

A.A. is our

MAINSTAY

Stay with us

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P.O. Box 398, Palmerston North.

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ALCOHOLISM AND ALCOHOLICS ANONYMOUS.

(This was Dr. Caughey's editorial in the June 1955 N.Z. Medical Journal)

The problem of alcoholic addiction with its train of physical disabilities, absenteeism, broken homes and delinquency is a major one in this as in other countries. Owing to the usual high proportion of 'protected' alcoholics it is difficult to assess the size of the problem and most statistics must be suspect. There are no reliable estimates of the incidence in New Zealand but if an overseas statistical estimation can be applied, then the total expected number of alcoholics is 20,000 or more. The U.S. National Committee on Alcoholism has defined the alcoholic as follows: "The alcoholic is one whose drinking causes a continuing problem in any department of his life. Since alcoholism is a progressive disease, the time inevitably comes when the urge to drink is completely uncontrollable; when the victim, once he begins to drink, stops only when he is too drunk to continue. His compulsion literally forces him to drink to drunkenness again and again even when he is fully aware that he is damaging himself physically and mentally, destroying his family life, ruining his business and withal finding no pleasure in his drinking. This progressive illness, if left untreated grows more severe year by year and may lead to death or to an organic psychosis".

The pattern of drinking of the alcoholic is constant in most instances and passes through clearly defined stages. Usually in ten to twenty years fully developed alcoholic addiction develops. Early evidence of the disorder is to be seen in fixed drinking habits. Alcohol becomes necessary before all social events and to alleviate tiredness, depression and anxiety. Gulping of drinks and avid drinking may be apparent from the outset, surreptitious drinking develops and attempts are made to conceal from others the quantity of alcohol consumed. In the next stage, early symptoms become exaggerated. The times for drinking are extended, drinking alone and morning drinking becomes a feature. Bouts of drunkenness lasting days may occur and drunkenness begins to interfere with the individual's occupation. Alcohol may be concealed in different parts of the house or at work. Changes become apparent in the mental status. Irritability and anxiety develop and periods of complete amnesia occur. Drunkenness to a state of incapacity becomes frequent. In the last stages of this progressive illness the alcoholic drinks constantly and is in a state of intoxication at all times. Food intake is reduced and eventually evidence of avitaminosis develops. As a result of progressive hepatic damage normal detoxication is impaired. Cerebral function is impaired by avitaminosis and a direct toxic action of alcohol. Finally, as a result of this disturbed cerebral metabolism an organic psychosis with chronic toxic delirium develops.

In the past treatment of this addiction has been singularly unrewarding and ineffective. The psychotherapists have helped a limited number of patients and various aversion treatments such as apomorphine and 'antabuse' have had a limited scope. The latter is a dangerous drug and must be used only under careful supervision.

Undoubtedly the greatest contribution in the field of alcoholism over the past two decades has been made by the organisation known as Alcoholics Anonymous (AA).

From its inception in 1953 until 1963 the total number of cured alcoholics in AA was estimated at 128,632. In New Zealand in the past decade, AA groups have been formed in the main towns and in 1954 cured alcoholics numbered 282. Members of Alcoholics Anonymous are all cured alcoholics and the core of this successful organisation is a 'twelve step' programme. The whole is fundamentally religious in its concept. Prospective members come to admit that they are powerless over alcohol and express a sincere desire to stop drinking. Their belief is that it is only by turning to God or to some 'power greater than themselves' that they can control their drinking. When this profession of faith is made drinking ceases to be a problem and other faulty attitudes to life can be corrected. Finally as a result of this profound psychological change individuals reinforce their convictions by assisting in the rehabilitation of other alcoholics.

Those in the profession who have personally observed the profound and lasting effects of this programme in cases where so often psychiatry and other methods have failed, must realise there is new hope for the alcoholic which has been made available through this movement. Medical men must continue to play an active role in treatment. Some still have to discard the traditional attitude to the alcoholic as a 'drunk' and must come to regard him as a sick man who requires hospital treatment and detailed medical care. A period in hospital of two or three weeks is ideal during the 'drying out' process. Alcohol is stopped completely, adequate fluids and a normal diet is given and full vitamin therapy by injection and by mouth plays an important role in the prevention of acute alcoholic delirium which in the past has been featured during the period of withdrawal. Under these conditions in hospital, the patient is placed in a setting best suited for a complete physical and psychiatric assessment and favourable for the presentation of the AA programme. From the outset recovered alcoholics of AA can play a leading part in the programme by their understanding and insight into the patients' problems and by offering friendship to a patient who invariably has become lonely and depressed. Various publications such as 'Alcoholics Anonymous' and 'Twelve Steps and Twelve Traditions' are important as a means of presentation of the recovery programme and attendance at the regular meetings of the society serve as a form of group therapy which is invaluable.

Alcoholics Anonymous have a great deal to teach us as medical men in the understanding and management of the alcoholic and by a closer co-operation with this organisation the results of our treatment of alcoholics can be expected to improve.

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'Alcohol has always been a trouble-maker.'

Instructions to a ship-master re care of cargo (1892) -

Care of cargo:- This is so important that we must urge upon you to see to it personally as far as you possibly can. When you have general cargo on board it is almost certain to include intoxicants and strict watch must invariably be kept on the stevedores to prevent pillage and the vexatious claims consequent thereon. It is unnecessary for us to warn an experienced ship-master like yourself to take every means you can devise to prevent broaching by the crew, an occurrence far too common and fraught with terrible consequences.

A ship-master's advice to his first-voyager son 1892.-

Two things have created all the disturbances I have ever seen at sea, and I have been 37 years at sea, 25 of which I have been in command. I have been all over the world and in all classes of ships from 4,000 tons down to 50 tons- and in all this long experience nine-tenths of all unpleasantness at sea arose from these two things: alcohol and bad food. Bad food you cannot avoid if you are unlucky enough to join a poorly found vessel. But alcohol you can and must avoid.

"The Way of a Ship" - Alan Villiers.

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TOLERANCE.

The most lovable quality any human being can possess is tolerance -

It is the vision that enables one to see things from another's viewpoint -

It is the generosity that concedes to others the right to their own opinions and their own peculiarities -

It is the bigness that enables us to let people be happy in their own way instead of our way.

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Remember this - we carry the message, not the alcoholic.

Palmerston North's Public Meeting. Excerpts from the Press reports:-

Three per cent of the total number of social drinkers in any community become alcoholics, but of these fewer than 20 per cent are real 'down and outs' who are picked up in the gutter'. Alcoholism is a disease which usually has only two outlets-- insanity or death. It is my belief that a drinking alcoholic is as sick as a man with cancer. I would say he is sicker than a man with any medical disease. Unless something is done it usually ends in insanity, for alcoholics are usually tough fellows and tigers for punishment - and we certainly take a lot of it. It is not suggested that Alcoholics Anonymous is the only answer to alcoholism, but it is an effective one. So far as medical science is concerned there is no cure. It is the hidden nature of the disease which makes cure so difficult, for it is seldom that an alcoholic with a terrific capacity for liquor, was found drunk in the streets. While it is true that some, in their latter stages, did come before the law for drunkenness, there are many more still holding responsible jobs in several walks of life who are just as much a cause for concern. Many alcoholics believe that when they stop drinking everything will be alright - we have been told that so often. But a body badly burned by alcohol does not recover overnight. It is a long and trying process, a difficult period when the alcoholic needed help from doctors, psychiatrists and churches, besides contact with other men in the same plight. In a family circle the cure of alcoholism needed mutual effort with other members developing an attitude in keeping with their understanding.

The Press reports also covered the informative introduction by Mr. Inglis SM, to whom we are deeply grateful. Many of the visiting AA's afterwards commented on the fact that a Non-AA, particularly a busy public man, had made himself so conversant with AA, its problems and functioning. There were about 150 non-AA's present and the speakers were George from the Lower Hutt, Justin and Ian.

I don't want it to appear that we are skiting or that we are unnecessarily critical of others, but I would like to mention that the report of this meeting was three-quarters of a column of solid AA, whereas cuttings sent to us of other meetings have often been filled up with a doctor's discussion of the disease. It seemed to me in those other cases that the point had been lost - the meeting was not 'carrying the message'. Ian further emphasised this for me when I asked him if I should arrange for a doctor to speak here and he said, "No. It's us recovered alkies they want to hear."

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N.E.S.A. The National Educational Society on Alcoholism (Inc.) has now been established with headquarters at Sandford House, Hanover Street, Dunedin. Our Ian is now with them in a secretarial and organising capacity and we wish him well in this new sphere. Incidentally, if some of us are feeling a little inadequate in our Twelfth Step work, I should think that financial support of N.E.S.A. would come under the category of 'helping to carry the message'. N.E.S.A. is also already operating in Auckland and under Ian's guidance we hope will soon extend its shpere.

Where is AA in New Zealand?

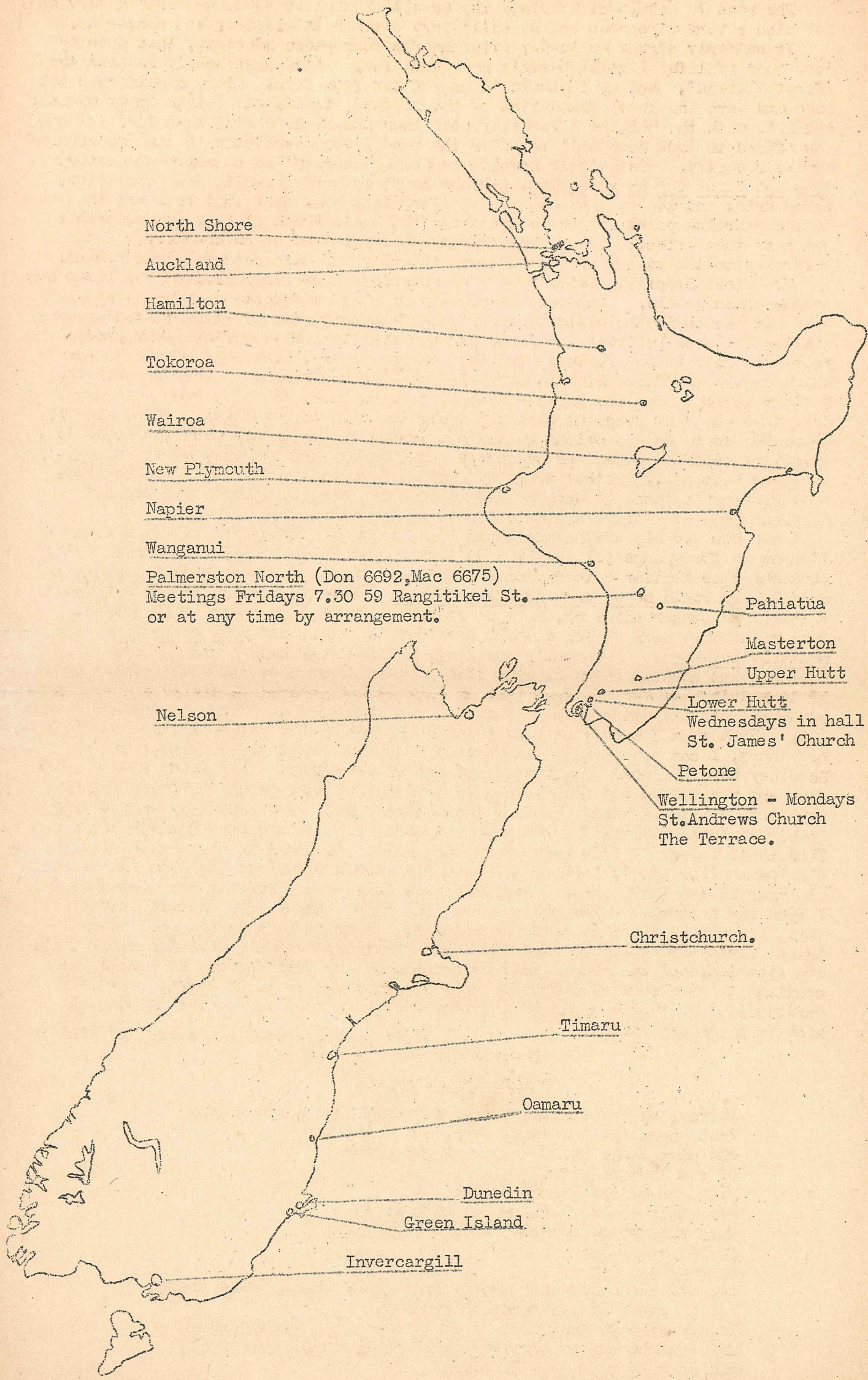
Overpage we are printing a map of New Zealand. It could be a tourist map, and for the AA tourist it could be a good map - if it was completed. If you have a look at it you will soon cotton on to the idea. If you think it is any good, let us have the information from you as a group or a loner to complete the detail as to meetings or how to find you. I know some AA's don't bother about meetings when they are travelling or on holiday, but perhaps they are the ones who are a bit lax about meetings when they are at home too. That still leaves a whole lot of us who do believe in meetings and who just for the sheer pleasure of it, like to meet other AA's, and we don't all know just where to find them. So a nicely completed map will show us all where the rest of us are.

The Point of View.

A chap says to me the other day that the difference between a pessimist and an optimist is merely in the point of view. The pessimist says he is half empty and the optimist says he is half full. It struck me when I was typing the front page that Proff. Caughey's view differed from my alcoholic view. Rather than drunkenness interfering with my occupation, my alcoholic view was that drunkenness and my occupation were interfering with my drinking.

A man helping another into a taxi and the intoxicated one was heard to declaim:
"I've got one virtue, anyhow, I won't drink with any members of Alcoholics Anonymous."

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North Shore

Auckland

Hamilton

Tokoroa

Wairoa

New Plymouth

Napier

Wanganui

Palmerston North (Don 6692, Mac 6675)

Meetings Fridays 7.30 59 Rangitikei St.
or at any time by arrangement.

Pahiatua

Masterton

Upper Hutt

Lower Hutt

Wednesdays in hall
St. James' Church

Petone

Wellington - Mondays
St. Andrews Church
The Terrace.

Nelson

Christchurch.

Timaru

Oamaru

Dunedin

Green Island

Invercargill

The Twelve Steps....The Twelve Plateaux.

The road to permanent Sobriety is, as all alcoholics know, not only a hard one, but also a very strenuous one as well; very often both slippery and dangerous.

It suddenly struck me to-day after nearly four years Sobriety, that upon my 'new road of life' I still haven't gone very far. I've just barely reached the 'First Plateau', and my foothold is as yet far from firm. I am barely over the edge and onto the level foundation of the plateau itself, but thanks to my Sponsor and A.A. with the help of a Power greater than Man, I have come that far. I can now afford to look down hill and over the road I've travelled with some measure of humble security. Definitely humble, because 'security' as commonly understood does not exist for an alcoholic. (Anyone doubt my word? ..well, take one teeny, weeny drink and see what happens.) I often look back over that road all the way to the starting point: to the point where the Magic Force of A.A. imperceptibly began to take effect. What I see beyond that point makes me shudder. I am referring to the valley of destruction, iniquity and degradation I left behind.

The First Step: We admitted we were powerless over alcohol...and our lives had become unmanageable. The very simplicity of that statement has often staggered me. It has in it the ultimate experience from centuries of stark tragedies of a million failures by trial and error and has finally achieved Victory by proving there can only be one failure; and that is not to try. The only saying I know which equals the First Step in pathetic grandeur and humble majesty is what the Saviour uttered upon the Cross - Father, forgive them; for they know not what they do. Reverse that poignant plea and apply the same to ourselves. What else is there for us to do - provided we are not insane enough to approach the issue in a spirit of self-deception and hypocrisy - but humbly and honestly admit 'we are done and beaten'...in other words by saying, Father, forgive me, I did not know what were my actions. (I have no excuse even if, morally speaking, I was not responsible - if I drink again that will no longer be so).

I can now clearly see, after these long, hard and struggling years, that when I 'threw in the sponge', I really didn't know what I was doing. And truth being stranger than fiction - thank God I didn't - because if I had thought I knew, I very likely would never have admitted defeat. When we arrived at the conclusion we could no longer carry on, most of us were more or less 'physically sober', some might have been so for quite a considerable time, but none of us were mentally balanced. Personally speaking, I definitely know I was in such a confused and chaotic state of mind that I would never have 'made the grade' at all if it hadn't been for the fact that my Sponsor had managed to strike a spark in my sub-conscious and prepared me for what I was to meet when I came in contact with A.A. From what I myself can dimly remember, but mainly from reliable observations by others, I can now plainly see that at least the first twelve months of my Sobriety were the most dangerous of my entire existence. For every minute of the day, and very often the nights too, my very future hung in the balance, and by a very thin thread at that. During those days I must have been very like a baby in arms: unbeknown to myself I was being watched, guarded and coaxed with gentle but firm tactfulness. It's not a very easy matter to admit defeat, especially for an old seaman like myself (and we all know old seamen are about the most independent old codgers under the sun). Nevertheless, only when I finally did just that did I make any headway. I've often heard 'The First Step is the most important'. Well, I'm not prepared to offer an opinion. I do know, however, the 'other human being' who helped us over the first 'Barriers' was the most important then. I'm also inclined to believe that he or she, as the case may be, as a rule will continue to have a great influence upon our progress as we go along. And I'm definitely sure we can never be grateful enough to that person for drawing us back from the precipice.

Bill, from Wellington, N.S.W., Australia.

DRINK! DRINK! DRINK!

Listen, my friend, ... before you have that first drink,
Just pause for a moment, stop, and think ...
Ah! mine enemy has me again on the brink
Of his torture pit
With his Drink! Drink! Drink!
This then is his cunning enticing tool,
This with which he makes me a raving fool,
My brain a pulp,
My body a sump,
Listen! feel that poor heart, that heavy thump, thump thump,
Men to sneer at me, women to shudder,
If cursed with this Milk of Death from the Devil's udder,
And when he has my carcass spreadeagled to rot and stink,
His mocking epitaph will echo,
Drink! Drink! Drink!

Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

The only requirement for membership is an honest desire to stop drinking. A.A. has no dues or fees. It is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

The A.A. Program of Recovery is incorporated in

The Twelve Steps

Step One: We admitted we were powerless over alcohol . . . that our lives had become unmanageable.

Step Two: Came to believe that a Power greater than ourselves could restore us to sanity.

Step Three: Made a decision to turn our will and our lives over to the care of God as we understood him.

Step Four: Made a searching and fearless moral inventory of ourselves.

Step Five: Admitted to God, to ourselves and to another human being the exact nature of our wrongs.

Step Six: Were entirely ready to have God remove all these defects of character.

Step Seven: Humbly ask Him to remove our shortcomings.

Step Eight: Made a list of all persons we had harmed and became willing to make amends to them all.

Step Nine: Made direct amends to such people whenever possible, except when to do so would injure them or others.

Step Ten: Continued to take personal inventory and when we were wrong, promptly admitted it.

Step Eleven: Sought through prayer and meditation to improve our conscious contact with God as we understood him, praying only for knowledge of his will for us and the power to carry that out.

Step Twelve: Having had a spiritual awakening as the result of these Steps, we tried to carry this message to alcoholics and to practice these principles in all our affairs.

THE A.A. PRAYER . . .

God grant me
the **Serenity**
to accept the things
I cannot change.
Courage to change
the things I can,
and **Wisdom**
to know the difference