

FAQs on Alcoholism

1. What is alcoholism?

Alcoholism, also known as alcohol dependence, is a disease that includes the following four symptoms:

Craving --A strong need, or urge, to drink.

Loss of control --Not being able to stop drinking once drinking has begun.

Physical dependence --Withdrawal symptoms, such as nausea, sweating, shakiness, and anxiety after stopping drinking.

Tolerance --The need to drink greater amounts of alcohol to get "high."

For clinical and research purposes, formal diagnostic criteria for alcoholism also have been developed. Such criteria are included in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, published by the American Psychiatric Association, as well as in the International Classification Diseases, published by the World Health Organization. (See also "Publications," [Alcohol Alert No. 30](#): Diagnostic Criteria for Alcohol Abuse and Dependence.)

2. Is alcoholism a disease?

Yes, alcoholism is a disease. The craving that an alcoholic feels for alcohol can be as strong as the need for food or water. An alcoholic will continue to drink despite serious family, health, or legal problems.

Like many other diseases, alcoholism is chronic, meaning that it lasts a person's lifetime; it usually follows a predictable course; and it has symptoms. The risk for developing alcoholism is influenced both by a person's genes and by his or her lifestyle. (See also "Publications," [Alcohol Alert No. 30](#): Diagnostic Criteria for Alcohol Abuse and Dependence.)

3. Is alcoholism inherited?

Research shows that the risk for developing alcoholism does indeed run in families. The genes a person inherits partially explain this pattern, but lifestyle is also a factor. Currently, researchers are working to discover the actual genes that put people at risk for alcoholism. Your friends, the amount of stress in your life, and how readily available alcohol is also are factors that may increase your risk for alcoholism.

But remember: Risk is not destiny. Just because alcoholism tends to run in families doesn't mean that a child of an alcoholic parent will automatically become an alcoholic too. Some people develop alcoholism even though no one in their family has a drinking problem. By the same token, not all children of alcoholic families get into trouble with alcohol. Knowing you are at risk is important, though, because then you can take steps to protect yourself from developing problems with alcohol. (See also "Publications," [A Family History of Alcoholism - Are You at Risk?](#); [Alcohol Alert No. 18](#): The Genetics of Alcoholism.)

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4. Can alcoholism be cured?

No, alcoholism cannot be cured at this time. Even if an alcoholic hasn't been drinking for a long time, he or she can still suffer a relapse. Not drinking is the safest course for most people with alcoholism.

5. Can alcoholism be treated?

Yes, alcoholism can be treated. Alcoholism treatment programs use both counseling and medications to help a person stop drinking. Treatment has helped many people stop drinking and rebuild their lives. (See also "Publication," [Alcohol Alert No. 49](#): New Advances in Alcoholism Treatment.)

6. Do you have to be an alcoholic to experience problems?

No. Alcoholism is only one type of an alcohol problem. Alcohol abuse can be just as harmful. A person can abuse alcohol without actually being an alcoholic--that is, he or she may drink too much and too often but still not be dependent on alcohol. Some of the problems linked to alcohol abuse include not being able to meet work, school, or family responsibilities; drunk-driving arrests and car crashes; and drinking-related medical conditions. Under some circumstances, even social or moderate drinking is dangerous--for example, when driving, during pregnancy, or when taking certain medications.

7. How can you tell if someone has a problem?

Answering the following four questions can help you find out if you or a loved one has a drinking problem:

Have you ever felt you should cut down on your drinking?

Have people annoyed you by criticizing your drinking?

Have you ever felt bad or guilty about your drinking?

Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover?

One "yes" answer suggests a possible alcohol problem. More than one "yes" answer means it is highly likely that a problem exists. If you think that you or someone you know might have an alcohol problem, it is important to see a doctor or other health care provider right away. They can help you determine if a drinking problem exists and plan the best course of action.

8. Can a problem drinker simply cut down?

It depends. If that person has been diagnosed as an alcoholic, the answer is "no." Alcoholics who try to cut down on drinking rarely succeed. Cutting out alcohol--that is, abstaining--is usually the best course for recovery. People who are not alcohol dependent but who have experienced alcohol-related problems may be able to limit the amount they drink. If they can't stay within those limits, they need to stop drinking altogether. (See the question [13](#), "What is a safe level

of drinking?") (See also "Publications/Pamphlets and Brochures," [How to Cut Down on Your Drinking](#).)

9. What is a safe level of drinking?

For most adults, moderate alcohol use--up to two drinks per day for men and one drink per day for women and older people--causes few if any problems. (One drink equals one 12-ounce bottle of beer or wine cooler, one 5-ounce glass of wine, or 1.5 ounces of 80-proof distilled spirits.)

Certain people should not drink at all, however:

- Women who are pregnant or trying to become pregnant
- People who plan to drive or engage in other activities that require alertness and skill (such as driving a car)
- People taking certain over-the-counter or prescription medications
- People with medical conditions that can be made worse by drinking
- Recovering alcoholics
- People younger than age 21.

(See also "Publications" [Harmful Interactions: Mixing Alcohol With Medicines](#) and [Drinking and Your Pregnancy](#); [Alcohol Alert No. 27](#): Alcohol-Medication Interactions; [Alcohol Alert No 50](#): Fetal Alcohol Exposure and the Brain; and [Alcohol Alert No. 52](#): Alcohol and Transportation Safety)

10. Is it safe to drink during pregnancy?

No, alcohol can harm the baby of a mother who drinks during pregnancy. Although the highest risk is to babies whose mothers drink heavily, it is not clear yet whether there is any completely safe level of alcohol during pregnancy. For this reason, the U.S. Surgeon General released advisories in 1981 and again in 2005 urging women who are pregnant or may become pregnant to abstain from alcohol (<http://www.lhvpn.net/hhspress.html>). The damage caused by prenatal alcohol includes a range of physical, behavioral, and learning problems in babies. Babies most severely affected have what is called Fetal Alcohol Syndrome (FAS). These babies may have abnormal facial features and severe learning disabilities. Babies can also be born with mild disabilities without the facial changes typical of FAS.

(See also "Publications" [Alcohol Alert No.50](#): Fetal Alcohol Syndrome and the Brain; "Pamphlets and Brochures," [Drinking and Your Pregnancy](#).)

11. Does alcohol affect women differently?

Yes, alcohol affects women differently than men. Women become more impaired than men do after drinking the same amount of alcohol, even when differences in body weight are taken into account. This is because women's bodies have less water than men's bodies. Because alcohol mixes with body water, a given amount of alcohol becomes more highly concentrated in a woman's body than in

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a man's. In other words, it would be like dropping the same amount of alcohol into a much smaller pail of water. That is why the recommended drinking limit for women is lower than for men. (See the question [13](#), "What is a safe level of drinking?" for recommended limits.)

In addition, chronic alcohol abuse takes a heavier physical toll on women than on men. Alcohol dependence and related medical problems, such as brain, heart, and liver damage, progress more rapidly in women than in men. (See also "Publications," [Alcohol Alert No. 62](#): Alcohol-An Important Women's Health Issue.)

12. Is alcohol good for your heart?

Studies have shown that moderate drinkers are less likely to die from one form of heart disease than are people who do not drink any alcohol or who drink more.

If you are a nondrinker, however, you should not start drinking solely to benefit your heart. You can guard against heart disease by exercising and eating foods that are low in fat. And if you are pregnant, planning to become pregnant, have been diagnosed as alcoholic, or have another medical condition that could make alcohol use harmful, you should not drink.

If you can safely drink alcohol and you choose to drink, do so in moderation. Heavy drinking can actually increase the risk of heart failure, stroke, and high blood pressure, as well as cause many other medical problems, such as liver cirrhosis. (See also "Publications," [Alcohol Alert No. 16](#): Moderate Drinking and [Alcohol Alert No. 45](#): Alcohol Coronary Heart Disease.)

13. How can a person get help for an alcohol problem?

There are many national and local resources that can help. The National Drug and Alcohol Treatment Referral Routing Service provides a toll-free telephone number, 1-800-662-HELP (4357), offering various resource information. Through this service you can speak directly to a representative concerning substance abuse treatment, request printed material on alcohol or other drugs, or obtain local substance abuse treatment referral information in your State ([see Treatment Referral Information](#)).

Many people also find support groups a helpful aid to recovery. The following list includes a variety of resources:

- [Al-Anon/Alateen](#)
- [Alcoholics Anonymous \(AA\)](#)
- [National Association for Children of Alcoholics \(NACOA\)](#)
- [National Clearinghouse for Alcohol and Drug Information \(NCADI\)](#)

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