

Alcohol Abuse Revisited



People use alcohol to feel pleasure, decrease anxiety, decrease inhibitions, and to relax. In the later stage of alcohol dependence, alcohol may be consumed to decrease uncomfortable withdrawal symptoms.

An intoxicated person will show certain signs and symptoms depending on the level of alcohol in their blood, which is measured as a percentage of alcohol present in the individual's bloodstream.

Signs and Symptoms by Blood Alcohol Concentrations (BAC):

.02 – .09
coordination

Loss of muscular

.10 – .19
Neurological and mental
impairment, prolonged reaction time, lack of
coordination.

.20 – .29
Nausea, vomiting,
worsening gait and impairment

.30 – .39
Decrease in body
temperature, difficulty speaking, amnesia,
stupor

.40 > Coma

Alcohol is broken down in the stomach and by
the liver at a rate of

1/3 of an ounce per hour. One beer will raise
the blood alcohol level

.015. Therefore, 3 beers consumed in one hour
will result in a blood

alcohol level of about .045. The alcohol level
drops by .015 per hour.

A person with a blood alcohol level greater
than .15, who shows no signs
or symptoms of intoxication, is usually alcohol-
dependent, as is

someone who can actually drink enough to
reach levels greater than

.30.

Withdrawal

Alcohol is a depressant that affects all parts of
the body. Alcohol withdrawal can start at 6-60

hours after the last drink. Signs and symptoms include tremors, nausea, decreased appetite, anxiety, weakness, insomnia, inattention, flushed face, redness of eyes and increase in reflexes.

Persistent mild withdrawal is characterized by an individual complaining of sleep disturbances, a mild tremor, anxiety and depression. This can last for weeks or months after the last drink. It will get better if the person remains sober.

The treatment of withdrawal may require the use of medication. However, the individual must always be evaluated for other illnesses or injuries first. Treatment of withdrawal only helps the body to repair itself, but for recovery, the person needs to continue with substance abuse treatment. Withdrawal may be complicated by illusions, hallucinations and seizures. Illusions are misinterpretations of the surroundings are reported by about 25% of patients who report for treatment of the withdrawal. Hallucinations are less common and are described as feeling something, smelling something or seeing something. In all cases, the perception is not real. The individual who presents with these symptoms has otherwise a clear mental status and is upset by the illusion or hallucination.

Seizures, or "rum fits," as they were called in the past, tend to be a part severe withdrawal; An individual may complain of heightened light sensitivity during the period when he is most vulnerable to a seizure occurrence. Thirty percent of those who have withdrawal seizures go onto delirium tremens (DTs). Complicated withdrawal can be accompanied by delirium tremens if are other symptoms present including: tremors, restlessness, agitation and increased reflexes, increased heart rate and blood pressure, profuse sweating, dilated pupils, profound confusion, disorientation, hallucinations and paranoid delusions.

The risk of delirium tremens is increased if the patient has a blood alcohol level greater than .30, or withdrawal seizures. DT's should always be treated as an emergency and in an in-patient setting.

The mortality of untreated DT's is 10 -15%. If treated, the mortality is 1 - 2%.

What is a Hangover?

Alcohol Hangover, or Veisalgia, is derived from the Norwegian and the Greek words "uneasiness" and "pain".

Possible medical causes of hangover include: dehydration, inflammation

caused by the release of cytokines from white blood cells, build up of acetaldehyde, decreased glucose and the hyper-excitability state of the brain the day after drinking. This state happens because alcohol suppresses brain activity and then there is a rebound – hyperactivity.

The symptoms of a hangover include:

- headaches (66%)
- poor sense of well-being (63%)
- poor appetite (21%), tremors (20%)
- fatigue (20%) and nausea (9%)
- increased heart rate
- impairment of thinking and visual-spatial relationships
- lightheadedness and dizziness upon arising

Hangovers have a significant economic impact. There is an increased risk for injury and poor job performance from decreased visual-spatial skills, decreased dexterity, decreased management skills and decreased task completion. It has been reported that 29% of all college students have lost school time awaiting hangover recovery.

Medical Consequences of Alcohol Abuse

Nervous system: Too much alcohol can cause insomnia, night terrors and frequent awakening. Long-term alcohol abuse can lead to chronic organic brain syndrome (fatigue, anxiety, depression, memory loss and confusion), cerebellar degeneration (loss of tissue in the part of the brain that controls fine movements); optic neuropathy (damage to the optic nerve that can cause loss of vision, blurred vision and loss of color vision); strokes from increased blood pressure and increased blood clotting and blackouts (short-term memory loss).

Lungs: Because it suppresses the cough reflex, stomach contents can be aspirated into the lungs. White blood cells function poorly; pneumonia and TB can occur. The use of cigarettes can compound respiratory problems.

Heart: Since long-term alcohol abuse can cause arrhythmia (irregular heartbeat), it can lead to more serious heart problems. Longer-term consumption may result in alcohol

cardiomyopathy or heart failure.

Cocaine and alcohol used together can increase blood pressure.

Liver: One-fifth of alcoholics develop significant liver disease, most commonly seen as a "fatty liver." Liver enzymes must be measured to determine diagnosis. Alcohol hepatitis is a more serious inflammation of the liver and causes nausea, vomiting, anorexia, abdominal pain on the upper right side and intermittent fever and jaundice and can lead to cirrhosis (scarring and fibrosis of the liver).

Symptoms include all those previously noted, as well as gynecomastia (enlarged breasts), testicular atrophy, ascites (fluid on abdomen), poor clotting, esophageal varices (dilated veins in the esophagus), confusion and coma.

Stomach: Alcohol can affect the esophagus by increasing acid production in the stomach and causing heartburn and reflux. If very severe, the esophagus can rupture and contents of the stomach may go into the chest cavity. Alcohol can cause erosive

gastritis and ulcers.

Forty percent of all pancreatitis (inflammation of the pancreas) is caused by alcohol. It can cause abdominal pain, nausea, vomiting and diarrhea. Lack of pancreatic enzymes leads to non-absorbed fat and sugar in the small intestines which causes diarrhea and malnutrition.

Skeleton: Alcohol can decrease potassium and phosphate levels,

Inhibit the use of carbohydrates by the muscle, and cause alcohol

myopathy (discomfort in the extremities, muscular pain, muscle tenderness, muscle edema and swelling).

Alcohol can also affect the calcium metabolism in the bones, causing osteoporosis.

Skin: Consequences of alcohol use include premature aging, severe itching, palmar erythema (red palms) and spider angiomas (dilated blood vessels on the chest).

Other medical effects include: breast enlargement in men at the end-stage of liver disease, testicle atrophy (small testicles), peripheral neuropathy (numbness and tingling

in hands and feet),
depressed bone marrow and impotence.

- See more at: <http://addictioninfamily.com/alcohol/alcohol-abuse-revisited/#sthash.EoLKZDvi.dpuf>

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