

Alcohol use disorder: an emerging lifestyle disorder

C.P. Sharma, Deeksha, Arun Kumar

Abstract: Increasing alcohol intake in young people is gradually becoming a part of modern lifestyle. Alcohol use is widely prevalent in Indian society and consequently results in widespread losses. Problem drinking that becomes severe is given the medical diagnosis of "alcohol use disorder" or AUD. Homoeopathic literature is equipped with a large number of medicines for management of Alcohol use disorder. This article deals with Homoeopathic approach to management of this disorder.

Keywords: AUD, alcohol use disorder, lifestyle disorder, homoeopathy.

Abbreviations: AUD – alcohol use disorder, AUDIT- AUDs identification test, DALY - disability-adjusted life years, WHO – World Health Organization, HIV – human immunodeficiency virus, AIDS – acquired immunodeficiency syndrome, DSM - Diagnostic and Statistical Manual of Mental Disorders, CAGE – cut-annoyed-guilty-eye.

Introduction

Drinking alcohol to relax or socialise can be a part of healthy lifestyle if consumed in moderation with a good diet and exercise regime. Increasing alcohol intake in young people is gradually becoming a part of modern lifestyle.

Lifestyle diseases are those diseases whose occurrence is primarily based on the daily habits of people and are the result of an inappropriate relationship of people with their environment.¹

The most commonly used alcoholic beverages have different concentration of ethyl alcohol in them like beer, wine, whiskey, rum, vodka, gin, brandy and locally brewed beverages like arrack and toddy.² Problem drinking that becomes severe is given the medical diagnosis of "alcohol use disorder" or AUD. AUD is a chronic relapsing brain disorder characterised by an impaired ability to stop or control alcohol use despite adverse social, occupational, or health consequences.³

Alcohol use is widely prevalent in Indian society and consequently results in widespread losses in the form of injurious physical health

outcomes like cirrhosis of liver, heart disease, diabetes and various other lifestyle disorders as well as leads to absenteeism, road traffic accidents and various mental health and behavioral problems.⁴

Epidemiology

According to a report by the WHO, the consumption of alcohol has more than doubled in India from 2.4 litres in 2005 to 5.7 litres in 2016 with 4.2 litres being consumed by men and 1.5 litre by women. In 2016, the harmful use of alcohol resulted in some 3 million deaths (5.3 per cent of all deaths) worldwide and 132.6 million disability-adjusted life years (DALYs). Mortality resulting from alcohol consumption is higher than that caused by diseases such as tuberculosis, HIV/AIDS and diabetes.⁵

Despite their high prevalence, alcohol use disorders are undertreated partly because of the high stigma associated with them, but also because of insufficient systematic screening in primary health care.⁶

Alcohol is one of the leading causes of death and disability globally and the same is true for our country India. Prevalence of alcohol

use in India is reported to be 21.4% and there is increasing alcohol intake among the young people. Moreover, 4.5% males and 0.6% females in age-group of 15 years and above are suffering from alcohol use disorders and 3.8% of males and 0.4% of females are suffering from alcohol dependence. The alcohol-related problems account for more than a fifth of hospital admissions; 18% of psychiatric emergencies; more than 20% of all brain injuries and 60% of all injuries reporting to India's emergency rooms. The harmful use of alcohol is a causal factor in more than 200 diseases and injury conditions, the report stated.⁷

Diagnosis and assessment

For screening to identify at-risk individuals and diagnose AUDs, the AUDs Identification Test (AUDIT), for use in a primary care setting, is a validated screening tool, as recommended by the WHO.⁸ Whereas, the CAGE questionnaire, the name of which is acronym of its four questions, is a widely used screening test for problem drinking and potential alcohol problems.⁹ Under DSM-5, the current version of the Diagnostic and Statistical Manual of Mental

Disorders (DSM), anyone meeting any two of the 11 criteria during the same 12-month period receives a diagnosis of AUD. The severity of AUD—mild, moderate, or severe—is based on the number of criteria met.³

Standard management

Primary care management of alcohol-related problems include three core steps, namely, counselling the patient on the ill-effects of alcohol and, if necessary, prescribing medications like disulfiram and connecting with the patients by organising treatment programs and forming support groups.¹⁰

Homoeopathic approach in AUD

Homoeopathy as a system of medicine without any side effects can be used to treat various aspects of AUD. While taking the history of the patient, alcoholic history should be carefully attended. If patient is diagnosed to be suffering from AUD, homoeopathic approach can be adopted to treat the patient and break his habit. Homoeopathy can help in managing acute symptoms, de-addiction and withdrawal symptoms. Individualized homoeopathic medicine can be selected as per the totality of symptoms. AUD predominantly belongs to syphilitic miasm.¹¹ Few specific medicines are available in homoeopathic literature for de-addiction and managing acute and withdrawal symptoms.

Homoeopathic literature is equipped with a large number of medicines for management of alcohol use disorder. While using repertorial approach, certain specific rubrics which can be referred to for removing tendency to alcoholism and for bad effects developing

from alcohol abuse are mentioned below.

Rubrics related to tendency to alcoholism:¹²

Mind- alcoholism- to remove the habit of drinking; to

Mind- alcoholism- withdrawal from; to support the

Generals- family history- of alcoholism

Rubrics for bad effects of alcoholism:¹²

Mind- alcoholism- ailments from

Mind- delirium tremens- small quantities of alcoholic stimulants from

General- convulsions- alcoholic drinks after

General- dropsy- general in; alcoholism from

General- inflammation- nerves-alcohol from

General- locomotor ataxia-alcoholism from

Generals- paralysis- alcohol; after abuse of

Generals- paralysis agitans- alcohol; after abuse of

Generals- trembling- externally-alcoholism from

Generals- twitching- alcoholism in

Generals- varicose veins- alcoholism from

General- weakness- alcoholism, in

Generals- weariness- alcoholic drinks, from

Homoeopathic therapeutics for alcoholism:^{13,14,15}

Veratrum album - It is often used to remove bad effects of excessive use of alcohol and tobacco.

Asarum europaeum - It was a popular remedy in Russia for drunkards. Whenever, unconquerable longing for alcohol is present.

Calcarea arsenicoso - Suited to complaints of drunkards, after abstaining from alcohol; when craving for alcohol is still present (*Asarum europaeum*, *Sulphuricum acidum*).

Coca - These patients have longing for accustomed stimulants especially alcoholic liquors and tobacco.

Lachesis mutus - Especially suited to drunkards with congestive headaches and haemorrhoids or prone to develop erysipelas or apoplexy. They have craving for alcohol and are talkative before and during drinking. These people are ill-natured, vindictive, jealous, envious. They can be inclined to violent crimes like to kill others but not himself.

Ledum palustre - Useful in constitutions abused by alcohol (*Colchicum autumnale*).

Mezereum - Indicated for bad effects of mercury or alcohol.

Sulphuricum acidum - It is the head remedy for chronic alcoholism. There is craving for alcohol with internal trembling in drunkards, when there is sensation of trembling all over, without real trembling. Patient crave brandy but develop ailments from brandy-drinking. They cannot tolerate even the slightest amount of food or drink especially water, unless mixed with whisky. Patient appears to be pale, shrivelled and cold. Dr Hering suggests "sulphuric acid, one part, with three parts of alcohol, 10 to 15 drops, three times daily for three or four weeks, has been successfully used to subdue the craving for liquor".

SUBJECTIVE

Syphilinum - Indicated when patients crave alcohol, in any form and a hereditary tendency to alcoholism is found.

Quercus glandibus - It is known to antidote effects of alcohol. It can takes away craving for alcoholics when taken in dose of ten drops in a teaspoonful of the distilled spirit three to four times a day, for several months. Dropsy and liver affections are usually found.

Strophanthus hispidus - It produces special disgust for alcohol with nausea and so helps in treatment of dipsomania. Seven drops of tincture is advised to subdue the craving.

Angelica atropurpura - It's tincture is known to produces disgust for liquor in dosage of five drops, three times daily,

Strychninum nitricum - In 2x and 3x trituration, it is said to remove craving for alcohol when used for two weeks.

Ranunculus bulbosus - Useful in recovering from bad effects of alcohol, also in manial attacks of drunkards. It's mother tincture in dose of ten to thirty drops is useful in delirium tremens. It is generally used in third to thirtieth potency.

Coffea cruda: Headache due to alcoholism, with sensation as if nails were driven into head. It is worse in open air. Complaints with sleeplessness, convulsions and liveliness.

Antimonium crudum: Useful in nausea persisting for a long time after drinks.

Cantharis vesicatoria: In delirium tremens, patient attempts to bite. This is usually accompanied by urinary complaints and sexual excitement.

Avena sativa: This drug is known to take away the longing for alcohol when nervousness and sleeplessness are present.

Nux vomica: *Nux vomica* is chiefly useful in nervousness produced by drinking wine or liquor. Patient is so nervous that it gets frightened from the little noise and springs up at night with dreadful visions. Gastric troubles, giddiness, restlessness and many other complaints developing from bad effects of liquor are antidoted by *Nux vomica*. Mental symptoms like tendency to jealousy and envy or to suicide by shooting or stabbing are also guiding.

Cannabis indica: It is indicated when alcoholism produces violence and talkativeness in the patient. Delusions and hallucinations are very particular, relating to exaggeration of time, space, etc. Face is usually flushed with dilated pupils and perspires easily.

Opium: For delirium tremors which trouble the patient over and over again, especially in old sinners. They get drunk even after taking mild wines. More useful in brandy drinkers. Face is dark red with expression of fright or terror. Breathing is strenuous with visions of animals and ghosts with uneasy sleep.

Stramonium: It is suitable for habitual drunkards with bright red face. Patient has hallucinations and illusion that are frightful and terrifying. He has vision of animals coming at him from every corner from which he tries to escape.

Petroleum: This medicine is suitable to drunkards who lack energy and don't have strength of will, so weak that they are unable to refuse a glass of wine. There is vomiting after the least excess in drinks. They talk a lot when drunk.

Arsenicum album: It is also a head remedy and should be tried at first when there is a thirst for drinking alcohol in the patient. There is an inclination to vomiting and still more to diarrhoea. Drunkards present with trembling of limbs.

China officinalis: This medicine can be given to drunkards who wish to reform in doses of ten to thirty drops twice daily to remove the craving for alcohol in them.

Discussion and conclusion

Homoeopathy is effective in alcohol use disorder like many other disorders but lacks scientific evidences for proving its efficiency. For development of homoeopathy as first line treatment or an adjuvant to conventional therapies, it needs scientific researches and their evidences to be recorded in different studies, which is usually neglected. There are a few researches which have been conducted in alcohol use disorder.

In a study by Gopinadhan and Balachandra, homoeopathic medicine *Arsenicum album* was shown to develop aversion to alcoholic drinks in alcohol dependents.¹⁶

In another study, it was observed that homoeopathy can be a valid and effective treatment method to help the patients to break the cycle of dependence on alcohol and also to improve alcohol-related problems like sleep disturbances.¹⁷

A study also showed that homoeopathic medicines can manage the withdrawal symptoms of drug dependents and can also reduce the problem of chemical dependency.¹⁸

Although these researches provided evidence in favour of

homoeopathy but a few more researches with larger sample size, different research design and in comparison with control group can be conducted to determine the role of Homoeopathy in treatment of alcohol use disorder with evidence.

References

1. Sharma M, Majumdar P. Occupational lifestyle diseases: An emerging issue. Indian Journal of Occupational and Environmental Medicine [Internet]. 2009 [cited 14 August 2020];13(3):109. Available from: <https://pubmed.ncbi.nlm.nih.gov/20442827/>
2. World Health Organization (WHO) Global Status Report on Alcohol and Health. 2014. [Last accessed on 2017 Jan 18. Last accessed on 2018 Jul 01]. Available from: http://www.who.int/substance_abuse/publications/global_alcohol_report/msb_gsr_2014_1.pdf?ua=1.
3. Alcohol Use Disorder [Internet]. National Institute on Alcohol Abuse and Alcoholism (NIAAA). 2020 [cited 14 August 2020]. Available from: <https://www.niaaa.nih.gov/alcohol-health/overview-alcohol-consumption/alcohol-use-disorders>.
4. Alcohol Use Disorder [Internet]. Nhp.gov.in. 2020 [cited 14 August 2020]. Available from: <https://www.nhp.gov.in/healthlyliving/alcohol-use-disorder>
5. Per capita alcohol consumption more than doubled in India from 2005 to 2016 [Internet]. The Economic Times. 2018 [cited 14 August 2020]. Available from: <https://economictimes.indiatimes.com/news/politics-and-nation/per-capita-alcohol-consumption-more-than-doubled-in-india-from-2005-to-2016/articleshow/65911249.cms>
6. Brienza R, Stein M. Alcohol Use Disorders in Primary Care. Do Gender-specific Differences Exist?. Journal of General Internal Medicine [Internet]. 2002 [cited 14 August 2020];17(5):387-397. Available from: <https://onlinelibrary.wiley.com/doi/10.1046/j.1525-1497.2002.10617.x>
7. Eashwar V, Umadevi R, Gopalakrishnan S. Alcohol consumption in India- An epidemiological review. Journal of Family Medicine and Primary Care [Internet]. 2020 [cited 14 August 2020];9(1):49. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7014857/>
8. Reinert D, Allen J. The Alcohol Use Disorders Identification Test (AUDIT): A Review of Recent Research. Alcoholism: Clinical and Experimental Research [Internet]. 2002 [cited 14 August 2020];26(2):272-279. Available from: <https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1530-0277.2002.tb02534.x>
9. O'Brien C. The CAGE Questionnaire for Detection of Alcoholism. JAMA [Internet]. 2008 [cited 14 August 2020];300(17):2054. Available from: <https://jamanetwork.com/journals/jama/fullarticle/182810>
10. Treatment for Alcohol Problems: Finding and Getting Help [Internet]. National Institute on Alcohol Abuse and Alcoholism (NIAAA). 2014 [cited 14 August 2020]. Available from: <https://www.niaaa.nih.gov/publications/brochures-and-fact-sheets/treatment-alcohol-problems-finding-and-getting-help>
11. Hahnemann's Miasm Theory And Miasm Remedies - Peter Morrell [Internet]. Homeoint.org. 2020 [cited 14 August 2020]. Available from: http://www.homeoint.org/morrell/articles/pm_miasm.htm
12. Schroyens F. Radar10. Belgium: Archibel Homoeopathic Software; 2009.
13. Boericke W, Boericke O. Pocket manual of homoeopathic materia medica. New Delhi: B. Jain Publishers (P) Ltd.; 2012.
14. Allen H. Allen's Keynotes Rearranged & Classified. 10th ed. New Delhi: B. Jain Publishers Pvt. Ltd.; 2006.
15. Das R. Select your remedy. New Delhi: Indian books and periodical publishers; 2018.
16. Gopinadhan S, Balachandran VA. A pilot study on the effect of Arsenicum album in alcohol dependents. CCRH Q Bull 1994;16:10-5.
17. Manchanda RK, Janardanan Nair K R, Varanasi R, Oberai P, Bhuvaneswari R, Bhalerao R, Gnnanaprkasham M, Padmanabhan M, Siddiqui V A. A randomized comparative trial in the management of Alcohol Dependence: Individualized Homoeopathy versus standard Allopathic Treatment. Indian J Res Homoeopathy [serial online] 2016 [cited 2020 Aug 28];10:172-81. Available from: <http://www.ijrh.org/text.asp?2016/10/3/172/188236>
18. Rai Y. Treatment of drug dependants with homoeopathy-an attempt. CCRH Qly Bull 1994;16:25-8.

About the authors

C.P. Sharma, Principal, Bakson Homoeopathic Medical College & Hospital, Greater Noida.

Deeksha, Assistant Professor, Department of Forensic Medicine and Toxicology, Bakson -Homoeopathic Medical College & Hospital, Greater Noida.

Arun Kumar, Assistant Professor, Department of Homoeopathic Pharmacy, Bakson Homoeopathic Medical College & Hospital, Greater Noida.