

What's alcohol use disorder?

Alcohol use disorder (AUD) is a **medical condition** that can result from drinking. People with AUD usually have the following four traits:

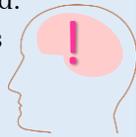
- They cannot control their drinking.
- They continue to drink even though it harms them.
- They spend a lot of time drinking and recovering from drinking.
- They have powerful cravings to drink.

Why can't I just stop drinking?

People with AUD are often told that they should “just stop drinking”. However, there is a strong **biological** aspect to addiction that makes stopping very hard. When we perform certain activities that are necessary for survival, such as eating or sex, the chemical dopamine is released in the brain, which makes us feel good.

This dopamine spike also registers in the **memory**, which causes us to remember the pleasure of the activity, and the **command centre**, which directs us to do the activity again.

Drinking causes an even bigger and longer-lasting release of dopamine. This results in our brains telling us that drinking is more important than survival activities, which makes it very difficult to “just stop.”



Can people with AUD get better?

People with AUD can and do get better, and accepting that you have AUD is an important first step toward recovery. The thought of working with a health care team to come up with a treatment plan might be difficult or scary, but once you've started, you may feel more hopeful that things can change. Try to remember that recovery doesn't happen all at once, and that you don't have to do it all by yourself. Reaching out to family and friends or to support groups like Alcoholics Anonymous might help you feel like you're not alone.



How can I learn more?

If you have any questions about AUD, you should speak to your doctor, nurse, or counsellor. You can also find more information and resources online at

www.metaphi.ca/patient-resources.html

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Alcohol use disorder: A quick guide for patients

According to recent studies, about 80% of Canadians drink alcohol. It's legal, it's easy to get, and it's a regular part of social life for a lot of people. But alcohol use can sometimes cause problems. Some people develop **alcohol use disorder**: they experience strong **cravings** for alcohol, get **withdrawal symptoms** if they stop drinking, and have **difficulty controlling their alcohol use** even when they want to.

It can be very hard to accept that your alcohol use is problematic; it's normal to feel ashamed, frightened, or angry. This pamphlet contains information about what alcohol use disorder is, why some people have it, and what people can do to get better.

How do you develop AUD?

There are multiple factors that can contribute to developing AUD. Two of these factors are **traumatic experiences** and a **family history** of addiction.

Traumatic things that happen to us in childhood, such as abuse or neglect, stay with us if we don't get help dealing with them. Some people who have had difficult childhoods start drinking or using drugs as a way of **cop**ing with these early traumas.

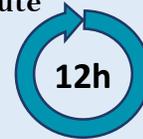
People with a strong family history of addiction often react to substances differently than others. Alcohol has a **greater pleasurable effect** on these people, making them to feel more confident, more energetic, less worried, and better overall. **Tolerance** to these effects develops very quickly. In just a few days, people find that they need to drink more in order to get the same effect.

AUD is not related to your character, will power, or morals, and has nothing to do with the kind of person you are.

Why do I feel sick when I try to stop drinking?

Alcohol is a **depressant**, meaning that it slows down your central nervous system. If you drink a lot of alcohol every day for several weeks or more, your nervous system speeds up over time in order to resist the

drowsiness that alcohol causes. This change is called **tolerance**. People who drink daily are often able to function normally even after drinking amounts that would put someone else to sleep. When someone suddenly stops drinking, the nervous system takes several days to slow back down to its normal state. During this period, people experience **withdrawal**, which is simply a hyper-active nervous system. Symptoms of **acute withdrawal** – tremor, sweating, vomiting, and anxiety – can start about twelve hours after the last drink, and they usually start to get better by day three, though they can last up to a week. Some people experience seizures, irregular heart rhythms, or severe delusions and hallucinations.



Sub-acute withdrawal usually begins after the first week of sobriety. The risk of serious complications is gone at this point, but people can experience several weeks or more of anxiety, fatigue, insomnia, and urges to drink as the nervous system continues to readjust to the absence of alcohol.



It is important that people going through acute alcohol withdrawal be monitored by health care professionals. If you have more than ten drinks a day and plan to stop drinking, talk to your health care team about getting medical support, especially if you have had withdrawal symptoms before.

What kind of treatment do I need?

Different types of treatment work for different people. There is no one right treatment path for everyone, so you should talk to your health care team about what would be best for you.

Withdrawal management can provide a safe environment for people in the early days of recovery. In addition to monitoring clients through withdrawal, addiction workers help people access housing and other social supports. Many people use withdrawal management as a first step in treatment.

People who struggle with alcohol cravings or lingering withdrawal symptoms may be offered an **anti-craving medication**. Medication usually makes other types of treatment much more effective and reduces the risk of relapse. These medications are safe, effective, and non-addictive.

Counselling is an important part of treatment for many people. Counselling programs can include education on healthy lifestyle choices, group or individual therapy sessions, help with developing coping skills, cognitive behavioural therapy, and peer support.