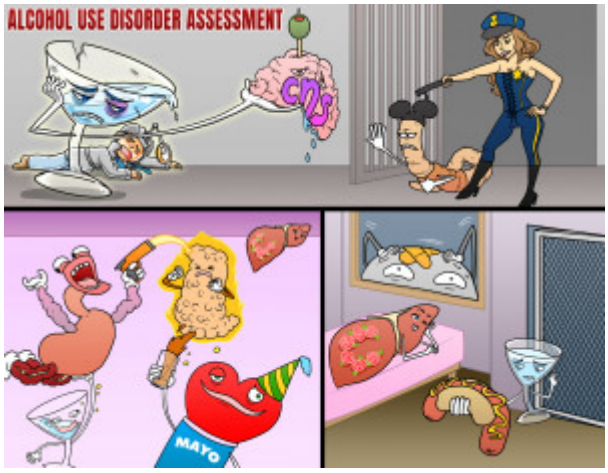
Alcohol Use Disorder Assessment (Formerly Alcohol Abuse Assessment)

Assessment of a client misusing alcohol requires knowledge of several key features and concerns. It is important to note that alcohol intoxication depresses the central nervous system (CNS), resulting in alterations in mentation, muscle coordination, and respiratory and cardiac function. With severe alcohol use, CNS depression may result in coma or death. A patient experiencing alcohol withdrawal may experience Wernicke-Korsakoff syndrome, which is characterized by Wernicke's encephalopathy and Korsakoff's psychosis. Alcohol use disorder may promote numerous medical complications including gastrointestinal irritation or bleeding, cardiomyopathy, pancreatitis, cirrhosis, immunosuppression, and sexual dysfunction.



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Intoxication

CNS Depression

Deflated CNS-brain

Excessive alcohol use can depress the central nervous system, as alcohol is a natural CNS depressant. CNS depression can cause alterations in the neurologic, respiratory and cardiac status of the patient. This can lead to trouble with speech, judgment, and muscle coordination. Severe alcohol use may result in coma or death. Blood alcohol levels are useful for assessing alcohol use disorder.

Withdrawal

Wernicke-Korsakoff Syndrome

Worm-Mickey and Corset-cop

Withdrawal symptoms can begin as early as two hours after the last drink, and can range from mild anxiety and shakiness to severe symptoms such as seizures and delirium tremens (DTs). With alcohol withdrawal, it is possible to develop Wernicke-Korsakoff syndrome, which is Wernicke's encephalopathy combined with Korsakoff psychosis. This syndrome typically occurs due to deficient thiamine (Vitamin B1) levels secondary to alcohol use disorder. The syndrome can produce vision changes, memory impairment, and dementia. Administration of thiamine often reduces the symptoms of confusion, delirium, and nystagmus, but does not improve problems with memory loss or cognition associated with Korsakoff psychosis.

Medical Complications

GI Distress

GI with Flare-gun

Alcohol use disorder can produce gastrointestinal irritation, bleeding, and inflammation of the stomach lining leading to the development of gastritis, esophagitis, or esophageal tears (esophageal varices). In addition, gastrointestinal inflammation leads to interruption in vitamin B absorption in the stomach.

Cardiomyopathy

Heart-mayo with Party-hat

Chronic alcohol use can wear down and injure the heart muscle leading to inadequate contraction of the heart and decreased oxygen delivery to vital organs. This produces alcohol induced cardiomyopathy.

Pancreatitis

Pancreas-on-fire

Alcohol use disorder is one of the most common causes of acute pancreatitis. This occurs because alcohol irritates the stomach, liver, and pancreas, producing inflammation and injuring the tissue. This leads to further difficulty with digestion and decreased production of important enzymes.

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Cirrhosis

C-roses-on-liver

Alcohol is metabolized slowly in the liver, enhancing injury of the liver and leading to liver inflammation, referred to as hepatitis, and scarring of the liver, also known as cirrhosis.

Immunosuppression

Moon-suppressed

Excessive alcohol use reduces the body’s ability to defend itself from infection, causing immunosuppression. This can occur due to impaired nutrition. Leukopenia and thrombocytopenia further lead to immunosuppression.

Sexual Dysfunction

Limp-weiner

Excessive alcohol use decreases the body's ability to function properly. Sexual dysfunction may occur in both women and men who use alcohol excessively. Men may experience erectile dysfunction, and women may experience interruptions in menstruation.

Considerations

Screening (Assessments)

Screendoor

There are a number of available screening tools, including the AUDIT and CAGE assessments. The CAGE assessment asks a series of questions, including if the patient has ever felt the need to Cut down, if the patient has ever been Annoyed with criticism about their drinking, if they have ever felt Guilty for drinking, or if they have ever started the day off with a drink as an “Eye-opener.” Two or more “yes” answers to the CAGE assessment indicate alcohol use disorder. The CAGE questionnaire is used in numerous settings, particularly hospitals, during routine admissions. The Alcohol Use Disorders Identification Test (AUDIT) is a 10-question tool that the patient answers the questions responding with a Likert 5-point scale. A score of 8 or more in men and 7 or more in women indicates problems with alcohol use.

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