

REHABILITATION OF ALCOHOLICS

In the past, nurses were not aware of the fact that alcoholism fell in the field of mental health and those who nursed alcoholics attended only to their physical needs. But experience has shown that under proper conditions the role of nurses can be extremely important, say **MADHUKAR NARAYAN HOLKAR** and Mrs. **INDUMATI MADHUKAR HOLKAR** of Hospital for Mental Diseases, Kanke, Ranchi. They also outline here the strategy for rehabilitation of alcoholics.

Jabse sarkar ne nasha bandi tod di; mano ya na mano hamne pini chhod di."

THIS song from *Five Rifles* is on the lips of many youngsters today and is played on radios and loudspeakers every now and then. The idea behind this song is that I.S. Johar, with the help of this song, tries to keep people off the evils of drinking.

Drinking of alcohol is an old custom in every community of the world. We see people drunk and we easily recognise them because they are unemployed, unkempt, homeless, vagabonds, and smelling of alcohol. They beat their wives and quarrel with them. To get their drink they use the method of "beg, borrow, steal". They snatch ornaments of their wives and mortgage them and get money for their drinks.

Every person who drinks is not labelled 'alcoholic'. Alcoholic is a person whose intake of alcohol is great enough to interfere, to a great extent, with his work performance and his functioning as a responsible citizen.

WHO Definition

The World Health Organisation defines alcoholism as follows:

"Alcoholism is a progressive fatal disease. Alcoholics are those excessive drinkers whose dependence upon alcohol has attained such a degree that they show a noticeable mental disturbance or an interference with their bodily and mental health, their interpersonal relations and their smooth social and economic functioning; or who show the prodromal signs of such developments. They, therefore, require treatment."

How much are we nurses involved in helping these unfortunate people? On the contrary, we are very poorly educated on the disease of alcoholism, because

of lack of its recognition as a disease by medical staff and the moralistic implications by the community. But in recent times an appreciable change has been noticed in the attitude of both the lay and professional people towards the problem of alcoholism. Now medical and associated professions realise that alcoholism is a disease which can be recognised, and diagnosed, and treated successfully. It is a change. We are living in a changing world and nursing is affected by changes taking place in the society. Mrs. K. Zepps says: "These changes are called progress, and we are constantly learning to accept new ideas with as much understanding as we can manage. We do not only accept the changes, but do try to adjust our thinking to be able to make some contribution to the new scale."

Therefore, we nurses should accept this change so that we can also be of some help to these alcoholics. We should have full understanding of the treatment, nursing care and rehabilitation of alcoholic patients.

Rehabilitation

Rehabilitation is defined as "Restoration of the individual to the fullest physical, mental, social, vocational and economic usefulness of which one is capable". It is extremely necessary to rehabilitate an alcoholic person because an alcoholic is not only a financial burden to the family but also a source of many problems. The problem of alcoholism poses a great challenge not only to the health agencies but also the religious and social organisations of the country. For the control and eradication of alcoholism (although eradication is far from the expectation), rehabilitation is the only sure way to help the alcoholics.

The first important thing in rehabilitation of an alcoholic patient is to find out reasons underlying his personal problems because each alcoholic is an individual with a severe personality dysfunction caused by problems that are uniquely his own. Therefore, a detailed information regarding the patient's family relationships, his psychological relationships and his emotional health should be collected by a professional team which includes social worker, psychologist, psychiatrist, and the nurse.

Reasons for alcoholism are manifold. Some of the major ones are enumerated below:

1. Generally, persons who drink excessively are unhappy, distraught and maladjusted and alcohol has been used by the patient to obtain temporary relief from discomfort and tension.
2. Fundamentally, they are unstable, sensitive, self-indulgent and have poorly developed sexuality and alcohol provides them with a temporary and false sense of ease and security.
3. Many alcoholics drink to escape from reality.
4. Some alcoholics drink to cover psychotic or neurotic symptoms.
5. Many alcoholics are emotionally immature and are fixated at the oral stage of emotional development. They get their emotional satisfaction from eating and drinking by mouth and so they are involved in drinking.

6. Because they are emotionally immature, alcoholics are dependent upon some strong person just as they were upon mother. So they adopt alcohol as their emotional crutch.

7. Alcoholism is a hereditary disease and often a history of alcoholism can be traced back to several generations.

8. Alcoholism is more common in certain occupations, e.g., among licensing traders, commercial travellers, etc.

9. Alcoholism is more common where alcohol drinks are cheap.

10. Alcoholism is more common in certain personality disorders, e.g., psychopathy.

Major Health Problem

Today alcoholism has become a fourth major health problem behind cancer, heart-disease and mental disease. Although alcoholics can not be cured completely, they can be helped to arrest their illness, so that they can lead a normal and happy life without drinking. Many advancements are being brought about in the field of medicine and the medical science has made considerable contribution towards the problem of alcoholism. In the past admission to the alcoholic was refused in many psychiatric hospitals and by psychiatrists, but the situation has changed now.

The following changes will serve to point out the effectiveness of the work done in the treatment, prevention and rehabilitation of alcoholic patients.

1. AVERSION TREATMENT

A number of treatments have been developed during the past few decades to help the alcoholics give up the emotional crutch they have adopted. Aversion treatment is one of them which is widely used in most of the hospitals who take the responsibility of treating alcoholic patients. The treatment is based on the principle of the "conditioned reflex", first discovered by the Russian psychologist, Pavlov. The treatment consists of giving an intramuscular injection of apomorphine 6 mgm (emetic drug) to the patient. After about 10-15 minutes the patient feels nauseated. One fluid ounce of his favourite alcoholic beverage is given to drink before he is sick. Further drinks are forced while he is becoming sick. Thus the patient is conditioned to vomit whenever he tastes alcohol. During the treatment the dangers, shame and ill effects of drink are repeatedly emphasized and the patient is told again and again that he must never drink again. The treatment is given in the hospital under the supervision of medical and nursing staff and is administered 2-3 times a week till the patient develops considerable aversion towards alcohol so that symptoms are produced in the patient by merely the sight or smell of the alcoholic beverage. Although this treatment does not help the patients in solving their basic emotional problems it is effective in the sense that many patients keep away from alcohol for several months and some of them stop drinking permanently. Combination of aversion treatment with psychotherapy has proved to be more beneficial.

2. DECONDITIONING THERAPY

This treatment also has the same effect on the alcoholic as the aversion treatment. Disulphiram (Antabuse) or citrated calcium carbide (Abstem) are the drugs used in this treatment. These drugs interfere with the breakdown of alcohol in the body and a toxic substance, namely an aldehyde, is formed in the body. The patient who is taking these drugs becomes nauseated and has extremely unpleasant symptoms when he takes even a small quantity of alcohol due to the combination of alcohol and the drug in the body. These unpleasant reactions and memories of them dissuade the patient from indulgence in alcohol. This treatment is effective only when the patient is co-operative and takes the drug regularly.

3. PSYCHOTHERAPY

It is a therapeutic communication between the therapist and the patient where certain psychological processes are used to relieve the patient's symptoms, to correct the psychopathology and to modify his personality patterns. An alcoholic patient is taken up for psychotherapy as soon as he recovers from acute intoxication. The supportive psychotherapy is of great help to an alcoholic patient. Through this therapy the patient is encouraged, reassured and supported to face and overcome his problems. Group therapy alone or combined with aversion therapy is often best for young unstable alcoholics.

4. TRANQUILIZERS

With the discovery of tranquilizers a new era has started in psychiatry. Development of these drugs with their selective action on the emotional states is a boon to psychiatry. 'Chlorpromazine' is the first and widely used tranquilizer the trade mark name of which varies in different countries. In the United States it is known as "Thorazine". In Germany it is known as 'Megaphen' and in France, England, Canada and India it is known as 'Largactil'. It was Delay and Deniker who in 1952 used Chlorpromazine successfully in the treatment of certain types of mental illnesses. Today the drug is widely used in mental hospitals to control severe agitation and psychomotor excitement. It was by chance that Friend and Cummins became aware of the usefulness of Chlorpromazine in the management of alcoholic patients while they were using this drug to control vomiting caused by antabuse-alcohol reaction. The most striking effects of this drug in the management of alcoholism are that it controls psychomotor excitement, induces natural sleep, restores appetite by controlling nausea and vomiting and helps to shorten the period of alcohol withdrawal. It reduces anxiety and tension which so often precipitate the patient's need to drink.

5. ALCOHOLICS ANONYMOUS

Perhaps this is the first movement towards helping the alcoholics help themselves. Alcoholics Anonymous was founded in 1935 by two patients who were alcoholics themselves. As the saying goes, "Birds of the same feather flock together," alcoholics gather together through A.A. It provides alcoholics with a society of

their own where members help one another to abstain from drinking and have considerable sympathy, patience and understanding for each other. The members of A.A. have their meetings once a week and they work in a group of two or three. They visit the homes of known alcoholics who are in need of help. The organisation helps their members in their total rehabilitation. It helps them to find a job for them and to gain a sense of personal value and worth. It tries to recognise their broken family and help children and spouses of alcoholics. There are separate branches of A.A. for teen aged children of alcoholics and for wives of alcoholics. The organisation has achieved a great success in helping many alcoholics. Many psychiatrists and physicians refer the alcoholic cases to this organisation for help. The organisation leaves no stone unturned to assist its members to develop a new emotional orientation towards life and to meet the problems of life without the help of alcohol.

6. GENERAL HOSPITAL BEDS FOR ALCOHOLICS

Now many general hospitals are reserving some beds for patients suffering from alcoholism.

7. ALCOHOLIC CLINICS

The number of alcoholic clinics is increasing day by day.

8. INDUSTRIAL HELP TO ALCOHOLICS

Now many industries have come to recognise that alcoholism is the main cause of absenteeism which affects production. So the industrial managements are now more concerned with the problem of alcoholism. Industrial physicians and nurses are now taking more interest in prevention of alcoholism. Many industries now have psychiatrists on their medical staff.

Role of Nurses

In the past nurses were not aware of the fact that alcoholism fell in the field of mental health and those who nursed alcoholics attended only to their physical needs. But experience has shown that under proper conditions the role of nurses in the rehabilitation of alcoholics can be extremely important. Now the nurses are able to give the best possible nursing care to the hospitalised alcoholic patients. They have now better knowledge of mental health principles and realise the usefulness of adopting a warm, kind and accepting attitude toward alcoholics. Nurses, especially Public Health Nurses, Psychiatric Nurses and the nurses working in Outpatient Departments are now able to contribute much more than they did in the past to rehabilitation of alcoholics.

It is undoubtedly clear from the above outline of the work carried out in the Western countries that the problem of alcoholism has been a cause of considerable concern in those countries. Unfortunately, India is lagging far behind in this respect. In India also the problem of alcoholism is increasing day by day and should be a cause for concern for the state, industrial establishments and social scientists. Therefore, a more concrete and intensive work on the subject is needed in our country so that Indians will also accept

alcoholism as a disease and a social problem and help in prevention, treatment and rehabilitation of alcoholics.

Following are some of the ways and means by which the rehabilitation of alcoholics can be planned in our country where nurses can participate in the programme actively.

1. EDUCATION OF NURSES

The first and most important thing to do is to include the information on alcoholism in the basic nursing courses so that the nurses will have better knowledge of mental health principles and will gain the basic knowledge of treatment, care, prevention and rehabilitation of alcoholics. They will adopt a warm, kind and accepting attitude towards alcoholics and they will have ability to nurse them in the hospital and assist in various treatments carried out in the hospital.

2. INTERPRETING ALCOHOLISM TO THE PUBLIC

General public in our country, especially the illiterate population which constitutes more than 70 per cent of the total population, needs to be informed about the changes that are taking place in the attitude towards alcoholics, in their treatment, care and rehabilitation. Public health nurses working in Outpatient Departments can play an important role in providing information to the general public. For this purpose there should be a provision for a guide book for alcoholics which will help these nurses to provide necessary information to the patients and their relatives.

Following communication media may be used to inform the public about the fact that an alcoholic can be rehabilitated if he is fully accepted by his family and adjusted in his previous job or given a new suitable employment.

(a) Newspapers and Magazines

News paper is a good communication medium. Publicity of hospitals where alcoholics are treated and encouraging public to take the alcoholics to these hospitals for treatment will be of great help. Professional magazines should publish informative articles. Nurses should be encouraged to read and write articles devoted to alcoholism. General popular magazines should publish good stories informing the public about bad effects of alcohol and autobiographical stories of alcoholics who have succeeded in discontinuing the habit of drinking and are leading a happy life.

(b) Radio and Television

Radio programmes on health-teaching, centred around alcoholism should be arranged as frequently as possible particularly on the local stations in local languages. Although T.V. is just stepping in our country it may be an excellent medium to educate the public regarding alcoholism.

(c) Films

Some documentary films may be produced on the bad effects of alcohol and the ways and means of helping alcoholics to come back to normal living without drinking.

(d) *Audiovisual aids*

Audiovisual aids such as charts, diagrams, posters and leaflets should be made available for the use of the general public as well as the professional personnel.

3. HOSPITAL FACILITIES

Many hospitals in India are admitting alcoholics for medical, nursing and nutritional treatment. The Hospital for Mental Diseases, Kanke, Ranchi, carries out special treatments like aversion treatment and psychotherapy for alcoholics. Recently the Mental Hospital, Bangalore has started "addiction ward" for alcoholics and drug addicts, which is believed to be the only one of its kind in India. But this is not sufficient. Much more remains to be done if we want to rehabilitate the alcoholic patients. Families and relatives of alcoholics should be encouraged to admit their patients in the hospital. There should be more beds available for alcoholics in the general hospital wards and special alcoholic clinics should be organised at various public health centres in the country.

4. ALCOHOLICS ANONYMOUS

Some big cities are having such organisations in our country. This should be encouraged. The idea of A.A. should be planted in the minds of people in the rural areas where the multitudes of the Indian population have absolutely no idea that drinking is a disease and can be treated successfully. We may find many well to do cultivators who have become slaves to the habit of drinking. They should be informed about the advantages of this wonderful organisation and should be stimulated to form such organisations in our own country.

5. RESETTLEMENT PROGRAMME

To a large extent the alcoholic is often the sole bread winner of the Indian family. His entire family is financially incapacitated because he has lost his previous job and there is no chance of getting a new one. Therefore, some compensation for his family is extremely necessary. The establishment of sheltered workshops in the country could be an answer to this problem. Employers and industrialists can be of great help if they employ some cured alcoholics. A large number of people in our country are employed in various types of industries, Railways and collieries. The management of these organisations should take more interest in prevention, treatment and rehabilitation of alcoholics employed under them to avoid interference in the economic health of the country caused by these alcoholics.

6. FOLLOW UP

An alcoholic is usually brought to the hospital for admission in a deplorable condition. He is undernourished, dehydrated, severely intoxicated and filthy in appearance. He may be in a state of delirium, tremors or coma. After the admission, the patient is usually put on high doses of vitamins along with tranquilizer and is not allowed to drink any more. Modified Insulin treatment is also given to re-equip his physical health. A careful watch is kept on the patient during the first few days especially when he has with-

drawal symptoms and craving for alcohol. Nurses have a great role to play in the management and nursing of the patients as well as assisting the psychiatrists and psychologists in carrying out special treatments like aversion treatment and psychotherapy. With expert medical nursing and nutritional care the patient usually looks fit to go home within about 2-3 weeks of time. Eventually, he is discharged and put under a follow up programme.

But it won't be surprising to note that the patient returns to the hospital within a few weeks after his discharge in a worse condition than on his previous admission. This happens, probably, because of insufficient facilities to carry out follow up programmes properly such as lack of vehicles, special centres and mobile units to prevent relapses. It will be a great help to alcoholics and their families if the Government took interest in making these facilities available in our country.

7. TEAM APPROACH

Alcoholic patients should be helped to establish an emotional reorientation to the world and to achieve satisfaction and release of their emotional tension and pleasure without the help of alcohol. It is neither an easy task nor it can be accomplished by a single individual to assist the alcoholic person in his rehabilitation as he has a faulty personality structure, limited ego strength and is emotionally immature. Moreover, an alcoholic who consumes alcohol for several years develops a sense of worthlessness, a deep sense of guilt and a feeling of hopelessness. Therefore, a team of workers is necessary to rehabilitate an alcoholic person. The team consists of Doctors, Nurses, Workers, Psychologists and, last but not the least, the patient's family members.

8. NURSES' ROLE

Sometimes a nurse feels she has very little role to play in the rehabilitation of an alcoholic person. But this is not true. Her role may be different but is not less important. The nurse is a highly respected individual in Indian society especially in the illiterate population. By virtue of her constant contact with the patient and his family Public Health Nurse is the one who is engaged in the rehabilitation process right from the first contact with the alcoholic. She makes frequent home visits to see her patients. She thus has a unique opportunity to see alcoholics in their true colours, their relatives, family set-up and their environment. She definitely is of great help to her patients and their relatives, but she will be doing a great service if she could pick up the early cases of alcoholism and advise them to get themselves treated.

Nurses can make an effective contribution to the rehabilitation of alcoholics if they keep the following points in mind.

- a. They should study and frequently evaluate their work.
- b. They should work closely with others in the community who are also concerned with the same problem.

- c. They should make optimum use of existing resources.
- d. They should guide patients and their families in taking intelligent action and supplying needed reassurance.
- e. They should interpret to the patients and their family members whatever aspect of the problem needs explanation.
- f. Their experience should prove of value in informing community leaders about the need for adequate facilities and personnel.
- g. They should support the establishment of programmes for the rehabilitation of alcoholics.

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