

Thinking About Your Drinking

Courtesy of Barnabas Health EAP

If you drink alcoholic beverages, even occasionally, you need to know the facts about alcoholism. The American Medical Association, World Health Organization, and all responsible medical authorities have considered alcoholism a disease for nearly 50 years!

Assessment Tools

Who Becomes Alcoholic?

Although it isn't possible to predict who will become an alcoholic, understanding the illness provides a better chance of self-diagnosis. The earlier this information is understood the better. As the illness progresses, self-diagnosis becomes more difficult, and misinformation and stigma contribute to denial, the hallmark of the disease.

Definition of Alcoholism

Alcoholism is a primary, chronic disease with genetic, psychosocial, and environmental factors influencing its development and manifestations. The disease is often progressive and fatal. It is characterized by continual or periodic: impaired control over drinking, preoccupation with alcohol, use of alcohol despite adverse consequences, and distortions in thinking, most notably denial (American Society on Addiction Medicine.) The fact that alcoholism is partly hereditary has been known for decades. This makes alcoholics, while not to blame for their disease, responsible for its consequences and treating it when symptoms become evident.

Did You See Yourself?

In the definition of alcoholism, did you focus first on symptoms that didn't match your drinking pattern? Unlike cancer, where any symptom would cause alarm, symptoms of alcoholism that a person can say they do not have usually get the most attention. This is

particularly true with persons confronted by others over their alcohol-related problems.

Most alcoholics have a false definition of alcoholism that excludes them. This definition is based upon symptoms they have ruled out. These missing symptoms are used to explain why they are not alcoholic. Over time, their definition will change as new symptoms emerge with increasing severity, and the need to "compare out" grows more urgent.

Although in denial, most people with alcoholism have some awareness of a connection between their personal problems and drinking. This makes self-diagnosis possible when questions about drinking experiences associated with the disease are presented in a professional evaluation.

Looking Deeper at Denial

The terms "problem drinker" and "functional alcoholic" are labels that support denial. They help the alcoholic continue drinking unaffected by the anxiety of awareness. These are not medical terms. They assist the alcoholic, family, and/or friends with comparing out of the diagnosis.

A One Question Quiz

Have you <u>seriously</u> wondered whether you could be an alcoholic? If so, a full evaluation is a good idea. Social drinkers (those who drink, but do not have alcoholism) do not <u>seriously</u> consider this question.

The "CAGE" assessment is often used to quickly screen for alcoholism. Answering "yes" to two or more of the following questions usually confirms the diagnosis:

1) Have you ever tried to <u>Cut down on your drinking?</u>

2) Do you get <u>Annoyed when people talk about your drinking?</u>

3) Do you feel <u>Guilty about your drinking?</u>

4) Have you ever had an <u>Eye-opener?</u> (A drink first thing in the morning?)

Full evaluation tests include the Michigan Alcoholism Screening Test (MAST) and others that focus on behavioral symptoms like memory loss while drinking, DUIs, lost time from work, family complaints, concerns of relatives, worries about one's drinking, prior treatment, liver trouble, relationship problems, arrests or fights when drunk, failed promises at cutting back, and more. Some liver function tests can also spot evidence of alcoholism by abnormalities in the liver's enzyme production.

What the EAP Can Do?

The Barnabas Health EAP is available 24 hours per day, 7 days per week to assist you in finding a counselor to conduct an evaluation to determine your appropriate level of care

This service is confidential and easy to use. Just call **1-800-300-0628** to speak with a live clinician.

For additional information and resources visit our website at www.eapfirst.com.