

Supported alcohol withdrawal treatment (page 1 of 3)

Alcohol Liaison Service

This leaflet has been given to you because you may be experiencing symptoms related to your alcohol use. You will be referred to the Alcohol Liaison Nurse who will support you during your stay.

What is Alcohol Withdrawal Syndrome?

If you are dependent on alcohol and suddenly stop drinking, or you are admitted to hospital where you cannot drink you may begin to experience Alcohol Withdrawal Syndrome.

Alcohol Withdrawal Syndrome is a series of symptoms which can include:

- tremors or shaking
- sweating
- nausea / vomiting / diarrhoea
- irritability / anxiety / panic
- hallucinations (seeing, hearing or feeling things which are not there)
- confusion
- fits.

While it varies from person to person the symptoms usually occur within 4 - 12 hours of your last alcoholic drink and are often at their most severe within 48 - 72 hours.

To understand how best to treat any withdrawal symptoms various things need to be considered. These might include the severity of any symptoms, any illnesses, your age, the influence of any medication and your lifestyle as well as the results of blood tests that have been performed for withdrawal symptoms while you are in hospital.

Please tell your doctor if you have had a detox in the past and if you experienced any difficulties during the detox such as fits or confusion.

Treatment

Alcohol Withdrawal Syndrome is usually treated with two types of medication to prevent your physical and mental health becoming worse. Medication is not always necessary for everyone and depends on their symptoms and the severity of their alcohol use. Benzodiazepines (usually Chlordiazepoxide) are the recommended drugs for management of



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: customer-care@salisbury.nhs.uk

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: www.salisbury.nhs.uk/FriendsFamily or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

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alcohol withdrawal. These drugs help to prevent symptoms of alcohol withdrawal and they reduce the risks to you.

It is therefore important to be honest about the amount of alcohol you have been drinking, in order to get the dose that is right for you and your symptoms.

- Chlordiazepoxide is most commonly used here at Salisbury District Hospital; this may be given in a reducing dose over your stay in hospital or given as needed
- dosage of medication depends on factors including level of alcohol dependence, age, sex, weight, and current liver function
- smaller doses may be needed for mild dependence and larger doses for severe dependence
- patients at high risk of seizures or Delirium Tremens (confusion, hallucinations, & severe agitation) may need a longer period of treatment
- if you feel sweaty, shaky, agitated or confused during your treatment please tell your nurse as you will be prescribed extra doses of Chlordiazepoxide between the regular times; we want you to be as comfortable as possible
- if you wish to leave the ward at anytime, please let your nurse know. They may ask that you are accompanied as you may be unsteady on your feet.

Thiamine

- Thiamine deficiency is common in people who misuse alcohol as their diet is usually poor and they become malnourished. Stomach irritation caused by regular alcohol consumption can cause poor absorption of vitamins
- this can lead to a condition called Wernickes Encephalopathy which affects the brain and nervous system (symptoms can include loss of muscle control & mobility, memory loss, drowsiness & confusion)
- if left untreated Wernickes Encephalopathy can lead to irreversible brain damage called Korsakoff's Syndrome where symptoms are permanent often leaving patients unable to look after themselves
- it is recommended that patients undergoing a managed withdrawal within the hospital are given high potency B complex vitamins (Pabrinex) via a drip. This may be given 3 times a day for 3 to 5 days
- if someone is healthy and well-nourished and their alcohol withdrawal is uncomplicated oral doses of thiamine and vitamin B compound strong may be considered in divided doses
- an initial prescription of thiamine will be provided for you on discharge to help prevent any deficiency in the future. Your GP will be able to prescribe this.

Discharge and follow up

It's important that you do not consider the end of your hospital stay as the end of your treatment; this is the beginning of your recovery journey.

- the Alcohol Liaison Nurse (ALN) can refer you to community alcohol services to obtain ongoing treatment and support for your alcohol issues and will discuss your options during your stay
- counselling and support after withdrawing in hospital is essential to enable you to maintain the alcohol reduction or abstinence achieved while you were in hospital
- being with someone who has an alcohol issue or dependence is stressful and affects the well-being of people close to or caring for them. There are family and carer support services available
- the ALN will offer up to 3 out-patient appointments to check on your progress if you decide you want to continue to be abstinent from alcohol or moderate your intake. This will act as a bridge between hospital and community support
- we encourage you to contact your GP for monitoring and support of your treatment.

Useful numbers

Wiltshire Substance Misuse Service (Turning Point) ☎ 0345 603 6993

For Families (carer and family support) ☎ 01747 832 015

Alcoholics Anonymous (AA) ☎ 0800 9177 650