The following article was written by Steve Barrett, an American Legion lifetime member (Chapter 201), a member of the VFW (Post 9143), and a Clinical Social Worker at the Atlanta VA Medical Center. He works primarily with Vietnam veterans, and Steve is a Vietnam veteran himself. He was stationed in the Central Highlands in 1967. Steve is also a retired military social worker.

EVERYTHING YOU WANTED TO KNOW ABOUT ALCOHOLISM
BUT WERE AFRAID TO ASK
By Steve Barrett, LCSW, BCD

What does the term ‘Alcoholism’ mean? We probably have all used this term at some point to describe the drinking behavior of a friend or family member, particularly, if that person drinks a lot of alcohol on a regular basis. In reality, alcoholism is a medical term that describes what happens to people after they drink alcohol; and not necessarily, how much they drink. Let’s look at some of the facts.

Alcoholism is a chronic medical disease much like diabetes and arthritis are chronic diseases. Alcoholism occurs when your body becomes dependent on alcohol and you lose control over your drinking. You may not be able to control when you drink, how much you drink, or how long you drink on each occasion. A person suffering from alcoholism cannot stop drinking because he or she depends on alcohol to function both physically and emotionally; and the person continues to drink even though they know their behavior is causing problems. Alcoholism can deleteriously affect not only the alcoholic person’s physical health, but may also seriously impact relationships with family and friends, resulting in marital and family dysfunction. An alcoholic may also have legal problems, such as DUIs or drunk and disorderly charges. Occupational problems may develop including decreased efficiency on the job and absenteeism. Frequently, however, the alcoholic person’s job is the last area to be affected since the employment provides a self esteem boost and, of course, the money needed to purchase alcohol. When I was treating alcoholism on active-duty, I frequently heard commanders and first sergeants express astonishment when they discovered that one of their best workers was diagnosed as an alcoholic.

In reality, alcoholism is an ‘equal opportunity’ chronic disease – it can happen to anyone. Our understanding about who is an alcoholic often stems from our perceptions of this illness. The ‘skid row’ type of alcoholic actually only fits about 10% of alcoholics. Alcoholism affects men, women, and even children of all ages and social/economic backgrounds. It is estimated that three out of four adult alcoholics are well-accepted members of their community. Genetic factors appear to play a significant role in alcoholism, and may, in fact, account for about half of the total risk for alcoholism. However, genetic factors alone are unlikely to explain all cases of alcoholism. It is important to note that just because a person has the genetic propensity to develop alcoholism, does not mean they are doomed to an alcoholic future. Environment, personality, and emotional factors also play a strong role in this illness. No matter who is affected or why, the repercussions of this illness are significant. Alcoholism reduces life expectancy by 10-12 years. People who drink regularly have a higher rate of death from injury or violence. Alcohol plays a major role in more than half of all automobile accidents; and
alcohol-related automobile accidents are the leading cause of death in young people. Additionally, alcoholism is the primary diagnosis in a quarter of all people who commit suicide.

How can we identify a person with alcoholism - what are the warning signs? Each alcoholic person has a different drinking pattern. The one thing each has in common is an uncontrollable drinking habit. Many people have a drink to relieve tension after a particularly stressful day, but the alcoholic drinks to escape problems and to “self medicate” their emotional pain and depression. The alcoholic person makes promises to quit drinking, but then breaks them. The alcoholic person develops tolerance. The person cannot stop after one drink, and in fact, has to drink more and more to achieve the same effect. An alcoholic person soon finds it harder and harder to achieve the ‘good feeling’, regardless of the number of drinks. In order to deal with the drinking behavior, the alcoholic person may frequently employ two common defense mechanisms: denial and rationalization. They deny that they have a problem with alcohol, and rationalize why they drink, even though it is evident that the drinking is causing problems. Alcoholics frequently minimize their drinking and may become guarded and defensive when someone mentions their drinking pattern. The guardedness may be particularly evident if the person is experiencing blackouts and can’t remember what happens while drinking.

Despite the chronic nature of alcoholism and its negative effects, alcoholism is a very TREATABLE illness. The goals of treatment are threefold: reduce the immediate withdrawal symptoms, prevent medical complications, and long-term therapy to promote abstinence. People with moderate to severe symptoms of alcohol withdrawal may need inpatient treatment at a hospital or other facility that treats alcohol withdrawal symptoms. Withdrawal from alcohol could lead to delirium tremens and even death so medical intervention for severe withdrawal is imperative. People with mild-to-moderate alcohol withdrawal symptoms can often be treated in an outpatient setting. Once medical treatment has been completed, the person may be transitioned to residential treatment or a halfway house in order to continue treatment in a sober environment. Regardless of the type of treatment, the key to successful treatment, and what I believe is the BIGGEST step, is the recognition and acceptance by the alcoholic that they have a ‘drinking’ problem. So if you think there is a problem with your drinking, there probably is a problem.

Alcoholics Anonymous (AA) is an outstanding organization to help people get control of this illness (toll-free number 877:515-1255 and website at www.aa.org). I often suggest to veterans that they go to an AA meeting, sit on the back row, and see if they have any similarities with people who are in the meeting. This is a first step because no recovery program will succeed until the person recognizes that alcoholism is a problem, and accepts the need for help. Getting the help you need and getting sober, however, doesn’t mean your life is over. Remember, you can have fun at a party, and even ‘wear the lampshade’, while being sober.