

Alcohol/Drug Abuse/Misuse

Substance Abuse and Misuse Among Older Adults

Prevention, Recognition and Help

As we get older, our bodies begin to react differently to alcohol and medications than when we were younger. Many older people take many different medications, which may not mix well with each other or with alcoholic drinks. If older adults do not adjust for these changes in their bodies and do not use medications safely, they may experience problems with substance misuse without even knowing it. Some physical and mental problems that people think are just a normal part of aging or the result of an illness may actually be caused by drinking too much, incorrect use of medications, or mixing medications and alcohol unsafely.

Talking with doctors, pharmacists, and other health professionals can help an older person and family members stop problems with alcohol and medications before they start. Being aware of the possible dangers and warning signs is important too. Those needing help with alcohol or other drug problems should talk with their doctor or nurse. Help is available, and older adults often recover from substance abuse problems better than younger people. By changing the way they use medications and drink alcohol, many older people feel better physically and mentally, and have less illness and disability.

What is substance misuse?

Substance misuse and abuse for older adults can mean many things. It includes the use of drugs that can change your mood, such as alcohol, tranquilizers, or illegal drugs. Substance misuse also includes "risky drinking" or unsafe use of medications. Any substance misuse or abuse can cause serious health problems and problems with family and friends, money, and the law.

What is risky drinking?

Risky drinking is when someone drinks alcohol in ways that may not have caused problems yet, but may cause problems if the same drinking pattern is kept up. For some older people, this can mean drinking more than the recommended amounts (listed below). For some older adults with certain health problems or who take certain medications, this can mean drinking any alcohol.

What is medication misuse?

Using any prescription or over-the-counter drug in a way that is

different from how it was prescribed is drug misuse. This includes using too much or too little, or not taking it on the schedule the doctor recommended. With over-the-counter drugs, like cough syrup or aspirin, medication misuse can mean taking more than the package says or taking it too often.

Some medications don't mix well with alcohol or with other medications. For example, it is unsafe to drink alcohol when you are taking medications for sleeping, pain, anxiety or depression. Because many medications remain in your body for many hours, even if you take a medication in the morning, but have a drink with dinner, the alcohol-drug mix may cause problems. Over-the-counter medications or herbal drugs can also cause problems when taken with other medications or alcohol.

Who is in danger of substance misuse?

A large number of older adults misuse alcohol, prescription drugs, or other substances, and this number is growing bigger. Almost one in every five older Americans drink alcohol or use medications unsafely. You don't have to drink first thing in the morning or drink every day to have problems caused by drinking. For some older people, any alcohol use can be a problem. It depends on how your body responds to alcohol, the medications you may be taking, your current health, and what else is going on in your life.

Why are the dangers different for older people?

Getting older causes changes in your body that can make you respond differently to alcohol and medications. These changes mean that there are differences between the way older adults and younger adults' bodies can handle alcohol. For example, the same "couple of beers" you may have been drinking for years can affect you differently as you get older. The same amount of alcohol or number of drinks that had hardly any effect before can now make someone feel drunk.

This means that as people get older, they can feel the effects with less alcohol (increased sensitivity) and they can't drink as much as they used to (decreased tolerance to alcohol). Also, alcohol is processed by the body (metabolized) more slowly in older bodies, so blood alcohol levels are higher for a longer amount of time after drinking. This may mean increased danger of accidents, falls, and injuries for older adults even many hours after they drink alcohol.

Older people are more likely to have at least one chronic illness. Many chronic illnesses can make people more likely to have bad reactions to

alcohol. Drinking problems can also be more hidden among older people as they are more likely to drink at home, don't have to show up at work the day after drinking, drive less after drinking, and may see friends or other people less frequently.

People 65 and older take more prescription and over-the-counter medications than any other age group in the United States. Prescription drug misuse and abuse is common among older adults because more drugs are prescribed to them and also because getting older makes the body more likely to feel the effects of drugs (just like with alcohol). Many older adults have problems because some medications don't combine well with other medications. Drinking alcohol with some medications also causes problems for many older adults.

Some prescription and over-the-counter medications can often cause bad side effects that make thinking and regular daily activities more difficult. Older adults can have more bad drug effects such as excessive daytime sleepiness, problems remembering things or paying attention, slower physical reactions, dizziness, and problems with moving normally. Sometimes drugs can cause memory problems, such as not knowing exactly where you are or what day it is (disorientation) or "acting crazy" (delirium). Sometimes, this is thought to be Alzheimer's disease even though it is a problem with medications.

What if I have a physical or mental health condition?

Drinking alcohol or using medications unsafely can make many physical and mental health problems worse. Some of the physical conditions that are made worse by drinking alcohol are liver disease, cardiovascular disease, diabetes, ulcers and other gastrointestinal problems, and sleep problems. Drinking can also slow healing and recovery from injuries and surgeries. Alcohol can also make it harder for doctors to correctly diagnosis some medical conditions.

Some mental health conditions can place a person in greater danger of developing problems with alcohol or other drugs. Some of these include depression, memory or thinking problems, and anxiety. For example, an older person who is a little depressed may start to drink more, which makes the depression get worse and increases the risk of developing a serious problem with alcohol. Alcohol can make the symptoms of dementia, such as memory loss or trouble concentrating, get worse.

Which medications are bad to take with alcohol?

Alcohol mixes badly with many medications, causing bad and serious health problems. It is dangerous to drink alcohol when taking many common medications taken for sleeping, pain, anxiety and depression. Some of the most common types of medications that mix badly with alcohol: benzodiazepines such as diazepam (Valium), lorazepam (Ativan), or prazepam (Centrax); sleeping medications such as zolpidem (Ambien); pain medications such as hydrocodone (Codeine) or oxycodone (Percoset); anti-seizure and anti-psychotic medications; and antihistamines (prescription or over-the-counter). It is important to ask your doctor and your pharmacist about drinking alcohol with any prescribed and over-the-counter medications, as well as herbal remedies.

How do I know if a loved one or I have a problem?

Problems with alcohol and medication misuse can start without anyone realizing it, but it is important to recognize problems before things get too serious. You or your family and friends might think some symptoms are just a normal part of getting older or an illness, but cutting down on drinking or stopping substance misuse can improve many conditions.

Warning Signs of Alcohol or Medication-Related Problems

- Anxiousness or irritability (feeling worried or “crabby”)
- Memory loss (trouble remembering things)
- New problems making decisions
- Difficulty concentrating or paying attention
- Lack of interest in usual activities
- Sadness or depression
- Mood swings (happy one minute, sad or angry the next)
- Chronic pain (pain that doesn’t go away)
- Problems with money or the police
- Falls, bruises, burns
- Incontinence (can’t control urinating, wetting the bed)
- Headaches
- Dizziness
- Poor hygiene (not combing hair, bathing)
- Poor nutrition, changes in eating habits (eating junk food only)
- Out of touch with family and friends
- Suicidal thoughts (wanting to kill yourself)
- Strange response to medication

Talk to your doctor about the dangers of drinking with your current or past health conditions. Find out how much you should drink while taking your medications. Be sure to ask about all the medications you are taking now or take sometimes, including over-the-counter or herbal medicines.

Self-Assessment of Drinking Patterns

Take this short quiz to see if you should be worried about your drinking. Score one point for every "YES" answer, zero for every "NO" response. Add up your score at the end.

	YES (1)	NO (0)
1. When talking with others, do you ever underestimate how much you actually drink (telling others you drink less than you do)?	_____	_____
2. After a few drinks, have you sometimes not eaten or been able to skip a meal because you didn't feel hungry?	_____	_____
3. Does having a few drinks help decrease your shakiness or tremors?	_____	_____
4. Does alcohol sometimes make it hard for you to remember parts of the day or night?	_____	_____
5. Do you usually take a drink to relax or calm your nerves?	_____	_____
6. Do you drink to take your mind off your problems?	_____	_____
7. Have you ever increased your drinking after experiencing a loss in your life (someone you love dies)?	_____	_____
8. Has a doctor or nurse ever said they were worried or concerned about your drinking?	_____	_____
9. Have you ever made rules to manage your drinking?	_____	_____
10. When you feel lonely, does having a drink help?	_____	_____

TOTAL SCORE _____

Scoring: 2 or more "YES" responses indicates an alcohol problem. Talk with your doctor or contact one of the resources below to get help managing your or a loved one's drinking. You can get help or more information confidentially, without anyone you know finding out about it.

Short Michigan Alcoholism Screening Test-Geriatric Version (S-MAST-G)

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Why hasn't my doctor warned me about alcohol or medication misuse?

Some doctors and nurses tend to overlook unsafe drinking or medication use among older people, thinking that problems caused by alcohol or unsafe medication use are caused by dementia/Alzheimer's disease, depression, or other problems common to older adults. Also, older adults are more likely to hide their substance abuse and less likely to ask for help. Sometimes busy doctors will not realize that the medications they prescribe for one health problem may not mix well with other medications that a patient is taking. It is important for you to make sure your doctor and pharmacist know about all of the medications you have been taking, and for how long.

Getting older has meant fewer joys and more pain. Do I really have to give up this pleasure too?

Some people feel that the relief or enjoyment they feel from alcohol or medication misuse is one of the few pleasures they have left. However, misuse and abuse of alcohol and drugs can cause more problems for older adults than they may realize. Risky drinking can make older people lose their ability to move normally and do regular daily activities such as dressing, walking, preparing meals, and driving. Risky drinking can also increase the risk of accidents and falls, injuries, illness, or not having enough money. Older adults who try to ease their pain or sadness with drinking alcohol or taking prescription drugs are more likely to say they are lonely and are not satisfied with their lives. For many older adults, living independently (alone or with a spouse/partner) is very important. Substance misuse can also force older adults to move in with family members or to a nursing home because they cannot take care of themselves.

How much should I drink?

Some older people should not drink any alcohol at all. This depends on

your past health history, current health condition and medications, and previous alcohol or substance abuse problems.

Otherwise, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the Center for Substance Abuse Treatment (CSAT) recommend people age 65 and older consume:

- No more than one standard drink per day or seven standard drinks per week.
- No more than two standard drinks on any drinking day or occasion (wedding, New Year's Eve, etc.)

In addition, women age 65 or older should consume slightly lower amounts than those listed above as they get older. A standard drink is 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of distilled spirits ("hard" alcohol). These recommendations also fit into the current research information about the health benefits for some older adults of a small amount of alcohol (one drink per day).

What's a standard drink?

1 standard drink =

1 can of ordinary beer or ale, 12 oz.

A single shot of spirits, 1.5 oz. (whiskey, gin, vodka, etc.)

A glass of wine, 5 oz.

A small glass of sherry, 4 oz.

A small glass of liqueur or aperitif, 4 oz.

How can I get help?

The good news is treatment works for older adults. Older adults tend to recover from substance abuse problems even better than younger adults in treatment. Many older adults will have better physical and mental health and less illness and disability after dealing with alcohol and medication misuse problems. You can talk to your doctor about your drinking and medication use, and what kind of help you need. For some older adults, working out a plan with their primary care doctor can help them avoid problems with alcohol and medications. For others, their doctors can help them find the kind of help they need to fix alcohol or drug problems.

You can also talk to a qualified care professional confidentially about your own or a loved one's alcohol and medication use by calling 1-800-662-HELP (4357) (24-hour hotline of the Substance Abuse and Mental

Health Services Administration's National Treatment Referral Services) or visiting this website: www.findtreatment.samhsa.gov.

Where To Go For Help

Substance Abuse and Mental Health Services Administration (SAMHSA)

1 Choke Cherry Road
Room 8-1036
Rockville, MD 20857
Phone: 301-443-8956
www.samhsa.gov

SAMHSA National Treatment Referral Services

Phone: 800-662-4357 (24-hour hotline)
findtreatment.samhsa.gov

SAMHSA National Clearinghouse for Alcohol and Drug Information (NCADI)

Phone: 800-729-6686
www.ncadi.samhsa.gov

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

5635 Fishers Lane, MSC 9304
Bethesda, Maryland 20892-9304
Phone: 301-496-4000
www.niaaa.nih.gov

National Institute on Aging (NIA)

Building 31, Room 5C27
31 Center Drive, MSC 2292
Bethesda, MD 20892
Phone: 301-496-1752
www.nia.nih.gov

American Society on Aging (ASA)

833 Market Street
Suite 511
San Francisco, CA 94103
Phone: 800-537-9728
www.asaging.org

The information presented here is for general information only. It is NOT a substitute for the knowledge, skill, and judgment of qualified

health care professionals. If you have any mental health or medical questions or concerns, please consult a physician, psychiatrist, geriatric psychiatrist, or other health care professional.

Geriatric Mental Health Foundation

The Geriatric Mental Health Foundation was established by the American Association for Geriatric Psychiatry to raise awareness of psychiatric and mental health problems and issues affecting older adults, eliminate the stigma of mental illness and treatment, promote healthy aging strategies, and increase access to quality mental health care for older adults.

The Foundation's vision for America's aging population includes:

- Increased public awareness of the importance of mental health in the aging population;
- Removal of stigmas for those seeking mental health services;
- Increased access to quality mental health care for older adults; and
- Promotion of healthy aging strategies for all older adults, family caregivers, and others devoted to the overall health of our communities.

To achieve this vision, the Foundation's mission is to raise awareness of psychiatric and mental health problems and issues affecting older adults. The Foundation focuses on public education targeted to the health care consumer and family caregiver about mental health promotion, and illness prevention, and treatment. The Foundation develops programs to enhance communication and foster broad collaboration between the aging and mental health research community, mental health care providers, and the general public.

Older Adults & Mental Health Brochure Series

This publication is part of a series of brochures published by the Geriatric Mental Health Foundation to provide information about the mental health of the elderly. Other GMHF brochures include:

- Healthy Aging: Keeping Mentally Fit as You Age
- A Guide to Mental Wellness in Older Age: Recognizing and Overcoming Depression (A Depression Recovery Toolkit)
- Depression in Late Life: Not a Natural Part of Aging
- Depression in Late Life (in Spanish) - Depresión Tardía: No Es Una Parte Natural Del Envejecimiento
- Coping with Depression and the Holidays

- Alzheimer's Disease: Understanding the Most Common Dementing Disorder
- Alzheimer's Disease (in Spanish) - Enfermedad de Alzheimer: Entendiendo Acerca de la Demencia Más Común
- Caring for the Alzheimer's Disease Patient: How You Can Provide the Best Care and Maintain Your Own Well-Being

To view brochures online, visit www.gmhfonline.org/gmhf/consumer. Order from the website or call 301-654-7850.

Find a Geriatric Psychiatrist

A geriatric psychiatrist is a medical doctor with special training in the diagnosis and treatment of mental illnesses that may occur in older adults. These include, but are not limited to, dementia, depression, anxiety, alcohol and substance abuse/misuse, and late-life schizophrenia.

The Geriatric Mental Health Foundation can provide the names of geriatric psychiatrists. Visit www.GMHFonline.org or call 301-654-7850.

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