

Alcohol Abuse vs. Alcohol Dependence

Q: How do you differentiate one from the other? Do they have different consequences?

A: **Alcohol abuse** is seen as any “harmful use” of alcohol.

The Diagnostic and Statistical Manual of Mental Disorders IV describes alcohol abusers as those who drink despite recurrent social, interpersonal, and legal problems as a result of alcohol use. Harmful use also implies alcohol use that causes either physical or mental damage, or both, but NOT necessarily.

Those who are **Alcohol Dependent** meet all of the criteria of alcohol abuse, but will also exhibit some or all of the following:

- Narrowing of the drinking repertoire (drinking only one brand or type of alcoholic beverage).
- Drink-seeking behavior (only going to social events that will include drinking, or only hanging out with others who drink).
- Alcohol TOLERANCE (having to drink increasing amounts to achieve previous effects).
- WITHDRAWAL Symptoms (getting physical symptoms after going a short period without drinking).
- Drinking to relieve or avoid withdrawal symptoms (such as drinking to stop the shakes or to “cure” a hangover).
- Subjective awareness of the COMPULSION to drink or CRAVING for alcohol (whether they admit it to others or not).
- A return to drinking after a period of abstinence (deciding to quit drinking and not being able to follow through).

Typically, those drinkers who are diagnosed as only alcohol abusers can be helped with a brief intervention, including education concerning the dangers of binge drinking and alcohol poisoning.

Those who have become alcohol dependent generally require outside help and more intensive approaches which could include detoxification, medical treatment, counseling and self-help programs, such as Alcoholics Anonymous or Smart Recovery.

Facts About Alcohol (from the National Institute of Alcohol Abuse and Alcoholism)

For most people who drink, alcohol provides a pleasant accompaniment to social activities. **Moderate** alcohol use- up to two drinks per day for men and one drink per day for women and older people- is generally not harmful for most adults. (A standard drink is one 12-ounce bottle or can of beer, one 5-ounce glass of wine, or 1.5 ounces of 80-proof distilled spirits.) Nonetheless, a large number of people get into serious trouble because of their drinking. Currently, nearly 14 million Americans -1 in every 13 adults- abuse alcohol or are **alcoholic**. Several million more adults engage in risky drinking that could lead to alcohol problems. These patterns include binge drinking and heavy drinking on a regular basis. Additionally, 53 percent of men and women in the United States report that one or more of their close relatives have a drinking problem.

The consequences of alcohol misuse are serious- in many cases, life threatening. **Heavy drinking** can increase the risk for certain cancers, especially those of the liver, esophagus, throat, and larynx. Heavy drinking can also cause liver cirrhosis, immune system problems, brain damage and harm to the fetus during pregnancy. In addition, drinking increases the risk of death and disability from automobile crashes as well as recreational and on-the-job injuries. Furthermore, both homicides and suicides are more likely to be committed by persons who have been drinking. In purely economic terms, alcohol-related problems cost society an estimated \$185 billion per year.

Difficulty walking, blurred vision, slurred speech, slowed reaction times, impaired memory: clearly, alcohol has profound effects on the brain! Some of these impairments are detectable after only one or two drinks and quickly resolve when drinking stops. On the other hand, a person who drinks heavily over a long period of time may have brain deficits that persist well after they achieve sobriety. Exactly how alcohol affects the brain and the likelihood of reversing the impact of heavy drinking on the brain remain hot topics in alcohol research today.