

Section 4

*G*eneral Information About  
Chemical Dependency

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*Learning is a treasure that will follow its owner  
everywhere.*

-Chinese Proverb

*Section Topics*

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**Section 4: General Information About Chemical  
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*The information in this book is provided for the sole purpose of informing the reader. The information provided in this book is not intended to be a substitute for a healthcare provider's consultaion. Please consult your own physician or appropriate healthcare provider about the applicability of any opinions or recommendations with respect to your own symptoms or medical conditions.*

## 1) What is a Dry Drunk?

Dear Dr. Steve:

I will readily admit that my drinking was a problem. It'd gotten to the point where my wife gave me an ultimatum—either the booze goes or she and the kids go. But unlike many other weak-minded individuals, I stopped drinking without going to rehab or A.A. Yet that doesn't seem to be enough for my wife. Her friends at her Al-Anon meetings are filling her head with more ideas about how I should be living my life. They say that though I've stopped drinking, I'm a dry drunk. What more do they want, a pound of my flesh?

*This is one* of those good news-bad news stories. First, you are to be congratulated for taking a serious look at your drinking and doing something about it. To quit drinking is hard enough. To quit without the help and support of other people is exponentially more difficult. In choosing abstinence over drinking, you've given your family and yourself an incredible gift.

The bad news is, even though you may abstain from drinking and drugging, you may still act and think like an active alcoholic—thus the phrase “dry drunk.” You have dealt with the physical aspect of alcohol abuse—namely, removed the alcohol from your body—but you may still need to deal with the mind and soul aspects, namely your attitudes, beliefs, and spirituality. For instance:

- 1) You may have stopped drinking, but resent your wife for forcing you to stop.

- 2) You may have stopped drinking, but resent others who are able to drink.
- 3) You may have stopped drinking, but never dealt with the emotional impact of being without your old friend, alcohol.
- 4) You may have stopped drinking but still treat your wife and kids as you did when you were drinking.
- 5) You may have stopped drinking, but remain secretive and deceitful.
- 6) You may have stopped drinking, but the toxic influences of grandiosity and shame may still infect your relationships.
- 7) You may have stopped drinking, but your judgmentalness and pride still make your wife and children feel slighted and insignificant.
- 8) You may have stopped drinking, but remain willful and self-centered.
- 9) You may have stopped drinking, but the idea of powerlessness and unmanageability remain foreign concepts to you.
- 10) You may have stopped drinking, but still reject the need for making room in your life for a relationship with a Higher Power.

The list can go on and on, but the point I want to make is that you can be abstinent and still be a son of a gun to live with. That's because abstinence detoxifies the body, but Recovery detoxifies not only the body but the mind and soul as well.

I know you would much rather be appreciated for what you have accomplished rather than experience the disapproval of others for who and what you still may not be. Just as the choice to quit drinking was solely yours,

how you go through life without alcohol will also be yours. For the emotional and spiritual well-being of your family as well as yourself, Recovery is an alternative to the thinking and behaviors of a person who abuses alcohol.

Give some consideration to the following steps. Whatever you decide, please feel good about what you've accomplished with abstinence. At the same time, know that life can become even better for you!

### Pathfinder's Checklist

- 1) Visit [www.AliveAndWellNews.com](http://www.AliveAndWellNews.com) for more information about chemical dependency and emotional and spiritual development.
- 2) Read Dr. Steve Frisch's, Psy.D. series of Recovery books. These books focus on chemical dependency, how to raise alcohol and other drugs free children, and Recovery for both the chemically dependent individual and their friends and family members. This information is available at [www.AliveAndWellNews.com](http://www.AliveAndWellNews.com).
- 3) Read a book about Recovery.
- 4) Attend an A.A. meeting.
- 5) Talk to an old-timer at a meeting about your fears and concerns about Recovery.
- 6) Go to at least five more meetings.
- 7) Learn the first three steps of the Twelve Step Program.
- 8) Talk to other people at the meetings about your fears and concerns about Recovery.

G.B.U.  
Steve

### 2) What is an Alcohol Blackout?

Dear Dr. Steve:

I am scared to death for my husband. His drinking is out of control. But even more frightening is that he increasingly is unable to remember what's occurred while he's been drinking. At first I just figured he was lying to me, trying to cover up something. Last month, a friend told me my husband had been at a bar the night before and had made an ass of himself. When I asked my husband about it, he denied having been at the bar at all. A few weeks later, a friend of my husband called to see if he was okay. It seems that my husband was driving the night before and drove his car off the road and into a fence. Again, when I asked him about the accident he denied knowing anything about it. Sure enough we went out and looked at the car and the front end had been damaged, but he had no idea how it happened. But what has me most upset is that last week, he called from work to tell me he would be home in 20 minutes. I heard from him two days later. He called from a hotel in Atlanta, which is about 750 miles from where we live. He said he had no idea how he got there or how long he'd been there. What is going on? I don't know what to believe any more.

*It's possible that your husband is lying to you, but let me suggest an alternative explanation. Your husband*

may be experiencing a phenomena known as alcohol blackouts. Let me first explain what an alcohol blackout *is not* before I explain to you what an alcohol blackout is. It is common to mistakenly associate the word *blackout* with *passout* and therefore assume that an alcohol blackout occurs when an individual drinks too much, passes out, and remains unconscious. But that's not the case.

In fact, quite the opposite of passing out and remaining unconscious for a period of time occurs. During an alcohol blackout an individual is awake and alert and able to perform complex motor skills. Although the individual is 100% functional during an alcohol blackout, they're unable to form or store new memories. Because the individual does not create and/or store memories during this time, they're unable to remember anything that occurs.

That explains how your husband could drive to Atlanta and get a hotel room, crash his car into a fence, or go to a bar and make an ass out of himself without remembering anything about those events. As witnessed by his unscheduled trip to Atlanta, blackouts can go on for days without the individual recalling anything.

What causes blackouts? That's much harder to say than whether or not they occur. The blood alcohol concentration level at which blackouts may occur varies from person to person. Variables such as existing brain damage or levels of tolerance may influence at what level of blood alcohol concentration blackouts occur. Though blackouts are usually associated with large quantities of alcohol consumed, there's some evidence to suggest that blackouts are related more to how fast the blood alcohol concentration rises and falls than to how high the blood alcohol concentration rises. Indeed, sometimes a blackout may

follow consumption of quite small amounts of alcohol.

The fact that your husband may be experiencing blackouts is significant for the following reason. In general, blackouts occur relatively late in the course of alcoholism. Blackouts are directly correlated with the severity and duration of the illness. It is critical that your husband be examined by a qualified healthcare provider to evaluate to what extent he may be suffering from the disease of alcoholism. Once an evaluation has been made, you will have a better picture of his physical condition as well as the extent to which he may have a problem with alcoholism. Once those factors have been determined, a qualified healthcare provider can make the appropriate recommendations to treat your husband's condition(s).

## Pathfinder's Checklist

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- 3) Alcohol blackout does not mean that a person passes out and remains unconscious for a period of time.
- 4) Alcohol blackout is a phenomena in which an individual does not create and/or store memories

when they're in an alcohol blackout and thus are unable to remember what they did or said during the period in which they were in an alcohol blackout.

- 5) Alcohol blackouts occur at an advanced stage of the progression of the disease of alcoholism.
- 6) A person who experiences an alcohol blackout should take the matter seriously and immediately seek an evaluation by a qualified healthcare provider.

G.B.U.

*Steve*

### 3) What is Cross Addiction?

*D*ear Dr. Steve:

My daughter has been home from rehab for about six months. We have received the miracle that my husband and I have been praying for these last ten years—she's quit drinking. But in the last few weeks I've noticed something that concerns me greatly. She's started smoking marijuana. I mean really smoking it—not just when she's out with friends, not just once and a while to relieve the stress of a hard day at work, but every day, every night. At first we thought she was just acting strange. But now we can smell it on her clothes and in her room, we can see it in her eyes, she leaves her smoking paraphernalia out on her desk in plain sight. It's like

she's drinking again but I know she's not. When I confront her about her marijuana use she tells me I'm overreacting. She says marijuana isn't addictive, that she doesn't have a problem with it the way she did with alcohol and that she has no problem controlling her use of it. Should I be concerned?

*In a word*, yes! Let me explain why. There is a phenomena known as cross-addiction. What that means is if an individual becomes alcohol and/or drug dependent on one mood altering substance, then they will become alcohol and/or drug dependent on all mood-altering substances, whether or not they have ever previously used a specific drug or alcohol other than their original drug(s) of choice. I'm going to make the assumption for the sake of our discussion here that your daughter was diagnosed as being alcohol dependent and is suffering from the disease of chemical dependency. To further our discussion let me say that chemical dependency is a disease characterized, in part, by the following four symptoms:

- 1) Craving—A strong need or compulsion to ingest a mood altering substance
- 2) Impaired control—The inability to limit one's ingestion of a mood altering substance on any given occasion
- 3) Physical dependence—Withdrawal symptoms, such as nausea, sweating, shakiness, and anxiety, when their drug(s) of choice are stopped after a period of heavy using
- 4) Tolerance—The need for increasing amounts of one's drug of choice in order to feel its effects

When I say that chemical dependency is a disease, I mean that it is a primary, progressive, chronic, relapsing, and potentially fatal disease of the mind, body, and soul.

When I say that chemical dependency is a primary disease, I mean that it is not caused by any other disease, condition, deficiency of character, lack of willpower and/or self-control, type of personality, and/or moral weakness—it is a disease in and of itself.

When I say that chemical dependency is a progressive disease, I mean that it gets worse over time if untreated and unmanaged. Even if an individual maintains long-term abstinence from their drug of choice, because chemical dependency is a progressive disease, if an individual were to relapse, they would quickly start consuming their drug(s) of choice as if they had been drinking and drugging all along.

When I say that chemical dependency is a chronic disease, I mean that it is long-term by nature. Once an individual is chemically dependent, that individual will always be chemically dependent—it never goes away.

When I say that chemical dependency is a relapsing disease, I mean that this disease is characterized by a vulnerability to relapse. Because it is chronic in nature, no matter the period of time that the disease of chemical dependency is treated and managed, the chemically dependent individual will always be vulnerable to relapse—returning to drinking and drugging in an excessive out of control manner.

When I say that chemical dependency is a fatal disease, I mean that it can be and often is deadly. Chemical dependency can cause death by damaging one's vital organs such as heart, kidneys, and liver. Chemical depen-

ency can also be fatal when associated with overdose, suicide, and accidental deaths.

The simple truth is that your daughter is acting out of either ignorance or denial. To manage the disease of chemical dependency, one must remain totally abstinent from all mood-altering substances for the rest of their life. To understand why this is necessary, one only need examine the definition of the disease of chemical dependency.

Because the disease is primary, by definition, it has symptoms, one of which is impaired control of one's use of alcohol and other drugs. As such one can no better control their use of one drug better than their use of another drug—their impairment exists across the whole spectrum of mood altering substances.

Because the disease is chronic, it never goes away and so to switch from one mood altering substance to another is merely being active in one's disease with a different mood altering substance than the original drug of choice.

Because the disease is progressive, one's use of a substance other than their original drug of choice will escalate over a short period of time as you are witnessing with your daughter and her dependence on a substance other than her drug of choice will eventually develop.

Because the disease is prone to relapse, switching from one mood-altering substance to another is merely a relapse, no matter how one might explain it differently.

Because the disease is potentially fatal, your daughter is at risk as long as she is active in her disease by using any mood altering substance.

So what to do about your daughter's relapse? If she is to continue to live in your house, set some bottom lines as to what you and your husband consider to be appro-

priate and inappropriate behavior. Just remember, the disease of chemical dependency is cunning and baffling. If something doesn't sound right, it probably isn't. Continue to seek clarification of any questions that you might have by contacting a qualified healthcare provider.

## Pathfinder's Checklist

- 1) Visit [www.AliveAndWellNews.com](http://www.AliveAndWellNews.com) for more information about chemical dependency and emotional and spiritual development.
- 2) Read Dr. Steve Frisch's, Psy.D. series of Recovery books. These books focus on chemical dependency, how to raise alcohol and other drugs free children, and Recovery for both the chemically dependent individual and their friends and family members. This information is available at [www.AliveAndWellNews.com](http://www.AliveAndWellNews.com).
- 3) Don't blame yourselves or be easily deceived—this is relapse pure and simple and relapse is part of the disease of chemical dependency.
- 4) Share the information that I have provided to you about cross-addiction with your daughter.
- 5) Encourage your daughter to contact the rehab program that she attended.
- 6) Your husband and you should clarify to yourselves and your daughter what your bottom line behaviors are that you expect from your daughter if she is to continue living in your house, i.e. no drinking, no drugging, pay rent, attend aftercare group at her rehab center, attend Twelve Step meetings.
- 7) Identify consequences to your daughter if she vio-

lates the agreed upon bottom lines that you and your husband have established.

- 8) Follow-up on violations of agreed upon bottom lines with consistent application of agreed upon consequences.
- 9) Attend Al-Anon meetings to help you to better detach from your daughter's choices.

G.B.U.  
Steve

## 4) What is Alcohol Poisoning?

Dear Dr. Steve:

A friend of mine died recently. He and a few buddies went to our usual stomping grounds after our weekly softball game and had a contest to see who could drink the most shots in 2 hours. He drank 24 shots. We found him passed out in the bathroom. When we couldn't wake him, we called the paramedics. He was pronounced dead in the emergency room. The doctor said his blood alcohol content was .44 and that he'd died of alcohol poisoning. What is alcohol poisoning? I always figured if I drank too much, I would just pass out and sleep it off.

*Like any drug,* alcohol can be toxic to those who abuse it or consume more than their bodies can safely handle. Alcohol poisoning can occur when large amounts are consumed in a short period of time. There are a number of variables that influence how much alcohol in what

period of time can cause alcohol poisoning. Those variables are the size and weight of a person, the tolerance they have developed for alcohol, how quickly they consume their drinks, the type of alcohol they consume, the individual's level of stress and fatigue, and how much and when, if any, the individual has eaten prior to drinking.

Once a person's level of consumption of alcohol exceeds their body's ability to ingest such a level, that individual will pass out. This can be exceedingly dangerous because excessive amounts of alcohol in an individual's blood system can interfere with the brain's ability to regulate breathing. People who experience alcohol poisoning are vulnerable to slipping into a coma, choking to death on food or vomit, or suffocating by experiencing respiratory arrest. Alcohol poisoning should be taken seriously and treated like any other medical emergency.

So how can you tell if someone is suffering from alcohol poisoning? How can you differentiate between someone who has just had a little too much to drink and someone who's suffering from alcohol poisoning? What if you are unsure whether someone has had a little too much to drink or actually is suffering from alcohol poisoning? Look for the following symptoms of an alcohol overdose:

- 1) Does not respond to being talked to or shouted at
- 2) Does not respond to being pinched or prodded
- 3) Cannot stand up
- 4) Will not wake up
- 5) Slow, labored or abnormal breathing fewer than eight breaths per minute, or 10 seconds or more between breaths
- 6) Cold, clammy, pale, bluish or purplish skin color
- 7) Rapid pulse rate
- 8) Irregular heart rhythm

- 9) Lowered blood pressure
- 10) Vomiting while awake or asleep
- 11) Semi-consciousness or unconsciousness

Passing out from drinking should be treated as a medical emergency. If you can't awaken or get a response from a person who has passed out from drinking, call for medical assistance immediately.

Do not leave the person alone while you await medical assistance. If the person vomits while passed out, turn them onto their side. Pay close attention to their breathing. If they stop, apply mouth-to-mouth resuscitation.

The only way to avoid alcohol poisoning is to control your drinking. Know your limits. Pace how much alcohol you consume over the course of an evening or event.

## Pathfinder's Checklist

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G.B.U.  
Steve

## 5) What Does Hitting Bottom Mean?

*D*ear Dr. Steve:

My friend has tried to convince me that my son has a drug problem. She goes to Al-Anon meetings so I trust that she knows what she's talking about. But she isn't much help beyond telling me he has a problem. When I ask her what I should do, she shakes her head and says, "There's nothing you can do. *He* has to want to change and until he hits bottom, all you can do is stand by and watch." Do you have any suggestions?

*For those who* have a problem with alcohol and other drugs, it seems there is little you can do because things must get worse before they get better. That is what your friend meant when she said your son must hit bottom. Until the pain from the consequences of his using becomes unbearable, he is likely to continue to drink and drug.

Your son will continue to use right now because his decision to continue drinking and drugging is being fortified by his denial system. He has different ways of explaining away any problems he may be experiencing as a result of his alcohol and other drugs consumption. He can blame others. He can make up excuses. He can minimize the severity of his use and his problems.

But the one thing we can say for sure is, if your son does have a problem with alcohol and other drugs, it will get progressively worse rather than level off and/or get better without any intervention. That's the nature of the

disease of chemical dependency. It's chronic and progressive.

So what is your son's bottom? It varies from person to person. Some people go on for years denying their downward spiral into physical, behavioral, interpersonal, emotional, psychological, financial, and spiritual decline. But rest assured, your son does have a bottom to hit and when he does, then he might be more responsive to the wake-up that hitting bottom can be.

Until then, the best thing you can do is take care of yourself. Go with your friend to an Al-Anon meeting. Learn from others how best to cope with the helplessness and powerlessness you're experiencing. Learn about the disease of chemical dependency and how family members are affected. The more you learn today, the better able you will be there for your son when he hits bottom and truly needs you!

## Pathfinder's Checklist

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- 3) For a person with an alcohol and other drugs problem, things have to get worse before they get

better.

- 4) Hitting bottom is the expression used to identify the point in time when the consequences of one's using overwhelms the user's denial system to the point that the user can admit their powerlessness and the unmanageability of what their life has become.
- 5) Friends and loved ones must get support for what they're going through. It is critical that friends and loved ones learn to cope with their feelings of helplessness and powerlessness.
- 6) Friends and loved ones need to learn as much as they can about the disease of chemical dependency so that they can most effectively help their loved one who is using.

G.B.U.

*Steve*

## **HOW TO CONTACT DR. FRISCH, PSY.D.**

Dr. Frisch, Psy.D. is a clinical psychologist in private practice in Chicago, Illinois. He has offices in Lincoln Park and Northfield, Illinois. The psychological services that he provides include:

- Individual psychotherapy
- Experiential group psychotherapy
- Marital psychotherapy
- Family psychotherapy
- Recovery counseling
- Relapse Prevention counseling

You can contact Dr. Frisch, Psy.D. at:

- Lincoln Park (847) 604-3290
- Northfield (847) 604-3290
- E-mail Dr. Frisch, Psy.D. at:  
DrSteve@AliveAndWellNews.com

## Recovery-based Resources

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### **Adult Children of Alcoholics**

For adults who grew up in a family that was adversely affected by chemical abuse and chemical dependency.

(ACA/ACoA).

P.O. Box 3216, Torrance, CA 90510

310-534-1815

[www.recovery.org/acoa/acoa.html](http://www.recovery.org/acoa/acoa.html)

### **Al-Anon/Alateen**

For friends and family members of chemically dependent individuals.

Al-Anon Family Group Headquarters, Inc.

1600 Corporate Landing Parkway

Virginia Beach, VA. 23454-5617

For meeting information in the U.S. and Canada, call  
1-888-4AL-ANON

For meeting information, call 1-888-425-2666

Monday-Friday, 8 a.m. to 6 p.m. ET except holidays

[www.al-anon-alateen.org](http://www.al-anon-alateen.org)

### **Alcoholics Anonymous**

Alcoholics Anonymous/World Services, Inc.

Grand Central Station

P.O. Box 459, New York, NY 10163

212-870-3400 (Literature)

212-647-1680 (Meeting Referral)

[www.alcoholics-anonymous.org/index.html](http://www.alcoholics-anonymous.org/index.html)

### **Cocaine Anonymous**

3740 Overland Ave. Ste. C, Los Angeles, CA 90034

310-559-5833

1-800-347-8998

[www.ca.org/](http://www.ca.org/)

### **Marijuana Anonymous**

World Services

P.O. Box 2912, Van Nuys, CA 91404

1-800-766-6779

[www.marijuana-anonymous.org/](http://www.marijuana-anonymous.org/)

### **Nar-Anon Family Group Headquarters, Inc.**

Nar-Anon is a family support group.

P.O. Box 2562, Palos Verdes Peninsula, CA 90274

310-547-5800

[www.naranon.com/](http://www.naranon.com/)

### **Narcotics Anonymous**

World Service Office in Los Angeles

P.O. Box 9999, Van Nuys, California 91409 USA

Telephone (818) 773-9999

Fax (818) 700-0700

[www.na.org](http://www.na.org)