



The Disease Concept of Addiction

Disease: (Defined) – An illness; A particular destructive process in an organism. A condition with a specific set of **Diagnosable Symptoms**

The Disease of Addiction is often compared with cancer or diabetes which are much more “black and white” diseases (you either have them or you don’t). Rather, addiction compares better with a cold as it can be seen across a spectrum (The “sniffles” all the way to Pneumonia)

Diseases can be Physical (Cancer, AIDS, Diabetes), Psychological (Depression, Schizophrenia) or both (addiction)

“Diagnosing Addiction”: Set of symptoms listed below. One way to review this as a group is to review and discuss each symptoms and then ask clients to honestly self-report if they experienced that symptoms. For example, for A discuss what *Tolerance* is then ask group members “Who here can admit that they personally experienced *tolerance*?” You can keep track of symptoms by writing people’s initials after each symptom depending upon the size of the group.

- A. Tolerance** – Takes more and more to get same high (Has physical and psychological component)
 - 1. Physical tolerance – You physically need larger amounts of substances or stronger substances or combinations of substances in order to feel intoxicated.
 - 2. Psychological tolerance – After using substances regularly for a period, you become accustomed to doing things under the influence. (A good example is the young person who acts silly and giggles when using marijuana or alcohol who later experiences tolerance and can look an authority figure in the eye when high and easily hide intoxication)
- B. Life Impairment** – Like with any disease, you can’t work, think, function as well
- C. Preoccupation (Obsession)** – Spending increased time thinking about the substance:
 - 1. Planning the process of getting and/or using the drug into your routine
 - 2. Only associating w/others who use/sell the substance (Sober people become boring)
 - 3. Giving up activities that do not involve or get in the way of using the substance
 - 4. Cravings
 - 5. Feeling guilty about use
 - 6. Efforts to conceal use to loved ones
- D. Loss of Control: (Compulsion):** Inability to control amount and/or frequency of substance use (Using more than intended, or using when you did not intend to)
 - 1. Failed attempts to cut down or quit
 - 2. Failed efforts to make schedules to “manage” drug use without losing control
 - 3. Using alone (It’s not social any more)
 - 4. Continued use despite **NEGATIVE CONSEQUENCES** – (legal, social, school, employment, family, relationship, financial, emotional, health, physical –**PROBLEMS/CONFLICTS**)
 - 5. Blackouts, pass outs, overdoses
 - 6. Doing things one would never have previously done to obtain substance (Steal, deal, lie, cheat, etc.)



E. Denial – Efforts to cover up, minimize, rationalize, ignore, the problem despite what is happening or what others may be saying

F. Withdrawal Symptoms:

1. Physical (Short term) – Depends on drug –nausea, shakes, seizures, diarrhea, etc.
2. Psychological – (All drugs including marijuana) Longer lasting – Irritability, insomnia, emotional over-reactivity, poor concentration, stress, anxiety

G. Progressive – Like most diseases, addiction gets worse over time if not treated.

1. Progression in amount/frequency used
2. Progression in drug type (moving from gateway to “harder” drugs)
3. As use increases – problems increase – Consequences pile up
4. Potentially fatal if not treated

H. Hereditary Factors: Genetic Predisposition:– proven from adoption studies – Addiction not simply a learned behavior

I. Recovery – The Process of getting better- Requires education and lifestyle change:

1. Recovering person needs to learn about the disease and the process of recovery
2. Changing old routines (People, places and things)
3. Obtain sober support
4. Avoid return of denial
5. Learning coping skills – Taking care of co-occurring and underlying issues that played into addiction

J. Chronic – Long lasting, as opposed to acute. Often lasts many years or even decades

K. Relapse – Return to use after a period of Recovery. Thus Relapse Prevention is a large part of recovery. Repeated relapse – Chronic relapse

Closing discussion: As a group review how many symptoms that you experienced.