



# Harm Reduction Strategies for Alcohol Dependence

If you experience withdrawal symptoms such as **shaking, sweating, nausea or headache** after several hours without a drink, please do not stop drinking suddenly as these signs mean that you are likely to be physiologically dependent and you will go into alcohol withdrawal. Alcohol withdrawal can be fatal and has serious complications if undertaken without medication, like seizures and confusion with hallucinations.

Your goal should be to cut down and gain some control of your drinking by moving to treating alcohol as a medicine. What this means is spacing out your drinks to manage withdrawal symptoms. We expect the benefits of this to be:

- 1.) Having a lower risk of running out of alcohol and going into untreated withdrawal
- 2.) Reducing the damage alcohol does to your body, as this is dose related.

Start with a drinking diary: write down each drink you have when you have it and find out how many units it has in it. Start measuring your drinks if you are drinking from a bottle of spirits or wine. Unit calculators are easily available on the Internet or via phone apps. Alternatively, the % alcohol on the side of the bottle or can represents the amount of units in a litre.

Try to space out your drinks, particularly in the middle of the day while keeping your drinking at the start and the end stable.

**Once you have stabilised your daily intake for one week, start to cut down slowly.**

**Cut down by no more than 10% of your total units per day:**

Tot up your total amount drunk in units per day. Then work out how much less you need to drink each day to cut down by no more than 10% per day.

Ideally, cut down by 10% every four days, particularly those drinking more than 25 units per day.

If you start to experience withdrawal symptoms, this means you are cutting down too rapidly. Stabilise for one week and then cut down by 5-10% each week.

**Tips to help you taper your alcohol intake:**

1. Enlist the help of loved ones – if they can help to measure or monitor, and keep the alcohol, it will be easier for you.
2. Transition to a lower strength drink: e.g. replace one can of your high strength lager with a standard strength lager
3. Measure out your drinks
4. Add water or a mixer to drinks or alternate soft drinks with alcohol
5. Pay attention to your diet – limit sugar intake, eat brown rice and wholemeal bread as your thiamine requirements are likely to increase
6. Make sure you are taking your thiamine three times a day every day
7. Keep well-hydrated
8. Seek support e.g. via online AA meetings, telephone 1:1s with keyworker



**Please tell people you live with that if you experience a seizure, become confused, start to see or hear things which others cannot hear, develop double vision or become unsteady on your feet, they should call an ambulance.**

If you reach a stage where you are drinking less than 10 units a day, you could try to cut down further and stop, with telephone advice from your addictions team. Please do not attempt this if you have a history of seizures or seeing things when you come off alcohol.

## **Resources:**

- 1.) Online free CBT resource aimed at reduction: <https://www.downyourdrink.org.uk/>
- 2.) AA – link to online groups: <https://www.alcoholics-anonymous.org.uk/members/regional-&-localwebsites/Not-in-a-Region/Online-Groups/Meetings>
- 3.) NHS website about alcohol misuse: [www.nhs.uk/conditions/alcohol-misuse](http://www.nhs.uk/conditions/alcohol-misuse)

## **Local Contacts**

### **Care Grow Live (CGL)**

Telephone Number: 0121 227 5890

e-Mail: [Birmingham.info@CGL](mailto:Birmingham.info@CGL)

Website: <https://www.changegrowlive.org/drug-and-alcohol-service-birmingham>