

Why is Once or Twice a Problem?

The cover question is used by NIDA and NIAAA to identify “at-risk” drinking, which is defined as:

- More than 3 standard drinks on any day or 7 per week (for women)
- More than 4 standard drinks on any day or 14 per week (for men).

At-risk drinking puts a person at risk for:

1. **Engaging in drinking behaviors** (see #4 inside).
2. **Causing Secondhand Drinking (SHD)**, which is a term to describe what happens to the person who is trying to make sense of or stay safe when confronted by the drinking behaviors (see #4 inside).
3. **Developing a more serious drinking problem**, such as alcohol abuse or alcoholism (see back panel).

Says Who?

- National Institute on Alcohol Abuse and Alcoholism (NIAAA)
- National Institute on Drug Abuse (NIDA)
- Substance Abuse and Mental Health Services Agency (SAMHSA)
- World Health Organization (WHO)

These are but a few of the national and international agencies and organizations conducting and/or reporting on the new breakthrough brain research as it relates to drinking alcohol. Much of the research is the result of two very important decades: the Decade of the Brain (1990s) and the Decade of Discovery (2000s). Much of it is the result of new imaging technologies (SPECT, fMRI, PET) that allow neuroscientists and medical professionals to study the live human brain in action, over time, and under the influence.

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Sharing the new brain research and science to provide better explanations on the effects of drinking alcohol.

CROSSING THE LINE FROM ALCOHOL USE TO ABUSE TO DEPENDENCE (ALCOHOLISM)

Most people think of drinking as “normal” or “alcoholic.” It’s actually a progression, and the progression starts when a person moves beyond low-risk drinking limits.

- **Alcohol Use** is known as low-risk drinking (see #3).
- **Alcohol Abuse** occurs as a result of the two most common at-risk drinking patterns: repeated binge drinking and routine heavy social drinking (see #4). Alcohol abuse causes chemical and structural changes in the brain and makes a person more vulnerable to the risk factors for developing the disease of alcoholism.
- **Alcohol Dependence** (alcoholism) is now understood to be a brain disease. It can successfully be treated, but drinking must be stopped entirely due to the functional changes that occur in the brain as a result of the disease.

New brain research shows a person can stop their progression at any time by returning to low-risk limits, stopping drinking if they find those too difficult to maintain, or seeking treatment if they have the brain disease of alcoholism.

ANONYMOUSLY ASSESS YOUR OR SOMEONE ELSE’S DRINKING

Visit NIAAA’s website, Rethinking Drinking, to assess a drinking pattern and find tips for cutting back:
www.rethinkingdrinking.niaaa.nih.gov

LEARN MORE

For more on the new brain research and information presented in this brochure, please visit www.BreakingTheCycles.com. This brochure was created as part of “The Science of Why” series by Lisa Frederiksen, founder of BreakingTheCycles.com. Lisa is a speaker, consultant and author of nine books, including *Crossing The Line From Alcohol Use to Abuse to Dependence* and *If You Loved Me, You’d Stop!* She can be reached at lisaf@BreakingTheCycles.com or

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What Might Your Answer Be?

How many times in the past year have you had:
4 or more drinks* on any DAY? (for women)
5 or more drinks* on any DAY? (for men)

*One drink is equal to 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of “hard liquor,” such as 80-proof vodka, gin, bourbon or scotch. All are equal to one standard drink.

To learn why an answer of "once or twice" (or more) is a problem, check **INSIDE!**

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7 Things To Know To Protect Yourself From At-Risk Drinking

1 Understand how alcohol enters and leaves the body. Alcohol enters the bloodstream through the walls of the small intestine. Because alcohol dissolves in water, the bloodstream carries it throughout the body (which is 60-70% water) where it is absorbed into body tissue high in water content, such as the brain. The liver metabolizes alcohol – meaning that's how it leaves the body – we can't vomit, sweat or urinate it out. That's because alcohol is not digested like other foods or liquids. It takes the liver about one hour (often up to two) to metabolize the alcohol in one standard drink. Four drinks will take four hours. There are many variables that influence how quickly alcohol is metabolized, including weight, gender, stress, medications, and stage of brain development.

2 Understand how alcohol affects the brain. The brain is mostly water and highly vascularized (meaning lots of blood vessels), and it controls everything we think, feel, say and do. When a person drinks more alcohol than their liver can metabolize, the excess alcohol stays in the bloodstream and suppresses certain brain functions, such as the ability to "think" straight and act normally. This is why a person can find him/herself engaging in the drinking behaviors listed in #4.

3 Stay within "low-risk" drinking limits (sometimes called social drinking or normal drinking or moderate drinking). These limits are defined as:

- No more than 3 standard drinks on any day or 7 per week (for women)
- No more than 4 standard drinks on any day or 14 per week (for men)
- One standard drink is equal to 12 ounces of beer, 5 ounces of wine, 1.5 ounces of "hard liquor," such as 80-proof vodka, bourbon or scotch, or 8-9 ounces of malt liquor (think ale or lager beers).

Staying within these limits is known as **alcohol use**. These low-risk limits are designed to:

- Allow a person's liver to keep up with metabolizing the alcohol in each standard drink so as not to compromise brain function.
- Stop a person from crossing the line to alcohol abuse, which is not alcoholism (see back panel).
- Protect a person's nutritional health. As a general rule of thumb, a standard drink contains about 100 calories and less than optimum nutrients, thus a person consuming three or four standard drinks a day is consuming 300-400 calories of questionable nutritional value.

4 Know the at-risk drinking patterns that can lead to alcohol abuse: routine binge drinking and repeated heavy social drinking. **Heavy social drinking** is defined as exceeding the average daily limit of 1 standard drink for women (which totals 7 per week) or 2 for men (which totals 14 per week). **Binge drinking** is defined as having 4 or more standard drinks on an occasion for women (which exceed the 3 in a day) and 5 or more for men (which exceeds the 4 in a day). Both can cause a person to engage in **drinking behaviors** – even if the drinking pattern occurs only once. These include:

- Fighting with friends or family about the drinking; saying or doing things you don't remember or regret.
- Experiencing blackouts – fragmentary or complete; vomiting; passing out.
- Driving while under the influence; riding in a car with someone who is.
- Having unplanned or unprotected sex.
- Being admitted to the emergency room with a high BAC.
- Doing poorly at work or school because of recovering from the drinking.

5 Know what a "standard drink" is. Many people are surprised to learn what counts as a drink, and it all depends on the alcohol concentration by volume (ABV) or "proof." A "standard" drink contains about 0.6 fluid ounces of "pure" alcohol. As a result, various standard drinks of various alcoholic beverages are different sizes, but each contains approximately the same amount of alcohol. A few standard drink measurements are listed in #3. It's a good idea to pour these amounts into common drink glasses to see what it looks like and make it easier to self-identify a standard drink.

6 Understand what's in that particular drink or drink container. Depending on the cocktail or mixed drink, you can have one, two or three standard drinks in the glass. Similarly, drink containers hold various numbers of standard drinks. A bottle of table wine, for example, contains five. A Margarita often contains two to three. To find out the number of standard drinks in a cocktail or container, type this shortened link into your browser <http://tiny.cc/af68dw>.

7 Understand that drinking is not just "normal" or "alcoholic." See back center panel, "Crossing The Line From Alcohol Use To Abuse To Dependence (Alcoholism)."



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