

What's alcohol use disorder?

Alcohol use disorder (AUD) is a **medical condition** that can result from drinking. People with AUD usually have the following four traits:

- They cannot control their drinking.
- They continue to drink even though it harms them.
- They spend a lot of time drinking and recovering from drinking.
- They have powerful cravings to drink.

What is acute alcohol withdrawal?

Alcohol is a **depressant**, meaning that it slows down your central nervous system. If you drink a lot of alcohol every day for several weeks or more, your nervous system speeds up over time in order to resist the drowsiness that alcohol causes. This change is called **tolerance**, and it is what allows people who drink daily to function normally even after drinking amounts that would put someone else to sleep. When someone suddenly stops drinking, the nervous system is still sped up, and it takes several days to slow back down to its normal state. During this period, people experience **acute alcohol withdrawal**, which is caused by this hyper-active nervous system.



How do I know what kind of treatment I should get?

There is no one right treatment path for everyone. Before you decide, you should talk to your health care team about what your options are and what might work best for you. The thought of working with a health care team to come up with a treatment plan might be difficult or scary, but once you've started, you may feel more hopeful that things can change.

Accepting that you have AUD is an important first step toward getting better. Try to remember that recovery doesn't happen all at once, and that you don't have to do it all by yourself. Reaching out to supportive friends and family members might help you feel like you're not alone.

How can I learn more?

If you have any questions about alcohol withdrawal or AUD treatment, you should speak to your doctor, nurse, or counsellor. You can also find more information and resources on the META:PHI website.

www.metaphi.ca/patient-resources.html

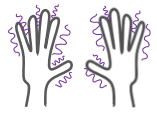
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MENTORING, EDUCATION, AND
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Acute Alcohol Withdrawal: The first step in treatment

When someone starts having problems in their life related to their drinking, it might indicate that they have developed an **alcohol use disorder**. However, it can be very difficult for people to change their drinking patterns. When people have been drinking heavily for a long time, they are in danger of going through **acute alcohol withdrawal** when they stop. People who have experienced withdrawal before know that it is extremely uncomfortable, and the thought of going through it can be very frightening.

This pamphlet contains information about what you can expect when you go through acute alcohol withdrawal, how you can manage it, and what to do next.

What are the symptoms?



Tremor when walking or reaching for something is the most common symptom of acute withdrawal. Other symptoms include **sweating**, **vomiting**, and **anxiety**. Symptoms of acute withdrawal begin as early as twelve hours after the last drink and they generally start to resolve by day three, but they can last up to seven days. How bad your symptoms are depends on several things, including how long you've been drinking and how much you usually drink in a day. You can expect withdrawal to feel similar to past instances of withdrawal, so if you have gone through it before, you'll have an idea of what to expect.

Is acute withdrawal dangerous?

Acute withdrawal can have **complications**, which are often dangerous. Some people experience seizures, irregular heart rhythms, or delirium tremens (severe delusions and hallucinations).



What should I do?

If you have at least five drinks daily and you find that you start drinking the same time every day because of anxiety, shakes, or sweating, you're probably going through withdrawal every day. You should talk to a health care provider so they can arrange a **planned withdrawal**.

Can't I do this on my own?

Acute alcohol withdrawal should be supervised by a medical professional. The most important reason is so that any complications that arise can be treated right away, but it's also so that they can manage your withdrawal symptoms to make the process easier. Because symptoms of acute alcohol withdrawal are very uncomfortable, people who try to withdraw on their own without support are at risk of drinking in order to relieve their symptoms. Withdrawing under medical supervision means that your discomfort will be managed and you won't have to drink to feel better.

What happens during a planned withdrawal?

Acute withdrawal is treated with a medication that helps the nervous system slow down to its usual rate. Most often, that medication is a **benzodiazepine**, a kind of sedative. Most benzodiazepines used to treat withdrawal are **long-acting**, meaning that they work in your system for a long time. By the time they leave your body, the nervous system should be close to its usual state.

People are usually told to have their last drink about twelve hours before coming in to have their withdrawal medically supervised – symptoms are usually starting to appear at that time. When you arrive, a doctor or nurse will

probably **assess your withdrawal** by asking you some questions about how you're feeling (for example, if you're nauseated, anxious, or headachy) and checking to see if you have a tremor. Once the doctor or nurse is sure that you're in withdrawal, they will start the medication. They will keep checking your level of withdrawal and giving you more medication every hour or two until you're feeling better and the risk of complications is low. You should be able to leave within three to six hours, and you may be given a few tablets to take with you in case your symptoms come back over the next couple of days.

What happens next?

After the acute withdrawal stage is over, most people experience **sub-acute withdrawal**, which can last for several weeks. During this period, you may struggle with **anxiety**, **fatigue**, **insomnia**, and **urges to drink** as the nervous system continues to readjust to the absence of alcohol. It's a good idea to have an **AUD treatment plan** in place, which could include **medication**, **counselling**, and/or a **mutual support group** like Alcoholics Anonymous, to help you get through this period.

