

## CHAPTER 11

### *Alcohol Dependence*

Grace Patterson decided to call a psychologist, Dr. Lawton, about her husband, Michael. She was worried about his history of heavy drinking, which had escalated recently. Dr. Lawton suggested that she talk to Michael about her concerns. He recommended that she pick a time when Michael had not been drinking. She should tell him that she had spoken to a psychologist who agreed to see Michael for an evaluation and make recommendations.

Grace called again several weeks later. Michael had refused to consider the possibility of seeing a psychologist. Grace had no idea what to do next, so Dr. Lawton scheduled an appointment to meet with her alone. They discussed ways Grace could change her interactions with Michael to motivate him to enter treatment. She was instructed to describe calmly to him the negative consequences of his drinking and to express how concerned she was about it. Grace and Dr. Lawton identified several recent incidents and rehearsed how she could respond. For example, several weeks ago Michael and Grace had dinner plans with another couple, but by late afternoon Michael was too drunk to go out. Grace had to call the other couple and make an excuse about canceling the dinner. That evening they had a huge argument about his drinking. Whenever Michael was really drunk, it was impossible to have a reasoned conversation with him, especially about his drinking. In the future, Grace was to wait until the next morning and then express her concerns about the drinking and how this pattern might cause them to lose good friends. The problem was ruining their marriage.

A month later, Grace called Dr. Lawton to say that there had been no change in Michael's drinking. She described several occasions in which she had talked with him about the destructive effects his drinking was having on their lives. Although Grace was discouraged, Dr. Lawton persuaded her to continue the plan. Three weeks later, Grace called to make an appointment for both her and Michael to come in for the evaluation. They had a terrible fight the night before; Michael had raised his hand to hit her but held back at the last second. This incident apparently alarmed Michael as much as it frightened Grace, and so he finally agreed to come in.

Dr. Lawton greeted Michael and Grace in the waiting room and invited them into his office. One primary goal of the initial session was to avoid scaring Michael out of therapy. Dr. Lawton explained that he understood his reluctance to come for the appointment. He told him that the purpose of this session was to gather information about his drinking habits and any problems that alcohol might be causing. Toward the end of the session, if Michael wanted to, they could discuss treatment options.

Michael was drinking heavily on a daily basis, beginning after work and continuing into the evening. On weekends, he typically started to drink around noon and was intoxicated by dinner. He recognized that his drinking was out of control and that it was having adverse effects on both him and his wife. They had begun arguing frequently. On several occasions, Michael had broken dishes and punched holes in walls. The couple now saw friends infrequently. Michael's high blood pressure had been worsened by the alcohol. Toward the end of the session, when the issue of treatment was raised, Michael said that he knew he should cut back on his drinking but that he did not really want to stop entirely. He knew that abstinence was the goal of alcohol treatment programs like Alcoholics Anonymous (AA), and he did not want to become totally abstinent. At this point, Dr. Lawton explained that some treatments are focused on making changes that lead to moderate drinking. Michael seemed interested in this possibility. The session ended with Michael agreeing to consider entering treatment. A week later, he called and scheduled another appointment.

### *Social History*

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Michael's childhood was rather uneventful. His father was an electrical engineer, and his mother worked part time in a local library when Michael and his older brother, James, were in school. Michael's mother and father were very light drinkers—an occasional beer or glass of wine. Michael recalled that his older brother was closer to their father than Michael. James shared his father's interest in electronic projects, and the two of them often worked together. Michael, in contrast, had little interest and even less aptitude for electronics. He was more interested in reading, particularly about history.

Michael made excellent grades in elementary, middle, and high school. In high school, he was also on the wrestling team. He began drinking then, usually at parties on the weekends. He recalled that he found drinking relaxing and that it reduced his anxiety in social situations. He remembered that he was most nervous around women; he often felt tongue-tied and felt unable to talk with them.

He graduated from high school and went to a small college, where he majored in history and education. His goal was to become a high school history teacher. His drinking increased somewhat in college, both in amount and frequency. It was no longer confined to weekends, and he typically drank six

or more beers at a sitting. As he had said about his drinking in high school, he reported that he drank mostly to relax. He maintained a decent GPA but recalled that his anxieties around women persisted. He met Grace at college in an art history class. They were immediately attracted to each other. Grace's social and conversational skills put Michael at ease, and they began seeing each other regularly. They married at the end of college.

Michael took a job teaching high school history, and Grace found work at a jewelry store. They lived in an apartment for two years, saving money for the down payment on a house. Because he aspired to become head of the history department or perhaps get into school administration, Michael enrolled in an evening graduate program at a local university to work on his master's degree. Michael recalled this as a very happy time. He and Grace were deeply in love.

He was drinking regularly now, a couple of scotches before dinner on weekdays and the usual scotches plus wine with dinner on the weekends. Grace joined her husband in a scotch before dinner, but only one. Michael remembered that when he and Grace went out for dinner with friends, he would wolf down two drinks before dinner while everyone else had only one. And when they were at a party, Michael would generally drink considerably more than anyone else. He claimed he needed the alcohol to feel at ease in social situations.

This drinking pattern continued for several years. During this time, Michael finished his master's degree, and he and Grace had a child, Ethan. The couple bought a small house, and life continued smoothly for the most part. Four years later, the position of head of the history department opened, and Michael applied for the job. When he didn't get it, he was both crushed and very angry. His drinking began to increase. He would secretly freshen up his scotch when Grace was out of the room, so he was probably having three or four instead of his usual two. After a while, Grace noticed that they were buying liquor more often and began to suspect that Michael was drinking heavily. When she confronted him, he angrily denied it and changed his drinking pattern.

Now he began drinking on the way home from work. He would stop at a liquor store, buy a half pint of brandy, and drink it on the way home. He was careful to vary the liquor stores he stopped at and took back routes home to reduce the chance of being stopped by a police officer. Before getting home, he put the empty bottle in the trunk of his car, ate a breath mint, and was ready to greet Grace and start in on the scotch. He began to fall asleep, possibly passing out, regularly after dinner. His after-work drinking led him to give up his afternoon racquetball games, and he no longer was able to do anything after dinner. He started forgetting appointments he had made. For example, friends might call to invite Michael and Grace to a movie or dinner, but the next day Michael had no memory of the call. Friends stopped calling as often. During this period, Grace was becoming increasingly upset. She was interacting less and less with Michael, and she was coming to believe that he must be drinking secretly. After several months, Grace became fairly certain that Michael must be drinking outside the home. One day, she checked his trunk and found a dozen empty brandy

bottles. Beside herself with anger and anxiety, she confronted him, and an ugly argument ensued—the first of many. Michael became even more secretive about his drinking, now throwing the empties away before arriving home, but his drinking did not decrease. He realized his drinking was out of control and tried several times to cut back. Unfortunately, his resolve lasted only a day or two.

### *Treatment*

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During the first session, Dr. Lawton and Michael discussed treatment options in more detail. Michael was adamant that he wanted to cut down rather than quit completely. Dr. Lawton told him that while he thought abstinence was a better goal, he was willing to help Michael reduce his consumption. To help Michael regain control of drinking, Dr. Lawton insisted on a month of abstinence first. While Michael showed signs of increased tolerance for alcohol, he had not experienced withdrawal symptoms; therefore, quitting “cold turkey” appeared to be a safe procedure. Michael reluctantly agreed to this period of abstinence. They also discussed the positive and negative consequences of his drinking. Somewhat surprisingly, Michael was hard pressed to come up with much in the way of positives. He said that alcohol had allowed him to cope with stress in the past, but now it had just become a habit, a way of filling time. Their discussion of negative consequences produced a long list—marital problems, loss of friends, giving up hobbies and interests, and the fact that his high blood pressure was undoubtedly worsened by alcohol. Dr. Lawton also provided normative information about the amounts people typically drank. Michael was surprised at how much he deviated from the average.

Both Grace and Michael were present for the next session. They discussed ways for Michael to cope with abstinence. Dr. Lawton pointed out that urges to drink would pass with time, especially if Michael could engage in some alternative activities. Michael was taught to think past the urge and to focus on the longer-term consequences of heavy drinking. In therapy sessions, he practiced how to imagine longer-term consequences of getting drunk, such as being arrested for drunk driving, ruining his marriage, and losing friends. Together they planned a number of strategies to keep Michael busy after work. He decided to help out with the wrestling team at school and also return to playing racquetball. If neither of these activities was possible on a given day, Michael was to stay later at work and grade papers or revise lectures. If he was having difficulty controlling his urges, he was to call Grace. Michael agreed to have Grace remove all alcohol from their home, and the couple came up with a list of things they could do to fill the time that he would have previously spent drunk or “asleep.” These involved social activities such as going to the movies with friends, renting a film to watch at home, playing bridge, and going out for dinner.