



## Reducing the Risk of Alcohol Use Disorders in Women

SUSANNE ASTRAB FOGGER

**A**manda is a vibrant 26-year-old woman. She teaches in an elementary school, plays tennis weekly with her husband and hopes to become pregnant within the next year. She enjoys drinking socially with her husband and friends on the weekend. Occasionally, she has drunk heavily and has memory gaps for those events. She is concerned and has made an appointment to talk to her primary care provider to seek advice. Her story is illustrative of the important role of nurses in helping women reduce their risk of alcohol use disorders.

### Women and Alcohol

Nurses help women every day to examine their lifestyles and consider changes that can promote optimum health. When the question is about drinking alcohol, what is the appropriate recommendation? Alcohol is enjoyed by many and is part of the social fabric in many countries. Within the United States, 88 percent of the population has had alcohol in their lifetime (Cava-cuiti, 2011). About 60 percent of women in the United States have at least one alcoholic drink per year (National Institute on Alcohol Abuse

**Abstract** Nurses and other clinicians help women to examine their lifestyles and consider changes to promote optimum health. When the question is about drinking alcohol, what is appropriate to recommend? While moderate intake may be beneficial for cardiovascular and bone health, drinking more than the recommended amount increases the risk of harmful effects. This column examines guidelines for moderate alcohol consumption for women, reviews the assessment process and demonstrates an example of a brief intervention. A program of screening, brief intervention and referral to treatment (termed SBIRT by the Substance Abuse and Mental Health Services Administration) should be part of the standard assessment for every woman. Ongoing assessment of alcohol consumption can help to better target behaviors for early intervention. DOI: 10.1111/1751-486X.12249

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and Alcoholism [NIAAA], 2008). Men tend to drink more heavily and more frequently than do women, yet the effects of alcohol on women are more severe and occur at an earlier age when compared with men drinking the same amount (Ceylan-Isik, McBride, & Ren, 2010).

While alcohol in moderation can be beneficial to cardiovascular and bone health, drinking more than the recommended amount increases the risk of harmful effects such as increased risk for breast cancer, liver disease and accidents such as falls (NIAAA, 2008). This column examines guidelines for moderate alcohol consumption for women, reviews the assessment process and demonstrates an example of a brief intervention. Understanding the difference between

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### Why Can't Women Drink Like Men?

When a person drinks an alcoholic drink, 10 percent to 20 percent of the alcohol is absorbed through the stomach wall. An empty stomach will absorb alcohol faster than if a meal has recently been eaten. The stomach produces the enzyme alcohol dehydrogenase, which begins breaking down alcohol into the toxic metabolite acetaldehyde. The remainder of alcohol is absorbed through the small intestine, distributed throughout the body and eventually metabolized in the liver.

Highly water-soluble, alcohol is dispersed throughout all tissue in the body. It is distributed more widely in men as they have more muscle mass (which as a high water content) than women, who have less muscle and a higher fat content (which has a lower water content). After one drink, peak alcohol levels are reached in about 60 minutes (Cowan & Su, 2015).

Women are at greater risk for alcoholic liver disease for several reasons. Women have less muscle mass, so alcohol concentrations are higher, and they have significantly less alcohol dehydrogenase than men (Cowan & Su, 2015). Frezza et al. (1990) discovered that the gastrointestinal tissue of women contains little alcohol dehydrogenase, which is responsible for the first pass metabolism of alcohol. Women have approximately 70 percent to 80 percent less alcohol dehydrogenase than men. To put it into perspective, if a man and a woman were equal in size and weight, the woman would have a 20 percent to 25 percent higher blood alcohol level than the man's after ingestion of the same amount of alcohol (Cavacuiti, 2011; Cowan & Su, 2015). The limited ability of women's bodies to undergo this first-pass metabolism adds to their vulnerability to alcohol.

### Screening for Alcohol Use

Screening women for their alcohol use is often overlooked in the assessment process. It may be perceived as too time consuming, judgmental or outside the focus of the visit. While a small percentage of the population has an alcohol use disorder, about 25 percent of the population consumes alcohol in the "at risk" level (NIAAA, 2010). The intention is to intervene to decrease the high-risk behavior. Adopting a simple screening technique can rapidly assess a person's drinking pattern. The NIAAA has a three-question screen that can quickly assess alcohol use:

1. How many days per week do you drink alcohol?
2. On a typical day when you drink, how many drinks do you have?
3. What is the maximum number of drinks you have had on any given day in the past week?

If a woman doesn't drink alcohol, then screening is complete. However, it may be helpful to inquire about her decision not to drink. Understanding the rationale for not drinking is important as it may be related to religious belief, a dislike for the taste or perhaps underlying family dynamics. Alcohol use disorder has a highly inheritable genetic component and alcohol-related problems run in families. In addition, it's important to note that alcohol and

Susanne Astrab Fogger, DNP, PMHNP-BC, CARN-AP, FAANP, is an associate professor and the track coordinator of the Psychiatric Nurse Practitioner Program in the School of Nursing at the University of Alabama in Birmingham, AL. The author discloses receiving grant funding from the Substance Abuse and Mental Health Services Administration (SAMHSA). Address correspondence to: sfogger@uab.edu.

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