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Alcohol withdrawal and alcohol detoxification

Many people who regularly drink excessive quantities of alcohol become alcohol-dependent. This can cause the body serious harm. There is a great deal of help for people who are alcohol-dependent and want to stop drinking.

If you are alcohol-dependent you have a strong desire to drink alcohol. In addition, your body becomes used to lots of alcohol. Therefore, you may start to develop withdrawal symptoms 3-8 hours after your last drink as the effect of the alcohol wears off. So, even if you want to stop drinking, it is often difficult because of the alcohol withdrawal symptoms.

Detoxification, or 'detox', is an option if you are alcohol-dependent.

Alcohol withdrawal syndrome

- Feeling sick (nausea).
- The 'shakes' (trembling).
- Sweating.
- Craving for alcohol and just feeling awful.
- Convulsions these occur in a small number of cases.

As a result, you drink alcohol regularly and depend on it to prevent these symptoms. If you do not have any more alcohol the withdrawal symptoms usually last 5-7 days but a craving for alcohol may continue for long-term.

Delirium tremens

Delirium tremens (DTs) is a more severe reaction after stopping alcohol. It occurs in about 1 in 20 people who have alcohol withdrawal symptoms, about 48-72 hours after their last drink. Symptoms include: marked trembling and agitation, confusion and seeing and hearing things that are not there (delirium). Some people have convulsions. Complications can develop, such as lack of fluid in the body (dehydration) and other serious physical problems. It is fatal in some cases.

What is an alcohol detox?

Detoxification, or 'detox', involves taking a short course of a medicine which helps to prevent withdrawal symptoms when you stop drinking alcohol. The most commonly used medicine for 'detox' is chlordiazepoxide. This is a benzodiazepine medicine. Other possible medication that can be considered includes diazepam and the antipsychotic medicines olanzapine and haloperidol, although antipsychotics should only be used in addition with benzodiazepines and not by themselves alone in the treatment of severe alcohol withdrawal symptoms.

What helps alcohol withdrawal?

Some GPs (who have been specially trained) are happy to prescribe for an 'alcohol detox'. Otherwise your community alcohol team will assist. A common plan is as follows:

- A GP will prescribe a high dose of medication for the first day that you stop drinking alcohol.
- You then gradually reduce the dose over the following 5-7 days. This
 usually prevents or greatly reduces the unpleasant alcohol
 withdrawal symptoms.
- You must agree not to drink any alcohol when you are going through 'detox'. A breathalyser may be used to confirm that you are not drinking.
- Whoever is supporting you will usually see you quite often during the time of 'detox'.

 Also during this period, support from family or friends can be of great help. Often the responsibility for getting the prescription and giving the 'detox' medicine is shared with a family member or friend. For example, a partner or parent of the person going through 'detox'.

How will I feel going through 'detox'?

Some people manage quite easily, whilst others find it more difficult. You can expect to:

- Feel quite nervous or anxious for a few days.
- Have some difficulty with getting off to sleep for a few nights.
- Have some mild withdrawal symptoms but they should not be too bad and a lot less than if you were not taking the 'detox' medicine.

The medication used for 'detox' does not make you stop drinking. You need determination to stop. The medication simply helps you to feel better whilst your body readjusts to not having alcohol. Even after the period of 'detox' you may still have some craving for alcohol. So you will still need willpower and coping strategies for when you feel tempted to drink.

Vitamin supplements

You are likely to be prescribed vitamins, particularly vitamin B1 (thiamine), if you are alcohol-dependent - especially during 'detox'. This is because many people who are dependent on alcohol do not eat properly and can lack certain vitamins. A lack of vitamin B1 is the most common. A lack of this vitamin can cause serious brain conditions.

Detoxification in hospital

Some people are referred to a specialist drug and alcohol unit for 'detox'. This is usually better for people who have other physical or mental health problems and for those who have the following:

- Little home or social support.
- A history of severe withdrawal symptoms.
- A physical illness caused by alcohol.

Previous attempts to stop alcohol which have failed.

The medicines used to 'detox' in specialist units are much the same as GPs prescribe. However, these units have more staff and expertise for giving support and counselling.

You may be admitted to hospital if you have serious alcohol-related problems such as DTs or withdrawal seizures, or if you are aged under 16 years and have alcohol withdrawal symptoms.

Other groups of people sometimes offered hospital admission for 'detox' include those with learning difficulties, social difficulties or lots of different illnesses.

After a detox - staying off alcohol

After a successful alcohol 'detox', some people go back to drinking heavily again at some point (a relapse). To help to prevent a relapse you may be offered medication or other help.

Medication

You may be advised to take a medicine for several months to help you keep off alcohol.

- Acamprosate is a medicine which helps to ease alcohol cravings. It
 is usually started in hospital and continued by GPs.
- Disulfiram is another medicine which is sometimes recommended by hospital specialists following a successful 'detox'. When you take disulfiram you get very unpleasant symptoms if you drink any alcohol. These may include:
 - Flushing.
 - Being sick (vomiting).
 - A 'thumping' heart (palpitations).
 - Headache.

So, in effect, the medicine acts as a deterrent for when you are tempted to drink. It can help some people to stay off alcohol.

- Naltrexone is an alternative to acamprosate but it is usually only prescribed by specialists.
- Nalmefene is a newer treatment available as an option for reducing alcohol consumption in people with alcohol dependence or alcohol addiction:
 - It is considered for those who have an alcohol consumption of more than 60 g per day for men and more than 40 g per day for women (8 g of alcohol is equal to one standard unit of alcohol), without physical withdrawal symptoms and who do not require immediate detoxification.
 - Nalmefene is another treatment often started by a specialist rather than a GP. Patients who are prescribed it should be regularly reviewed by a healthcare professional whilst taking it.

Other help

It is thought that you are less likely to go back to drinking heavily if you have counselling, or other support to help you to stay off alcohol. Your doctor, practice nurse, or local drug and alcohol unit may provide ongoing support when you are trying to stay off alcohol. Self-help groups such as Alcoholics Anonymous have also helped many people to stay off alcohol.

If you do go back to heavy drinking, you can always try again to stop or cut down. Some people take several attempts before they stop drinking, or keep within the safe limits, for good. See the separate leaflet called Alcohol and Sensible Drinking.

Further reading

- Alcohol-use disorders: diagnosis, assessment and management of harmful drinking and alcohol dependence; NICE Clinical Guideline (February 2011 -last updated October 2014)
- Drugs and Alcohol; Public Health England
- Sachdeva A, Choudhary M, Chandra M; Alcohol Withdrawal Syndrome:
 Benzodiazepines and Beyond. J Clin Diagn Res. 2015 Sep;9(9):VE01-VE07. doi:
 10.7860/JCDR/2015/13407.6538. Epub 2015 Sep 1.
- Alcohol and pregnancy: Patient Information Leaflet. Royal College of Obstetricians and Gynaecologists, 2018

Alcohol - problem drinking; NICE CKS, July 2023 (UK access only)

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