcohol addiction or alcoholism. Many people think of alcoholics as people living in the gutter but there is a whole spectrum of alcoholism, from high-functioning to end-stage.



Risk factors for alcoholism

There is no single responsible for developing an alcohol-use disorder; it may be caused by a range of factors, e.g.

Family history

- Children of parents with alcohol dependence are four times more likely to develop alcohol dependence
- Genetic studies (particularly those in twins) have clearly demonstrated a genetic component to the risk of alcohol dependence, An analysis of research involving 9,897 twin pairs from Australian and US studies found the heritability of alcohol dependence to be in excess of 50%.

Psychological factors

- Having a psychiatric/psychological condition as well, particularly depression, anxiety, post-traumatic stress disorder (PTSD), psychosis and drug misuse
- Stress, adverse life events and abuse
- Sex: men are twice as likely to be problem drinkers as women.

Occupation:

- Publicans and brewers have an increased access to drink and are at a higher risk
- Heavy drinking is seen as the norm in some jobs, e.g. sailors
- Homelessness: a third of homeless people have a drink problem.

Race:

- British Afro-Caribbeans and Asians have a lower rate of drink problems
- 20% of Chinese and Japanese cannot drink alcohol because of an inherited enzyme deficiency. This may also apply to some other races.

Why cut down or stop?

There are numerous reasons to review your alcohol intake, e.g.

- If you have one or two heavy drinking episodes a week, you increase your risk of long-term illness and injury
- The risk of developing a range of health problems (including cancers of the mouth, throat, bowel, liver and breast, as well as stroke, liver disease and pancreatitis) increases the more you drink on a regular basis
- You are more likely to be involved in accidents and injuries requiring hospital treatment, violent behaviour and being a victim of violence (including domestic)
- You might get involved in unprotected sex, which could potentially lead to unplanned pregnancy or sexually transmitted infections (STIs)
- Alcohol costs a lot and you could, when inebriated, lose your personal possessions, such as your wallet, keys or mobile phone
- Drinking too much may lead to alcohol poisoning, with associated vomiting, fits (seizures), falling unconscious or dying.

Managing alcohol dependency/alcoholism

Many people with alcohol-use disorders will recover without specialist treatment and many will reduce their alcohol intake following a change in circumstances, e.g. parenthood, marriage or taking on a responsible job.

Recognising the symptoms of alcoholism can make a tremendous difference to getting proper treatment and heading down the path to recovery. If you or someone you know has a problem and wants to do something about it, that is one of the most important steps you can take.

Management of “problem drinking”

A third of “problem drinkers” return to normal drinking without a doctor’s intervention.

Group therapy, Alcoholics Anonymous and long-term counselling may be helpful. They have never been subject to clinical trials but are helpful for many.

For some problem drinkers, abstinence may be best. For individuals where alcohol is not causing personal or social problems, aiming for controlled intake may be acceptable. Be guided by the professional advice and your experience. Can you stay stopped? If not, it may not be worth going back and keeping on trying to moderate your drinking if you find it impossible to drink moderately. Alternatively, consider stopping altogether if it is becoming an issue. Is it really worth the problems it is causing you?



Management of alcohol dependence

For people who are alcohol dependent, the next stage of treatment may require medically-assisted alcohol withdrawal (with medication, if necessary, to control the symptoms and complications of withdrawal).

Management of alcohol withdrawal programmes/detoxification involves:

1. Pharmacological treatment (drugs to help with withdrawal)
2. Psychological and social support (understanding alcoholism and learning how to avoid relapse)
3. Pharmacological and psychological prevention of relapse (sometimes medication may be given to make drinking physically unpleasant, combined with 2 above).

There are community-based assisted withdrawal programmes or inpatient and residential assisted programmes, depending on the level of care required, budget and the services available locally.

To access treatment, the best step is to speak with your GP. They can make an assessment and diagnosis and decide on the most appropriate treatment and management.

For those with a significantly high alcohol intake, stopping suddenly can result in seizures, which may be life-threatening. Therefore, if you are drinking heavily, it is important that you see your GP and undergo detoxification programme under specialist care and with advice.

It should be noted that treatment of alcohol withdrawal is only the beginning of rehabilitation and, for many, a necessary precursor to longer-term treatment, as habits may be ingrained. Withdrawal management should not be considered as a standalone treatment.

Other sources of help

For many, no matter the severity of their dependence, stopping is not the hardest part.

The most difficult part is STAYING STOPPED. This is because drinking has altered the part of the brain that controls a person's motivation and ability to make healthy choices, i.e. not drinking.

A person who genuinely wants to stay stopped – and for most people with a dependency, arguably, staying stopped is the best thing to stop the dependence developing (as the potential psychological dependency remains, no matter whether you have stopped or not) - there are some useful programmes out there. Talking with people with a similar condition may be an incredible relief – to realise that one is not alone with this problem and that recovery is possible.

See also:

AA: a free programme of recovery based on 12 steps, with group meetings and support. See <https://www.alcoholics-anonymous.org.uk/>

Drink Aware: a website with information and links to support Alcohol support services | [Drinkaware](#)

Drinkline: National alcohol helpline on 0300 123 1110

Alcohol Change UK: a website with information and links to support <https://alcoholchange.org.uk/help-and-support/about-alcohol-treatment>

Sources:

- NHS <https://www.nhs.uk/conditions/alcohol-misuse/>
- Drink Aware
- Hazelden Betty Ford
- AA
- Alcohol Change
- Drink Line
- NHS Digital
- ONS
- Daily Mail
- British Medical Association (2008). Alcohol misuse: tackling the UK epidemic
- National Institute for Health and Clinical Excellence (NICE) 2011. Alcohol-Use Disorders: Diagnosis, Assessment and Management of Harmful Drinking and Alcohol Dependence
- Enoch MA, Goldman D. Problem drinking and alcoholism: diagnosis and treatment. *Am Fam Physician*. 2002;65(3):441-8

*May include men, trans women, people who are non-binary who were assigned male at birth, and cis gender men.

**May include women, trans men, people who are non-binary who were assigned female at birth, and cis gender women.





Coping at Christmas

The Christmas season, for those who celebrate it, can be a time of cheer, families together and good food. For others, it can be a time of financial crisis, tension and/or loneliness. And with the COVID-19 pandemic, there is even more pressure, e.g. concern over loved ones and ongoing worries about one's health and safety. Let's look at some of the ways we can reduce those pressures.

Be kind to yourself:

- It's ok to prioritise what's best for you, even if others don't seem to understand
- Think about what you need and how you may be able to get it (this is not just material things)
- Consider talking to someone you trust about what you need to cope

- Don't compare your situation with others. Social media, in particular, can show people having fun, surrounded by others – when the reality may be different. Understand that your feelings are valid but you are you. You don't have to do what everyone else is doing to enjoy Christmas. Don't try to keep up with the Facebook-Joneses: do your own thing and leave them to compete on social media
- You may have lost someone close to you and still be grieving. Understand this and treat yourself with care
- Try not to expect too much of yourself. Imagine how unimportant the stress of Christmas preparations will seem in a couple of months' time - or even in a couple of weeks' time
- Make a list of the things that you need to do to prepare for Christmas. Review it and cross out anything that isn't essential, then decide which item is the most important. Do that one thing and ignore everything else on the list for the time being. Then prioritise the next thing and so on. As you achieve each thing, the rest of your list will seem easier.



Make some plans:

Think about what might be difficult about Christmas for you, and if there's anything that might help you cope. It might be useful to write this down, e.g.

- If you're going to be somewhere unfamiliar for Christmas, think about what you need to help you cope. Are there things you can bring to make you feel more comfortable? Or is there somewhere you can go to take a break (say, a little walk outside)?
- Certain places may feel very uncomfortable for you, e.g. if they bring back difficult memories or there is going to be alcohol and you have chosen not to drink. Could you plan to spend less time in difficult places, or not go at all? Are there any reasonable excuses for you to stay away?
- Think about whether you really need to do things if you're not looking forward to them. Can you do them differently or for less time?
- Try not to over-indulge. It's OK to say no to the next (or any) drink
- Make a list of any services that you might need and their Christmas opening hours, e.g. pharmacies. It might be worth making sure you have all the medication you need for the holiday period
- If you're worried about feeling lonely or isolated this Christmas, think about some activities to help pass the time, e.g. spending time in nature or helping others. Soup kitchens are a great place to help, filled with people seeking cheer and comfort and who need your help
- Try to plan something nice to do after Christmas – after all, Christmas is essentially one day. Having something to look forward to next year could make a real difference
- If you are spending Christmas with a small family group, the expectation that the festive season is a 'time for family' can add further pressure on already strained relationships. This is particularly seen among people who don't meet up often and who aren't used to spending so much time together. Being realistic about what you can expect from this time will help to avoid disappointment and arguments. This might then make it easier to heal family rifts. If it all becomes a bit much, head out for a walk.

Look after you:

- Set a 'start' and 'finish' time for what you count as Christmas. Remind yourself that it won't last forever
- Set your boundaries. Say no to things that aren't helpful for you
- Let yourself experience your own feelings. Even if they don't match what's going on around you, they're still real and valid
- Take time out. Do something to forget that it's Christmas or distract yourself, e.g. you could watch a film or read a book that's set in the summer
- Let yourself have the things you need, e.g. if you need to take time out instead of doing an activity
- If you can't avoid something difficult, plan something for yourself afterwards to help reduce the stress or distress you might feel
- Avoid using smartphones, tablets or laptops before bed as they disrupt our ability to sleep - try reading a book or magazine instead - and don't sleep with a television on. Avoid coffee, cola and energy drinks for a few hours before sleep; caffeine is a stimulant and can stop us sleeping. Recent research shows it also resets our body-clock, postponing our sleep and subsequent wake times
- Try the simplest mental wellbeing trick of all. Before sleep or whenever you feel stress or anxiety building, concentrate for a minute or so on taking slow, steady, deep breaths, emptying your lungs as much as possible in between each breath. Breathe in for four counts and out for six, in through your nose, out through your mouth.



Have a chat:

- Let people know you're struggling. It can often feel like it's just you. By having a chat to the right people, you will find that you are not alone in your feelings and letting it out can be a real help
- It doesn't have to be people who are already in your life. You could join an online community to talk others who have similar experiences to yours
- You don't have to justify yourself to others. But you might feel pressured to, especially if someone asks a lot of questions. It could help to let them know that certain situations are difficult for you, and tell them what they can do to help. It might also help to tell them that you understand they may see things in a different way
- You might not be able to make others understand. That's OK. It's not your responsibility to convince other people, or get their permission to look after yourself.

Get some help:

If you're struggling at Christmas, you may want to find support for your mental or physical health. Check these out:

Mental health:

Samaritans: 116 123 (freephone)

Mind 's Infoline: 0300 123 3393

Money and legal advice:

Citizen's Advice <https://www.citizensadvice.org.uk/>

Medical advice

Find a pharmacy near you

England: <https://www.nhs.uk/service-search>

Scotland: <https://www.nhsinform.scot/care-support-and-rights/nhs-services/pharmacy/nhs-pharmacy-first-scotland>

Wales:

<https://111.wales.nhs.uk/LocalServices/?s=Pharmacy>

NI:

http://www.healthandcareni.net/pharmacy_rota/pharmacies.html

NHS 111

England and NI: <https://111.nhs.uk/>

Scotland: <https://www.nhs24.scot/Our-Services/when-to-phone-111>

Wales: <https://111.wales.nhs.uk/>

Sources

MIND, Priory Group Avon & Wiltshire MHP, NHS, Citizen's Advice, Samaritans.

