

Alcoholism and Its Homoeopathic Management

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Abstract: *Alcoholism and its homoeopathic management. This article is about alcoholism and how excessive alcohol use can damage all organ systems, and particularly can result in mental illness, delirium tremens, Wernicke–Korsakoff syndrome, an impaired immune response. Homoeopathy treatment helps a lot in dealing with alcoholism and can be treated or managed by homeopathy.*

Keywords: Homoeopathy, Totality of Symptoms, alcoholism

1. Introduction

Alcoholism may refer to damage whether mental, physical, or social resulting from such excessive consumption. Excessive consumption of alcohol refers to a daily or weekly intake of alcohol exceeding a specific amount. Alcohol misuse describes drinking that cause mental, physical, or social harm to the individual.

Following are the alternative terms used for describing alcoholism:

- 1) Excessive consumption of alcohol
- 2) Alcohol misuse
- 3) Alcohol dependence
- 4) Problem drinking

The Moral and Medical Models of Alcohol Misuse

According to the moral model if someone drinks too much, he does so of his own free will, and if his drinking causes harm to himself or his family, his actions are morally bad.

According to the medical model, a person who misuses alcohol is ill rather than wicked.

The disease concept of alcoholism embodies 3 basic ideas:

- 1) Some people have a specific vulnerability to alcohol misuse.
- 2) Excessive drinking progresses through well defined stages, at one of which the person can no longer control his drinking.
- 3) Excessive drinking may lead to physical and mental diseases of several kinds. (1)

Epidemiological Aspects of Excessive Drinking and Alcohol Misuse

It has been seen that the highest consumption of alcohol is in young men who are unmarried, separated or divorced.

The prevalence of alcohol misuse can be estimated in 3 ways:

- 1) From hospital admission rates
- 2) From deaths from alcoholic cirrhosis
- 3) By surveys in general population.

Alcohol misuse and population characteristics:

- 1) Gender: men > women
- 2) Age: highest in late teens or early twenties
- 3) Ethnicity and culture: the followers of certain religions are less likely than the general population to misuse alcohol.

- 4) Occupation: chefs, kitchen porters, barmen, and brewery workers who have easy access to alcohol are at higher risk of alcohol misuse.

Disorders Related to Alcohol Misuse

Physical Damage

- 1) Cirrhosis
- 2) Neuropsychiatric complications like peripheral neuropathy, epilepsy, cerebellar degeneration.
- 3) Cardiovascular complications like hypertension and stroke.
- 4) Fetal alcohol syndrome: it occurs in children born to mothers who drink excessively. It includes facial abnormality, small stature, low birth weight, low intelligence, and over activity.
- 5) Psychiatric disorders: it falls into 4 groups:
 - a) Intoxication phenomena
 - b) Withdrawal phenomena
 - c) Toxic or nutritional disorders
 - d) Associated psychiatric disorders

Social Damage

- 1) Family problems
- 2) Work difficulties and road accidents
- 3) Crime

Causes of Alcoholism

- 1) **Biological factors:** research studies have shown that alcoholism does tend to run in families. These studies have strongly supported the genetic viewpoint.
- 2) **Psychological and interpersonal factors:**
 - a) **Psychological vulnerability:** some individuals lose control over their drinking is often posed in terms of psychological vulnerability or they have “alcoholic personality” i. e a type of character organization that predisposes a given individual to the use of alcohol rather than to some other defensive pattern of coping with stress. Also alcoholics tend to be emotionally immature. Antisocial personality and depression are two clinical syndromes that have also been commonly associated with later excessive drinking.
 - b) **Stress, tension reduction, and reinforcement:** it has been concluded that alcoholism is a conditioned response to anxiety. The individual presumably finds in alcohol a means of relieving anxiety, resentment, depression, or other unpleasant feelings resulting from stressful aspects of his life situation. each time

he drinks and experiences relief of tension, his drinking pattern is reinforced; eventually it becomes his habitual way of coping with stress.

- c) **Marital and other intimate relationships:** excessive drinking often begins during crises period in marital or other intimate personal relationships, particularly crises which lead to hurt and self devaluation.
- 3) **General socio - cultural factors:** Our culture has become dependent on alcohol as a social lubricant and a means of reducing tension - it is the “drug of choice”. Also liquor has come to play an almost ritualistic role in promoting gaiety and pleasant social interaction. (2)

Homoeopathic Management in Alcoholism

- 1) **Nux vomica:** it is the great anti alcoholic remedy. It corresponds to the tremor, to the nervous affections, to the headache, to the bad taste.
- 2) **Quercus glandium spiritus:** antidotes effects of alcohol. It takes away craving for alcoholics as it causes a disgust for alcoholic beverages.
- 3) **Avena sativa:** it has action on brain and nervous system, favourably influencing their nutritive function. Alcoholism. Sleeplessness especially of alcoholics.
- 4) **Opium:** this is a remedy indicated in “old sinners” who have had the delirium tremens over and over again.
- 5) **Stramonium:** it is suitable in habitual drunkards. The prevailing mental characteristics is terror, all hallucinations and illusions are fright and terror producing.
- 6) **Ranunculus bulbosus:** this medicine in tincture form helps in calming the attacks of delirium tremens. It is undoubtedly best remedy in the treatment of acute alcoholism.
- 7) **Capsicum:** ten drops of the tincture will stop the morning vomiting, sinking at the pit of pit of the stomach and intense craving for alcohol in dipsomania, and promote the appetite.
- 8) **Sulphuric acid:** This is the remedy for chronic alcoholism. It comes in long after nux vomica have failed. It suits the sour breath and vomiting of alcoholic dyspepsia. It corresponds to inebriates on their last legs, who are pale and shriveled and cold, whose stomach will not tolerate the slightest amount of food. They can not drink water unless it be well whisked. They are quick and hasty in everything, and have a great and constant craving for brandy.
- 9) **Cannabis Indica:** A very reliable remedy in acute alcoholism. Some violence, talkativeness and active mind, subjects' crowd upon it, delusions and hallucinations relate to exaggerated subjects, time, space, etc.; face flushed, pupil dilated, perspires easily. Surprise is constantly expressed on the countenance.
- 10) **Hyoscyamus:** when delirium tremens occurs this is usually the remedy indicated. Marked sexual excitement, desire to expose person and fear of poison. Constant insomnia is an excellent indication, outburst of laughter alternating with weeping may also occur.
- 11) **Agaricus:** it will sometimes control the characteristic tremor when nux fails. It acts as an intoxicant to the brain, producing more vertigo and delirium than alcohol, followed by profound spoor with low order reflexes. It correspond to various forms of cerebral

excitement rather than congestion. Thus, in delirium of fevers, alcoholism, etc.

- 12) **Asarum:** A remedy for nervous affections, loss of energy, with excessive erethism. It has loss of appetite, flatulence, eruction, and vomiting with a strong desire for alcoholic drinks.
- 13) **Arsenic Album:** it has vision of ghosts, with great weakness, diseases from overuse of alcohol; patients must have their accustomed drinks; great tremulousness and nervous weakness. Suicidal tendencies, constantly annoyed by bugs and vermin that he sees upon his person and unceasingly tries to brush them off. (3)

Psychological Treatment

Where patients have significant alcohol related disorders, particularly in the presence of alcohol dependence, treatment may need to be more intensive. Any intervention should be preceded by a full assessment and should include a drinking history and an appraisal of current medical, psychological, and social problems.

An explicit treatment plan should be worked out with the patient (and spouse, if appropriate). There should be specific goals and the patient should be required to take responsibility for realizing them. In the early stages there should be short term and achievable goals. Longer term goals can be set as treatment progresses.

Psycho social measures: the focus of psycho social measures in the treatment of alcoholism involves -

- 1) **Group Therapy:** this has probably the most widely used treatment for problem drinkers. Regular meeting are attended by about 10 patients and one or more staff members. The aim is to enable patients to observe their own problems mirrored in other problem drinkers and to work out better ways of coping with their problems.
- 2) **Cognitive behavioral therapy (CBT):** CBT treatment tackles the drinking behavior itself rather than the presumed underlying psychological problems. Such problems stress the role of education and the improvement of social and interpersonal skills as these relate to alcohol misuse. (2)

References

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