Alcohol's Effects on Health

Research-based information on drinking and its impact.

Treatment for Alcohol Problems: Finding and Getting Help

This guide is written for individuals—and their family and friends—who are looking for options to address alcohol problems. It is intended as a resource to understand what treatment choices are available and what to consider when selecting among them.

For more information, please visit the NIAAA Alcohol Treatment Navigator®, an online tool that helps individuals find the right treatment for them—and near them. The Navigator offers a step-by-step process to finding a highly qualified professional treatment provider. Learn more at alcoholtreatment.niaaa.nih.gov.

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Contents

When Is It Time for Treatment?
Options for Treatment
Treatments Led by Health Care Providers
What Medications Are Available for Alcohol Use Disorder?
Tips for Selecting Treatment
An Ongoing Process
Resources

When Is It Time for Treatment?

Alcohol-related problems—which result from drinking too much, too fast, or too often—are among the most significant public health issues in the United States.

Many people struggle with controlling their drinking at some point in their lives. **Millions of adults in the United States have alcohol use disorder (AUD),** and approximately 1 in 10 children live in a home with a parent who has AUD.

Does Treatment Work?

The good news is that no matter how severe the problem may seem, most people with AUD can benefit from some form of treatment. Many others substantially reduce their drinking and report fewer alcohol-related problems.

A Note About Stigma

People with AUD can feel isolated and rejected due to stigma—the negative attitudes and false beliefs about AUD that they have heard from others or have picked up from society at large. As a result, people with AUD might be too embarrassed to discuss it, think they should be strong enough to handle it alone, or be concerned that others might have a negative opinion.

However, AUD is not a choice or character flaw and is a common medical condition that can happen to anyone. Evidence-based AUD treatment is available, change is possible, and most people who have AUD recover or markedly improve.

Signs of an Alcohol Problem

AUD is characterized by an impaired ability to stop or control alcohol use despite adverse social, occupational, or health consequences. Health care providers diagnose AUD when a person has two or more of the symptoms listed below. AUD can be mild (the presence of two to three symptoms), moderate (the presence of four to five symptoms), or severe (the presence of six or more symptoms).

In the past year, have you:

- Had times when you ended up drinking **more, or longer** than you intended?
- More than once wanted to **cut down or stop drinking**, or tried to, but couldn't?
- Spent a **lot of time** drinking, being sick from drinking, or getting over other aftereffects?
- **Wanted a drink** so badly you couldn't think of anything else?
- Found that drinking—or being sick from drinking—often **interfered with taking care** of your **home or family**? Or caused **job** troubles? Or **school** problems?
- Continued to drink even though it was causing **trouble** with your **family or friends**?
- **Given up or cut back on activities** you found important, interesting, or pleasurable so you could drink?
- More than once gotten into situations while or after drinking that **increased your chances of getting hurt** (such as driving, swimming, using machinery, walking in a dangerous area, or engaging in unsafe sexual behavior)?
- Continued to drink even though it was making you feel **depressed or anxious** or adding to **another health problem**? Or after having had an alcohol-related **memory blackout**?
- Needed to **drink much more** than you once did to **get the effect** you want? Or found that your **usual number** of drinks had **much less effect** than before?
- Found that when the effects of alcohol were wearing off, you **had withdrawal symptoms**, such as trouble sleeping, shakiness, restlessness, nausea, sweating, a racing heart, dysphoria (feeling uneasy or unhappy), malaise (general sense of being unwell), feeling low, or a seizure? Or sensed things that were not there?

If you have any of these symptoms, alcohol may already be a cause for concern. The more symptoms you have, the more urgent the need for change. A health care provider can look at the number, pattern, and severity of symptoms to see whether AUD is present and help you decide the best course of action.

Options for Treatment

When asked how alcohol problems are treated, people commonly think of 12-step programs or 28-day inpatient treatment centers but may have difficulty naming other options. In fact, there are many treatment options available thanks to significant advances in medical and behavioral research over the past decades.

Ultimately, there is no one-size-fits-all solution, and what may work for one person may not be a good fit for someone else. Simply understanding the different options can be an important first step.

Types of Treatment

Behavioral Treatments

Behavioral treatments are aimed at changing drinking behavior through counseling. They are led by health care providers and supported by studies showing that these treatments can be beneficial.

Medications

Three medications are currently approved in the United States to help people stop or reduce their drinking and prevent a return to drinking. These medications are prescribed by a primary care provider or other health care provider and may be used alone or in combination with counseling.

Mutual-Support Groups

Alcoholics Anonymous® (also known as "AA") and other 12-step programs provide peer support for people quitting or cutting back on their drinking. Combined with treatment led by health care providers, mutual-support groups can offer a valuable added layer of support.

The evidence suggests that the free and flexible assistance provided by mutual-support groups can help people make and sustain beneficial changes and, thus, promote recovery.

Starting with a Primary Care Provider

For anyone thinking about treatment, talking to a primary care provider is an important first step—primary care providers can be a good source for treatment referrals and medications. A primary care provider can also:

- Evaluate a person's drinking pattern
- Help craft a treatment plan
- Evaluate overall health
- Assess whether medications for AUD may be appropriate

Types of Health Care Providers

Many health care providers can play a role in treatment. Below is a list of some of the providers who are typically involved in alcohol treatment and the type of care they may offer.

Provider Type	Degrees and Credentials	Treatment Type
Primary Care Provider	M.D., D.O. (doctor of osteopathic medicine); others include nurse practitioner (NP) or physician assistant (PA)	Medications, brief behavioral treatment, referral to specialist
Psychiatrist	M.D., D.O.	Medications, behavioral treatment
Psychologist	Ph.D., Psy.D.	Behavioral treatment
Social Worker	M.S.W. (master of social work), L.C.S.W. (licensed clinical social worker)	Behavioral treatment
Counselor	L.C.P.C., L.P.C.	Behavioral treatment
Alcohol Counselor	Varies—most states require some form of certification	Behavioral treatment
Please note that some psychologists, social workers, or alcohol counselors may also be referred to as "therapists." Individuals are advised to talk to their health care providers about the best form of primary treatment.		

Treatments Led by Health Care Providers

Professionally led treatments include behavioral treatments and medications.

Behavioral Treatments

Also known as "alcohol counseling," behavioral treatments involve working with a health care provider to identify and help change the behaviors that lead to alcohol problems.

Behavioral treatments share certain features, which can include:

- Developing the skills needed to stop or reduce drinking
- Helping to build a strong social support system
- Working to set reachable goals
- Coping with or avoiding the triggers that might cause a return to drinking

Types of Behavioral Treatments

Cognitive–behavioral therapy can take place one-on-one with a therapist or in small groups. This form of therapy is focused on identifying the feelings and situations (called "cues") that contribute to heavy drinking and managing stress that can lead to a return to drinking. The goal is to change the thought processes that lead to alcohol misuse and to develop the skills necessary to cope with everyday situations that might trigger alcohol misuse.

Motivational enhancement is conducted over a short period of time to build and strengthen motivation to change drinking behavior. The therapy focuses on identifying the pros and cons of seeking treatment, forming a plan for making changes in one's drinking, building confidence, and developing the skills needed to stick to the plan.

Contingency management approaches incorporate tangible rewards for achieving specific, measurable treatment goals. They reinforce positive behaviors, such as abstaining or regularly attending treatment sessions.

Couples and family counseling incorporates spouses and other family members in the treatment process and can play an important role in repairing and improving family relationships. Studies show that strong family support through family therapy increases the chances of maintaining abstinence (not drinking) compared with people going to individual counseling.

Brief Interventions are short, one-on-one or small-group counseling sessions that are time limited. The counselor provides information about the individual's drinking pattern and potential risks. After the individual receives personalized feedback, the counselor will help set goals.

12-step facilitation therapy is an engagement strategy used in counseling sessions to increase an individual's active involvement in 12-step-based mutual-support groups.

Acceptance- and mindfulness-based interventions increase awareness and acceptance of present-moment experiences. Mindfulness-based skill-building strategies promote flexible, rather than autopilot, responses to triggers that can prompt drinking.

Medications

Some people are surprised to learn that there are medications on the market approved to treat AUD. The newer types of these medications work by offsetting changes in the brain caused by AUD.

All approved medications are nonaddictive and can be used alone or in combination with other forms of treatment. Learn more about these approved medications in "What Medications Are Available for Alcohol Use Disorder?"

Ultimately, choosing to get treatment may be more important than the approach used as long as the approach avoids heavy confrontation and incorporates empathy, motivational support, and a focus on changing drinking behavior.

What Medications Are Available for Alcohol Use Disorder?

Certain medications have been shown to effectively help people stop or reduce their drinking and avoid a return to drinking.

Current Medications

Currently, there are three medications approved for AUD in the United States, and they are an effective and important aid in the treatment of people with this condition.

- **Naltrexone** is available as a pill or injection and helps reduce the urge to drink.
- **Acamprosate** is a pill that decreases the negative symptoms that are sometimes felt during abstinence from alcohol, making abstinence easier to maintain.
- **Disulfiram** is a pill that discourages drinking by causing unpleasant symptoms when alcohol is consumed.

Given the diverse biological processes that contribute to AUD, new medications are needed to provide a broader spectrum of treatment options.

Just like any other medical condition, people with substance use disorders deserve to have a range of treatment options available to them. Scientists are working to develop a larger menu of pharmaceutical treatments that could be tailored to individual needs.

Personalized Medicine

Ideally, health care providers will one day be able to identify which AUD treatment is most effective for each person. The National Institute on Alcohol Abuse and Alcoholism (NIAAA) is supporting research to identify genetic, behavioral, and other factors that can predict how well someone will respond to a particular treatment. These advances could optimize how treatment decisions are made in the future.

"Isn't taking medications just trading one addiction for another?"

This is not an uncommon concern, but the short answer is "no." All medications approved for treating AUD are nonaddictive. These medicines are designed to help manage a chronic disorder just as someone might use medications to keep their asthma or diabetes in check.

Tips for Selecting Treatment

Overall, gather as much information as you can about a program or provider before making a decision on treatment. If you know someone who has firsthand knowledge of a program, it may help to ask about their personal experience.

The search for alcohol treatment can feel overwhelming. The three-step road map outlined in the NIAAA Alcohol Treatment Navigator offers expert guidance to focus and support your efforts. Learn how to find higher quality, science-backed alcohol treatment to raise your changes for success.

Cost may be a factor when selecting a treatment approach. Evaluate the coverage in your health insurance plan to determine how much of the costs your insurance will cover and how much you will have to pay. Ask different programs if they offer sliding-scale fees—some programs may offer lower prices or payment plans for individuals without health insurance.

Here are some questions you can ask that may help guide your choice:

What kind of treatment does the program or provider offer?
It is important to gauge whether the facility provides all the currently available, evidence-based methods or relies on one approach. You may want to learn if the program or provider offers medication and whether mental health issues are addressed together with alcohol treatment.

Is treatment tailored to the individual?
Matching the right therapy to the individual is important to its success. No single treatment will benefit everyone. It may also be helpful to determine whether the treatment will be adapted to meet changing needs as they arise.

What is expected of the person with AUD?
You will want to understand what will be asked of you in order to decide what treatment best suits your needs.

Is treatment success measured?
You may be able to better compare your options by assessing whether and how the program or provider measures success.

How does the program or provider handle a return to drinking?
Setbacks can be common, so you will want to know how they are addressed. For more information on a return to drinking, see An Ongoing Process.

When seeking professional help, it is important that you feel respected and understood and that you trust the person, group, or organization to help you. However, remember that relationships with health care providers can take time to develop.

Additional Considerations

Treatment Setting

In addition to choosing the type of treatment that is best for you, you will also have to decide on the setting for that treatment. Evidence-based AUD treatment settings come in many forms, including:

- **Outpatient**—regular office, virtual, or telehealth visits for counseling, medication support, or both
- **Intensive outpatient or partial hospitalization**—coordinated outpatient care for complex needs
- **Residential**—a low- or high-intensity program in a 24-hour treatment setting
- **Intensive inpatient**—medically directed 24-hour services; may manage withdrawal

Your provider may also be able to suggest an online self-guided program. Such e-health tools have been shown to help people overcome alcohol problems. Your health care provider can help you evaluate the pros and cons of each treatment setting.

Please note: When someone who has been drinking heavily for a prolonged period of time suddenly stops drinking, their body can go into a painful or even potentially life-threatening process of withdrawal. Symptoms can include nausea, rapid heart rate, seizures, or other problems. Seek medical help to plan a safe recovery. Doctors can prescribe medications to address these symptoms and make the process safer and less distressing.

An Ongoing Process

Overcoming AUD is an ongoing process—one that can include setbacks.

The Importance of Persistence

Because AUD is a chronic, relapsing disorder, persistence is key. It is rare that someone would go to treatment once and then never drink again. More often, people try to quit or cut back over time, experience recurrences, learn from them, and then continue on their recovery journey. For many, continued follow-up with a treatment provider is critical for overcoming alcohol problems. The provider can help adjust the treatment plan and aid long-term recovery.

Setbacks Are Part of the Process

Setbacks are common among people who overcome alcohol problems. People with drinking problems are most likely to return to drinking during periods of stress or when exposed to people or places associated with past drinking.

Just as some people with diabetes or asthma may have flare-ups of their disease, a return to drinking can be seen as a temporary setback to full recovery and not as a failure. Seeking professional help can prevent a return to drinking—behavioral therapies can help people develop skills to avoid and overcome triggers, such as stress, that might lead to drinking. Most people benefit from regular checkups with a treatment provider. Medications can also deter drinking during times when individuals may be at greater risk for a return to drinking (e.g., divorce, death of a family member).

Although definitions of recovery vary, many of them share an emphasis on improvements in quality-of-life dimensions. NIAAA defines recovery as a process through which an individual pursues both remission from AUD and cessation from heavy drinking. Depending on the severity of AUD and individual differences in health and circumstances, abstinence may be the only option for sustained recovery for some individuals. Recovery often includes sustainable improvements in physical health, mental health, relationships, spirituality, and other measures of function and well-being, which, in turn, help sustain recovery from AUD.

Mental Health Issues and Alcohol Use Disorder

A number of health conditions can often go hand in hand with AUD. Common mental health conditions that co-occur with AUD are depressive disorders, anxiety disorders, trauma- and stress-related disorders, other substance use disorders, and sleep disorders. Studies show that people who have AUD are more likely to suffer from major depression or anxiety over their lifetime. When addressing drinking problems, it's important to also seek treatment for any accompanying medical and mental health issues.

Advice for Friends and Family Members

Caring for a person who has problems with alcohol can be very stressful. It is important that as you try to help your loved one, you also find a way to take care of yourself. It may help to seek support from others, including friends, family, community, and support groups. If you are developing your own symptoms of depression or anxiety, think about seeking professional help for yourself. Remember that your loved one is ultimately responsible for managing their own illness.

However, your participation can make a big difference. Based on clinical experience, many health care providers believe that support from friends and family members is important in overcoming alcohol problems. But friends and family may feel unsure about how best to provide the support needed. The groups for family and friends listed in the "Resources" section may be a good starting point.

Remember that changing long-standing patterns is hard, takes time, and requires repeated efforts. We usually experience setbacks along the way, learn from them, and then keep going. AUD is no different. Try to be patient with your loved one. Overcoming this disorder is not easy or quick.

As your loved one makes an effort, please keep in touch and be supportive. Too often we are so angry or discouraged that we take it for granted when things are going better. A word of appreciation or acknowledgment of a success can go a long way.

Resources

Professional Help

Your health care provider. Primary care and mental health providers can provide effective AUD treatment by combining new medications with brief counseling visits.

To aid health care providers with young people who have alcohol problems, NIAAA has developed the guide Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide. Visit niaaa.nih.gov/health-professionals-communities to learn more.

Specialists in alcohol-related treatment. Contact your primary care provider, health insurance plan, local health department, or employee assistance program for information about specialty treatment.

Professional Associations of Medical and Nonmedical Addiction Specialists

American Academy of Addiction Psychiatry
401–524–3076

American Psychological Association
1–800–374–2721
(Ask for your state's referral number to find psychologists with addiction specialties.)

American Society of Addiction Medicine
301–656–3920
(Ask for the phone number of your state's chapter.)

Treatment Finders

NIAAA Alcohol Treatment Navigator®—How to Find Quality Alcohol Treatment

SAMHSA's Behavioral Health Treatment Services Locator
1–800–662–HELP (4357)

Mutual-Support Groups

Alcoholics Anonymous® (AA)— app for iOS and Android smartphones
212–870–3400

LifeRing
800–811–4142

SMART Recovery®
440–951–5357

Women for Sobriety
215–536–8026

Groups for Family and Friends

Adult Children of Alcoholics® Dysfunctional Families World Service Organization
310–534–1815

Al-Anon Family Groups
1–888–425–2666 for meetings

SMART Recovery Family & Friends
440–951–5357

Information Resources

National Institute on Alcohol Abuse and Alcoholism
301–443–3860

National Institute on Drug Abuse
301–443–6441

National Institute of Mental Health
1–866–615–6464

Substance Abuse and Mental Health Services Administration's National Helpline
800–662–HELP (4357)

Online-Only Resources

If you have internet access, you may wish to visit the following websites:

NIAAA Alcohol Treatment Navigator®
(Three-step road map to evidence-based treatment)

NIAAA Facts About Teen Drinking

National Association of Social Workers
(Search for social workers with addiction specialties.)

Moderation Management™
(Mutual-support group)

Secular AA
(Mutual-support group)

E-Health Alcohol Treatment Tools*

Below are samples of e-health tools developed with NIAAA funding. Each of these fee-based tools has a research base that shows its potential to help people cut down or quit drinking.

- **A-CHESS**—A mobile tool to prevent a return to drinking; available from some specialty treatment providers and programs.
- **CBT4CBT**—A self-guided, web-based cognitive-behavioral therapy program that teaches skills to help people stop or reduce drinking; health professionals can provide a prescription.
- **CheckUp & Choices**—A digital self-help program to guide people in deciding whether to change their drinking habits and developing skills to make a change.

*NIAAA has included several potentially useful resources developed with NIAAA funding or based on evidence-based principles derived from NIH-funded research. As a federal agency, however, NIAAA cannot endorse any particular commercial product or service.

988 Suicide & Crisis Lifeline | Call or Text 988

For TTY Users: Use your preferred relay service or dial 711, then 988.

If you're thinking about suicide, are worried about a friend or loved one, or would like emotional support, the Lifeline network is available 24/7 across the United States. Services are also available in Spanish.

Research shows that most people who have alcohol problems are able to reduce their drinking or quit entirely.

There are many roads to getting better. What is important is finding yours.

Understanding the available treatment options—from behavioral therapies and medications to mutual-support groups—is the first step. The important thing is to remain engaged in whatever method you choose.

Ultimately, receiving treatment can improve your chances of success.