

ALCOHOL AND YOUR HEALTH

How much is it safe to drink?

People generally overestimate the share of their peers who drink. In New Mexico, a majority of the adult population abstains: just 49% reported having consumed a drink in the previous month.

Drinkers' beliefs about what constitutes safe and appropriate levels of consumption are powerfully shaped by drinkers around them. Hence the old joke, "The definition of an alcoholic is someone who drinks more than their doctor." Allowing norms to guide your behavior is problematic because people tend to associate with people who have similar drinking habits, and heavy drinkers gravitate to heavier drinkers as their companions.

The science is increasingly clear that alcohol use confers [no health benefits](#) and any level of consumption poses risks. But there are objective measures for the amount of alcohol you can consume before those risks markedly increase.

Beer, wine, and liquor all contain the same intoxicating ingredient, ethanol, which affects every organ in the body in proportion to the volume one drinks. Due to their different concentrations, a 12-ounce beer (at 5% ABV), a 150 ml-glass of wine, or a 1.5 oz-shot of 80-proof liquor each contain about the same amount of alcohol and are therefore equivalent to one 'standard drink'.

Experts currently recommend that men limit their consumption to two drinks a day and women to one. That's because alcohol has a more profound impact on women than men: for any given quantity consumed, women reach higher blood alcohol levels than men and experience more profound effects. The National Institute of Alcohol Abuse and Alcoholism defines [heavy drinking](#) as 14 drinks a week for men and seven drinks a week for women.

What are signs of alcohol use disorder?

Scientists have discarded the notion that drinkers can be easily divided between those who consume responsibly and 'alcoholics' who can't. In 2013, the American Psychiatric Association revised its diagnostic criteria to describe alcohol use disorders as a continuum ranging from mild to severe, all ["characterized by an impaired ability to stop or control alcohol use despite adverse social, occupational, or health consequences."](#)

There are a number of tools for diagnosing alcohol use disorder but one of the simplest follows the acronym CAGE:

- Have you ever felt you should CUT down on your drinking?
- Have people ANNOYED you by criticizing your drinking?
- Have you ever felt bad or GUILTY about your drinking?
- Have you ever had an EYE-OPENER in the morning to steady your nerves or to get rid of a hangover?

Answering 'yes' to any two of these questions is highly predictive of having an alcohol use disorder.

There are also online tools for quickly [screening your own alcohol use](#) and exploring the risks your current level of consumption has for your health.

How can I help a loved one find motivation to change?

Like someone with another chronic illness such as diabetes or asthma, a person with an alcohol use disorder may not at first feel motivated to alter their long-standing patterns of behavior.

According to Dr. Larissa Lindsey, director of clinical services at UNM's Alcohol and Substance Abuse Program, allowing the patient to wait for motivation "can lead to a deepening of unhealthy patterns that can send someone down a much harder road and possibly a much worse outcome."

Instead, friends and family can encourage the person to find that motivation, but it is generally unhelpful to criticize, admonish, or shun. According to William Miller, a UNM professor emeritus, "When you tell an ambivalent

person what they should do, their natural, normal response is to say why they don't want to do it and why it's not important. And if you persist in that, you essentially are helping the person talk themselves out of making a change.”

It is more persuasive to do “exactly the opposite,” said Miller, by asking the person to talk about their drinking and its consequences, and helping them talk themselves into changing. He advises friends and family to talk about the impacts of alcohol use without judgment, to offer options and support, and to convey to the affected person that they can and deserve to make the change.

Where can I find help?

Statewide

- Various search engines can help locate treatment services in your community: one is hosted by [the National Institute for Alcohol Abuse and Alcoholism](#) and another by [the U.S. Substance Abuse and Mental Health Services Administration](#).
- The state’s Behavioral Health Service Division also has [a search engine for finding local treatment providers](#).
- [Alcoholics Anonymous](#) chapters host meetings every day across the state. Not everyone embraces the 12-steps approach but for some it can be a powerful community of support.
- [SMART Recovery](#) is an alternative community that is not 12-steps based.

Albuquerque

- [UNM’s Addiction and Substance Abuse Program](#) is a comprehensive treatment facility: 505-994-7999
- At [UNM Psychiatry Department’s alcohol specialty clinic](#), clinicians-in-training provide outpatient treatment under the supervision of seasoned academic staff: 505-277-5165

Santa Fe

- [The Santa Fe Recovery Center](#) is just one of many treatment providers in the area, offering clinically managed residential care among other services: 505-471-4985

Online

- [Moderation Management](#) is an online community of people who want to cut back on their drinking but not necessarily abstain. They host meetings online and in person where members share their experiences and coping strategies.
- [Ria Health](#) is a telehealth program that offers medical consultations, online coaching, medication and other tools to help people reduce their drinking or to quit entirely. The annual program costs \$350 a month, cheaper than most rehab programs, and accepts some forms of health insurance.

Learn more

- Doctors recommend [this brochure](#) on addiction’s impact on the brain, which can help impacted families understand the science of what they are going through.