CARING FOR THE PATIENT
WITH A HISTORY OF ALCOHOL ABUSE

INTRODUCTION

Alcohol abuse is the biggest substance abuse problem in the United States. It has been estimated that between 12 and 14 million Americans abuse alcohol, but that number is most likely much higher. Alcohol abuse causes many complex health problems. The cost for treating these, combined with the social and psychological devastation that goes along with chronic, excessive drinking makes alcohol abuse an enormous biggest public health care issue.

Because alcohol abuse and its impact are so widespread, there will definitely be a time during your career as a Certified Nursing Assistant (CNA) when you will care for a patient with a history of alcohol abuse. The patient may not have used alcohol for years, or he/she may still be actively abusing alcohol.

But whatever the current status of the patient’s pattern of drinking, as a healthcare professional you need to be familiar with some basic facts and information about the alcohol and alcohol abuse. Alcohol abuse is very widespread, people who chronically drink to excess have many health problems, and they are frequent users of the health care system.

OBJECTIVES

When the student has finished this module, she/she will be able to:

1. Identify the correct name of the intoxicating ingredient of alcoholic beverages.
2. Identify the correct definition of alcohol abuse.
3. Identify three signs and symptoms of mild to moderate alcohol intoxication.
4. Identify three signs and symptoms of severe alcohol intoxication.
5. Identify the three factors that are considered to be the causes of alcohol abuse.
6. Identify the definition of a single drink.
7. Identify three serious health problems cause by chronic alcohol abuse.
8. Identify a definition of delirium tremens.
9. Identify the number of daily drinks that is considered dangerous.
10. Identify three areas of concern to be aware of when caring for the intoxicated patient.

WHAT IS ALCOHOL AND WHAT DOES ALCOHOL DO TO THE BODY?

Ethanol is the correct name for the alcohol that we drink. Ethanol is made by fermenting sugars that are found in fruits and grains. Ethanol is found in alcoholic beverages, and in mouthwashes, hairsprays, perfumes, and some over-the-counter medications (Some cough and cold liquids have a high alcohol content). It is the most common and popular legal intoxicant.
Alcoholic beverages are consumed for their taste, but also because they alter consciousness. Intoxication with alcohol causes many different clinical effects. Mild to moderate alcohol intoxication may cause:

- Drowsiness
- Decreased inhibitions
- Slurred speech
- Lack of coordination
- Difficulty walking
- Difficulty concentrating
- Nausea
- Vomiting

In severe alcohol intoxication, when very large amounts of alcohol are ingested, or if smaller amounts are ingested very rapidly, alcohol can cause loss of bladder and/or bowel control, coma, low blood pressure, decreased heart rate, decreased and inefficient breathing, and even death.

The amount of alcohol influences the level of intoxication: the more someone drinks, the more intoxicated he/she will become. However, the amount of alcohol that is needed to cause intoxication varies greatly from person to person. Women tend to become intoxicated more easily than men, and people who drink a lot and drink regularly are more tolerant of alcohol.

There are other alcohols aside from ethanol. Isopropyl alcohol is also known as rubbing alcohol. It is more intoxicating than ethanol, but it is so bitter and nauseating that few people, no matter how determined, can drink enough to become drunk. Ethylene glycol is an alcohol that is used as antifreeze for automobiles. Methanol is as an alcohol that is used in automobile windshield washer fluids and automobile windshield deicers. These are both very, very toxic. Unfortunately, people with an alcohol abuse problem who cannot get ordinary beverage alcohol may drink these products. Even small amounts (several tablespoons) of ethylene glycol or methanol can kill an adult.

**Learning Break:** A patient who is intoxicated should always be asked if he/she was drinking anything that may contain isopropyl alcohol, ethylene glycol or methanol.

**ALCOHOL ABUSE: THE SCOPE OF THE PROBLEM**

It was mentioned in the introduction that between 12 and 14 million Americans abuse alcohol. This is only an estimate and it is probably far too low. However, those figures still represent approximately 5 percent of the population, and that means that 1 out of every 20 Americans has a drinking problem. That figure alone is disturbing, but there are other facts about this public health crisis that are even more frightening to contemplate:

- Twenty percent of all hospitalized patients have an alcohol problem.
- Alcohol abuse is the third leading cause of preventable death in the United States.
• Deaths related to alcohol abuse cost the health care system close to $200 billion a year.
• Alcohol abuse is one of the leading causes of such serious diseases as esophageal cancer, liver disease, pancreatitis, and gastrointestinal bleeding.
• Alcohol abuse is one of the leading causes of motor vehicle accidents, homicides, and suicides.
• Drinking while pregnant can cause fetal alcohol syndrome which can cause of mental retardation.

Add to these facts the economic burden caused by days missed at work, workplace accidents, decreased workplace productivity, the huge cost of caring for the health care problems caused by alcohol abuse, and the psychological and social fallout from problem drinking and it is easy to see that excessive drinking is a public health care crisis.

WHAT IS ALCOHOL ABUSE?

This may seem like a simple question, but experts have been debating for many years to try and find a precise definition of alcohol abuse. There is still no universal agreement on how to determine when someone can be labeled a problem drinker.

But many people who work in the field of alcohol abuse feel that trying to find a “one size fits all” definition that can tell us who is/is a chronic abuser of alcohol is pointless. Instead, they have focused on the impact of excessive drinking. Drinking, many experts believe, is a problem if it causes problems for the abuser, his/her family, or community.

The way to know if someone is abusing alcohol, they say, is to look at the effects of that person’s drinking habits. These experts also point out that it is not how much someone drinks, but the effects of a person’s drinking habits. Some people can drink relatively large amounts and would not fit a definition of a problem drinker, while others may drink far less and have an alcohol abuse problem.

There are many simple assessment tools that healthcare professionals use to determine if someone has a drinking problem. Several examples are:

• **CAGE:** Ask someone if their friends and/or family have ever asked them to Cut down on their drinking, if they have ever been Annoyed if someone asked hem abut their drinking, if they have ever felt Guilty about their drinking, and if they ever need an Eye-opener to start the day.

• **TWEAK:** Tolerance – how many drinks can you hold? Worried – are friends and family worried about your drinking? Eye openers – do you need a drinking the morning? Amnesia – have you said or done something while you were drinking and you can’t remember? K (cut down) – do you or your family ever feel you should cut down on your drinking?

• **MAST:** This is the Michigan Alcohol Screening Test. It is a 22 question exam, but it can also be shortened to these 2 questions, and still be an accurate screening tool: 1) have you ever had a drinking problem, and 2) Was your last drink within 24 hours?
**Learning Break:** Alcohol abuse will be defined here as a *chronic pattern of unhealthy or dangerous drinking.*

People with an alcohol abuse problem have a need to drink, and many of them eventually become physically and mentally addicted to alcohol. It is very, very difficult to stop drinking if the pattern of abuse has been going on for many years.

**HOW MUCH ALCOHOL IS TOO MUCH?**

How much alcohol is too much? When does moderate drinking become problem drinking and cause damage to the body? These are important questions, but there are no sure answers. One drink is usually defined as one 12 ounce can of beer, one 4-6 ounce glass of wine, or one drink containing 1.5 ounces of hard liquor. Many authorities feel that more than 4 drinks a day for men or women significantly increases the risk of alcohol damage to the body.

**Learning Break:** Moderate alcohol consumption may have health benefits. But *no one* knows exactly what those benefits are, exactly how much alcohol is safe, and exactly who can drink how much.

**WHY DO PEOPLE ABUSE ALCOHOL?**

The reasons for alcohol abuse are as varied as the numbers of individuals who have this problem. However, there are some theories that help explain some of the more common reason why people have alcohol problems.

- **Genetics:** There is very strong evidence that it is possible to inherit a tendency to abuse alcohol. However, despite years of searching, researchers have not found a gene responsible for alcoholism. Also, people do not abuse alcohol in isolation. People who have parents who abuse alcohol and go on to develop an alcohol abuse problem themselves may have learned their drinking habits and patterns. There are also many people who are the sons and daughter of alcoholic parents who do not develop alcohol dependency.

- **Environmental:** There is good evidence that drinking habits can be learned. In societies where alcohol is used regularly and in relatively large amounts, there are more people with alcohol abuse problems.

- **Psychiatric:** Psychiatric trauma, abuse, neglect, emotional stress, and serious life issues (loss of a spouse, developing a serious illness, loss of a job, etc.) can all contribute to the development of alcohol abuse. Psychiatric disorders such as depression, schizophrenia, and bi-polar disorder can also contribute.

More men abuse alcohol than women. People who start using alcohol at a young age are more likely to develop alcohol dependency. Younger people are more prone to abuse alcohol. Alcohol abuse affects every ethnic group and is found in every socio-economic class.
Learning Break: The exact cause of alcohol abuse is not known, but it is definitely a combination of genetic, environmental, and psychiatric factors.

WHAT DOES ALCOHOL DO TO THE BODY?

When someone drinks occasionally, he/she will have some degree of intoxication. If the alcohol is consumed slowly in small to moderate amounts, these effects will be mild or even absent. A glass or two of wine taken over the course of the evening is something many people enjoy and they will not show any signs or symptoms of intoxication. There is even some strong evidence that alcohol taken in moderation has some health benefits.

But there is also no doubt that when alcohol is ingested in large amounts, day after day, it causes terrible damage to the body.

- Liver damage: The liver is responsible for metabolizing alcohol. Chronic, excessive alcohol ingestion overwhelms the liver’s ability to do this. If alcohol cannot be metabolized, it causes serious damage to the liver. The liver is responsible for metabolizing drugs, making compounds that help the blood to clot, and if it is permanently damaged, this can cause death.
- Brain damage: Long-term alcohol abuse can cause a variety of neurological problems. Alcohol abuse is the second leading cause of dementia (permanent damage to the brain), and it can also cause other types of brain damage.
- Fetal alcohol syndrome is the number one cause of mental retardation associated with pregnancy.
- Cancer: People who abuse alcohol have a higher risk of developing esophageal cancer, breast cancer, cancer of the mouth, and liver cancer.
- Pancreatitis: Pancreatitis is a very serious inflammation of the pancreas. The pancreas is an organ that produces insulin, a hormone that is essential for controlling blood sugar.
- Cardiac problems: Many people who chronically abuse alcohol have high blood pressure and various forms of heart disease.
- Gastrointestinal bleeding.
- Anemia: Chronic alcohol abusers are often anemic.
- Malnutrition: Chronic alcohol abusers often have very poor nutrition.
- Reproductive disorders: Impotence in men and infertility in women.

ALCOHOL WITHDRAWAL: THE DTS

Many people who chronically drink large amounts of alcohol and become psychologically addicted to the drug (and alcohol is a drug), and they also become physically addicted to alcohol. If the problem drinker tries to stop drinking, or cannot obtain alcohol, he/she may develop the alcohol withdrawal syndrome. This is commonly known as the DTs. DT stands for delirium tremens: the patient is delirious and very shaky (tremens = trembling).

Delirium tremens is a very dangerous condition. People who are experiencing delirium tremens are often completely disoriented, they develop visual hallucinations, they
develop a fever, they have uncontrollable shaking, and their pulse and blood pressure can become dangerously high. In the worst cases, people can have seizures and die.

Delirium tremens is not the same as a hangover. Many people have experienced hangovers and it is a well known and not unusual effect caused by drinking too much alcohol. Shortly after stopping drinking, people will develop nausea, vomiting, stomach pain, and a headache. These signs and symptoms can last for many, many hours. A hangover can be a very miserable and uncomfortable experience, but it is not dangerous.

Learning Break: Delirium tremens is defined as the signs and symptoms caused by alcohol withdrawal.

CARING FOR THE PATIENT WHO IS ACUTE INFECTED

Caring for the patient with a history of alcohol abuse does not have to be difficult. The patient who is intoxicated at the time you are caring for him/her has some specific needs:

- Safety: The intoxicated patient is a risk to himself/herself and others. The patient’s coordination, judgment, ability to ambulate, and depth perception are impaired. Unfortunately, the intoxicated patient may not realize this or may deny the fact. You will have to make sure the environment is safe, and that the intoxicated patient does not attempt to do anything that requires complicated thinking or motor coordination.
- Emotional/psychological issues: Alcohol lowers inhibitions. The intoxicated patient may become very emotional, aggressive, and say or do inappropriate things. It is important to remember that the patient generally means no harm. Don’t react personally or emotionally yourself.
- Vital signs: Alcohol intoxication can lower the blood pressure, elevate the heart rate, and decrease the respiratory rate. These vial signs must be closely monitored.
- Aspiration: Alcohol intoxication often causes vomiting, and it also depresses the gag reflex. These patients are at risk for aspirating vomit into their lungs, and this can happen even when they are sleeping. If the intoxicated patient is sleeping, he/she should be positioned on the back or side. These patients should also be repositioned frequently to avoid pressure injuries.
- Low blood sugar: if an intoxicated patient is sleeping, he/she cannot eat and if that patient is not well nourished, the blood sugar stores can become exhausted. That can cause permanent neurological damage, but the intoxicated patient who is sleeping cannot notice the signs and symptoms. It is important to check these patients frequently. Make sure they respond normally to stimuli such as gentle shaking or calling their names.