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PHYSICIAN'S ALCOHOL NEWSLETTER

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FIRST REPORTS FROM 29th INTERNATIONAL CONGRESS IN AUSTRALIA SHOW PROGRESS IN ALCOHOL STUDIES

Over 150 papers were presented during the two-week 29th International Congress on Alcoholism and Drug Dependence held in Sydney, Australia, February 1-14. Highlights of this conference are reported in this issue of PAN. Further reports will appear in the next issue. (Also see Guest Editorial by Dr. Albert Browne-Mayers, p. 2.)

Psychopharmacology of Alcohol and Drug Dependence

The only common denominator in all forms of drug dependence is strong psychological dependence, according to Dr. M. H. Seevers of the University of Michigan Medical School. In uninterrupted chronic doses, ethanol, like barbiturates and morphine, the two other prototypes of CNS depressants, produces development of tolerance, strong psychological and physical dependence, and psychotoxicity leading to behavior disorders during administration and following abrupt withdrawal.

In contrast, those drugs which induce a predominantly stimulating effect

on the CNS (including the hallucinogens), exhibit strong psychological but not physical dependence. Tolerance occurs to the amphetamines and to LSD but not to all stimulants. Marked psychotoxicity and psychopathology occur during drug administration but much less significantly during withdrawal.

The dividing line between alcoholics and nonalcoholics, according to Dr. Seevers, is narrow and is based almost exclusively on the behavioral responses to different quantities of the same substance. The psychogenic factors which condition susceptibility to alcoholism are common to all forms of drug dependence. For this reason, drug dependence is rarely agent-specific.

The psychopharmacological responses of the rhesus monkey are remarkably similar to those of man. Some monkeys will voluntarily self-administer as much as 8 grams/kg of ethanol intravenously each 24 hours. Strong and rapid psychological dependence develops in spite of profound intoxication.

Hyperfemininity in the Female Alcoholic

The typical female alcoholic tends to overemphasize her femininity in a defensive way, in an attempt to disguise from others her own conflict about her femininity. In the same way she attempts to disguise her drinking problem until she reaches a point of almost flaunting it. She tends to have a distinct masochistic, martyrish, long-suffering life style, compounded by marital and sexual maladjustments.

These characteristics emerged from a personality study conducted by F. T. Miller and N. E. Ely of the Alcoholism Treatment Clinic in Seattle. The Minnesota Multiphasic Personality Inventory profiles and personal interviews were used in making the evaluations. Of the 100 women studied, all were white, the average age was 40 years, most were mothers with two children, and most had been drinking about 15 or 16 years before an alcoholic pattern emerged. They usually drank in response to crisis situations such as divorce or unhappy love affairs. They also had a low stress tolerance to the everyday, mundane aspects of life. Their drinking patterns ranged from solitary drinking to the opposite extreme of "going out on the town." In an attempt to conceal their drinking, they usually drank gin and vodka.

SPEAKERS AT GLASGOW CONFERENCE LINK ALCOHOLISM AND VIOLENCE

Alcoholism in the Highlands and Islands of Scotland is associated with nearly 80% of the crimes, including 50% of the murders, high hospitalization rates, and high risks among certain occupations. On the other hand, suicide rates among Highland alcoholics are half the national rate, and 25% of the hospital admissions are not permanent Highland residents. The patterns of alcoholism in this area, where distilling is a large industry, were described by Dr. Martin M. Whittet, Physician Superintendent of Crain Dunain Hospital, Inverness, to the International Conference on Alcohol and Alcoholism held in Glasgow in September 1969. Dr. Whittet's report was based on a continuing epidemiological study of alcoholism begun in 1967.

Dr. Whittet pointed out that in the Highlands area alcohol is a traditional part of hospitality, and is not regarded as a sin but a "way of life." The ratio of male to female alcoholics is 8 to 1, whereas it is about 4 to 1 in England and

Wales. Certain occupations, such as seamen, barmen, distillery workers, and traveling salesmen are particularly subject to alcoholism.

He remarked that there seemed to be a "strange complacency about the part played by alcohol in that ultimate form of aggression known as murder." Although the legal complexities tended to obscure the relationship, a Highlands series of 26 persons accused of murder (and 5 attempted murder charges) showed that alcohol was the main precipitating factor in 50% of the cases.

Drinking Patterns Among Norwegian Seamen

Violence and alcohol are also part of the lives of Norwegian seamen, according to a report presented by Dr. Sverre Brun-Gulbrandsen, Director of the National Institute for Alcohol Research in Oslo. A Norwegian seaman typically

Attempted Suicide and Family Background

Alcoholics suffer an abnormal amount of parental loss as children, according to a study reported by K. M. Koller of St. George Hospital, Sydney. Inpatients at an alcoholic clinic were matched with a member of the general population as a control to examine the theory that early adverse experiences are related to alcoholism and attempted suicide. A significant number of alcoholics had lost both parents and had been institutionalized as children. Attempted suicides were reported among 20% of the alcoholics, whose early life experiences differed on a number of variables from those who had no history of suicidal behavior.

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EDITORIAL

Don't go to an international congress on alcoholism and drug dependence if you have a narrow or parochial point of view. One of the outstanding features of the recent 29th International Congress on Alcoholism and Drug Dependence, held in Sydney, Australia, February 1-14, was the ingenuity and originality of the many disciplines and many national groups who were represented.

Even in the midst of insufficient funding and lack of medical involvement, workers in the field have to be commended for strides they have made in a difficult and challenging situation. For instance, in a hostel for homeless men in Adelaide, Australia, where clients are kept for long periods, the directors have been able to run the facility at a cost of \$200 per year per man.

This international convention was the first where alcoholism was tied to drug dependence and many investigations showed how many similarities there are among the acting-out disorders where drugs are involved. Apparently working in the field of alcoholism helps physicians to understand dependence on barbiturates, amphetamines, marijuana, and hard narcotics. Overheard comments among some physicians seemed to indicate that papers dealing only with alcoholism were somewhat declassé.*

What with warm summer weather and the gracious hospitality of the Australian hosts, the congress was both enjoyable and stimulating. Special thanks are due to the fine planning and organizational efforts of Mr. Archer Tongue, Director of the International Council on Alcohol and Alcoholism, and Dr. Rodney Seaborn, President of the Foundations for Research and Treatment of Alcoholism of Australia and New South Wales.

The biographer of Louis Pasteur, Valéry Radot, stressed that Pasteur felt that international meetings of doctors were one of the best means of overcoming narrowminded nationalism and creating a feeling of good will. This congress proved his point well.

—Dr. Albert Browne-Mayers

* A point of view not universally entertained (FAS)

COURSES

APRIL 2-MAY 21—"Alcoholism: Continuity of Care," a seminar of 8 Thursday evening sessions, Bloomfield Avenue Campus, University of Hartford. For information, write Division of Continuing Education, University of Hartford, 200 Bloomfield Avenue, West Hartford, Conn. 06117.

BOOK REVIEWS

The Drunkenness Offense: Proceedings of an International Symposium Held at the Institute of Psychiatry, Maudsley Hospital, London.

Edited by Timothy Cook, Dennis Gath, and Celia Hensman. Oxford: Pergamon Press, 1969. 186 pp.

These papers, comprising the bulk of the first conference on the subject to be held in the United Kingdom, present a thorough and statistically credible picture of the drunkenness offense. The realization that "alcohol taken to excess does far more harm than that as yet caused by drugs," and that in alcoholism "we are witnessing the same transition as we saw, not so long ago, in the field of mental illness," is buttressed by the knowledge that Parliament gave the government power in 1967 "to abolish the penalty of imprisonment for persons being drunk and disorderly when the Home Secretary is satisfied that sufficient suitable alternative accommodation is available for their care and treatment."

The research of Dennis Gath (reported in PAN (Vol. 4, No. 1, Winter 1969, p 4), demonstrating that the drunk in court is suffering from alcohol addiction is followed by in-depth studies of offenders in prisons for men and women, English and Australian, the present facilities and future plans in England, the United States, Sweden, and in the cities of Warsaw, Prague, Paris, Milan, and in West Germany. A very telling case history of an alcoholic who after being a recidivist for years makes the turnaround in jail is presented.

MEETINGS

APRIL 1—"Professional Training on Alcoholism," an invitational conference presented as the Medical Scientific Session of the Annual Meeting of the National Council on Alcoholism. Waldorf-Astoria Hotel, New York City.

JUNE 1-6 — 16th International Institute on the Prevention and Treatment of Alcoholism, Lausanne, Switzerland.

JUNE 23-24—National Meeting of the American Medical Society on Alcoholism, Chicago.

AUGUST 7-9—Annual Meeting, International Doctors in Alcoholics Anonymous, Conference Center, The University of Iowa, Iowa City, Iowa 52240. Reservations with Director of Conferences at above address or with Information Secretary, IDAA, 1950 Valley Road, Youngstown, Ohio 44511.

The Forgotten Children: A Study of Children with Alcoholic Parents

R. Margaret Cork. Toronto: Addiction Research Foundation, 1969. \$95. Paper. 112 pp.

This is a unique study of 115 children aged 10 to 16, one or both of whose parents are alcoholics. The author, who is head of the Addiction Research Foundation's Youth Counseling Service in Toronto, believes that researchers have neglected the effect of the alcoholic on his family. She found that although a few of the children appeared to suffer physically from their parent's alcoholism, nearly all suffered emotionally. They were, however, much more concerned with the family disharmony and parental rejection resulting from the drinking than with the drinking itself.

Proceedings of the 28th International Congress on Alcohol and Alcoholism. Vol. 2: Lectures in Plenary Sessions.

Edited by Mark Keller and Timothy G. Coffey. Highland Park, N.J.: Hillhouse Press, 1969. \$7.50.

This attractively produced volume presents in a permanent form the results of the 28th International Congress Alcohol and Alcoholism, held in Washington, D.C. in 1968. Each of the 25 plenary session addresses is printed in the language in which it was presented and is accompanied at the end of the book by an abstract in the alternate language, English or French. Included are reports on physiological, medical-psychiatric and sociocultural research, as well as discussions of alcohol problems and programs in several countries (U.K., Australia, Scandinavia, U.S.A.).

Summer Institutes

JUNE 14-19—University of Utah School of Alcohol Studies. Information from Box 473, Salt Lake City, Utah 84110.

JUNE 21-26—New England School of Alcohol Studies, University of New Hampshire, Durham, N.H. Information from University Extension Service, Huddleston Hall, Durham, N.H. 03824.

JULY 19-24 — "Short-term Training Course to Strengthen Alcoholism Information and Referral Activities," Fourth Annual Summer Institute, The University of Wisconsin. Information from University Extension, Room 809 West Towers, 606 State Street, Madison, Wisconsin 53706.

Anemia with Alcoholism: A New Type

Transient stomatocytosis with hemolysis was discovered in four alcoholic patients by Charles C. Douglass, M.D. and Jeremiah J. Twomey, M.D. F.A.C.P. Stomatocytes are red cells whose normal circle of pallor is replaced by a slit or mouth-like unstained area. Previously they have been reported only in a rare type of congenital hemolytic anemia. In the alcoholic patients, the stomatocytosis and anemia slowly reversed after hospitalization and withdrawal from alcohol. (*Annals of Internal Med.*, Vol. 72, No. 2, February 1970, p. 159)

Thrombocytopenia Prime Reaction in Transient Alcoholic Syndrome

A previously undescribed transient alcoholic syndrome, characterized by a sharp drop in platelets along with skin blotching from confluent petechial hemorrhage, has been studied by Dr. Robert M. Post and Dr. Jane F. Desforages of the Hematology Laboratory (Tufts) at Boston City Hospital. Twenty episodes of these hematological signs were observed in 8 patients shortly after they had drunk large quantities of alcohol. No patient took longer than 20 days to relieve the low platelet counts, with or without specific therapy. There were no serious sequels and none of the patients experienced progression of hemorrhagic symptoms while in the hospital. Dr. Post and Dr. Desforages eliminated four possible producers of thrombocytopenia: folic acid deficiency, splenic pooling of platelets, massive hemorrhage, and intravascular coagulation. They concluded that alcohol has a direct effect

on the viability of platelets. (*Annals of Internal Medicine*, Vol. 68(6), pp. 1230-35)

Secretor/Non-Secretor Ratio Balanced in Group A Alcoholics

When the ABO blood group and secretor status of 1,000 alcoholic patients, mainly from London, were compared with suitable controls, a striking disturbance of the secretor/non-secretor ratio among group A patients was found. There was an increase in group A non-secretors, which was almost exactly balanced by a loss of group A secretors so that the overall frequency of the group A phenotype was not disturbed. F. E. Camps, Barbara E. Dodd, and P. J. Lincoln, who conducted the study, found no acceptable explanation, but suggest that genetic factors might be responsible. (*British Medical Journal*, Nov. 22, 1969, pp. 457-459)

Ethanol Decreases Serum Bactericidal Activity

Ethanol administered intravenously decreased the serum bactericidal activity against a strain of *E. coli*, a strain of *H. influenzae*, and a strain of *Citrobacter* in a majority of 12 normal volunteers, according to a study reported by Drs. Warren D. Johnson, Peter Stokes, and Donald Kaye of the New York Hospital-Cornell Medical Center. However, bactericidal activity against another strain of *H. influenzae* was decreased in only a few subjects. Infusion of saline in the same volunteers did not produce an equivalent change in bactericidal activity. The decrease was transient and was

returning toward normal when determined 5 and 24 hours after the ethanol infusion.

The authors suggest that susceptibility to infection increases in chronic alcoholics because of the changes in serum antibactericidal activity as well as abnormalities in leukocyte mobilization and the possible decrease in phagocytosis that follow administration of alcohol. (*Yale Journal of Biology and Medicine*, Vol. 42, October 1969, pp. 71-85)

Electroretinogram Changes Induced by Alcohol

Alcohol may act as a primary depressant on the retina, according to studies conducted by Drs. Jerry Jacobson, Tatsuo Hirose, and Peter Stokes of the Departments of Ophthalmology and Medicine of Cornell University Medical College. The study measured changes in ERG when intravenous alcohol was administered to 12 normal male volunteers under stimuli of red and white light.

Increase of all 3 components of ERG was observed as the blood alcohol level increased. They ceased increasing as the blood alcohol level reached and maintained a peak or decreased.

The lack of observed change in oscillatory potential with moderate amounts of alcohol is in contrast to the loss of oscillatory potential observed with nembutal. (*Ophthalmologica Additamentum ad* Vol. 158, 1969, pp. 669-677)

Alcohol May Harm Late-Stage Fetus

Alcohol consumed by a pregnant woman may harm her unborn child, particularly if she drinks heavily during the last three months of pregnancy. A team of investigators at the Texas Research Institute of Mental Sciences have shown that in pregnant monkeys ethanol appears to be more easily distributed within the full-grown fetus than in the developing embryo. Alcohol is ten times more concentrated in fetal tissue than in maternal tissue and remains in the fetus long after it has disappeared in the mother. The organs most likely to be affected by this concentration of alcohol are the pancreas and, to a lesser extent, the cerebral cortex.

The study, directed by Dr. J. E. Idänpään-Heikkilä, is part of a larger investigation of the maternal-to-fetal distribution of LSD, marijuana, STP, and amphetamines (speed). Preliminary results indicate that these drugs do not penetrate the placenta, whereas alcohol does so with ease. (*Medical World News*, Dec. 26, 1969, p. 16)

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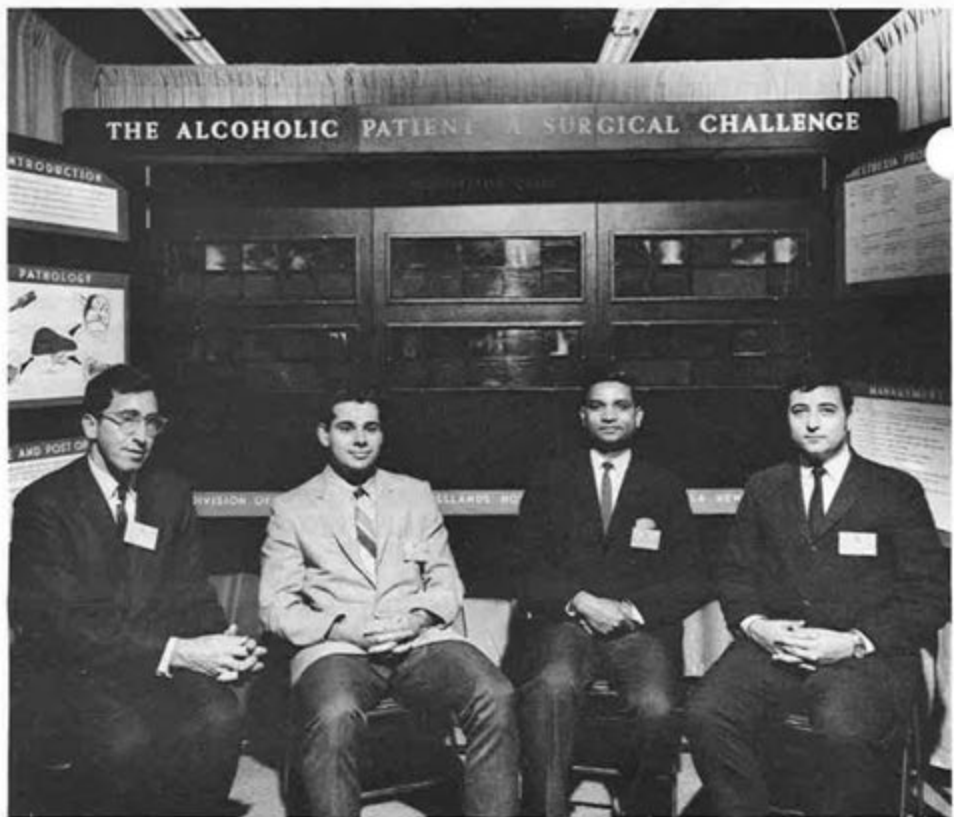
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Surgical Team Prepares Exhibit on Alcoholism

"The Alcoholic Patient—A Surgical Challenge," an exhibit prepared by a team of surgeons from Grasslands Hospital in Valhalla, N.Y., is being shown to several medical groups around the country. The exhibit illustrates pre- and post-operative management of the alcoholic patients as well as common anesthesia problems encountered in surgery on alcoholics.

The exhibit was prepared under the direction of Albert B. Lowenfels, M.D., Associate Director of Surgery, and was supported by a grant from the C. D. Smithers Foundation. It was first shown at the annual meeting of the American Medical Association in New York last July and then at the annual Congress of the American College of Surgeons in San Francisco in October. It will be shown in Washington from March 31 to April 3 at the meeting of the Commissioned Officers Association of the U.S. Public Health Service and in Pinehurst, N.C. from May 16 to May 20 at the meetings of the Medical Society of the State of North Carolina.



Pictured with their exhibit are, from left to right, Drs. Albert B. Lowenfels, Peter Pacik, Bakhshish Masih, and Edward Sottile, all from Grasslands Hospital, Valhalla, N. Y.

REPORTS FROM GLASGOW CONFERENCE

(Continued from page 1)

maintains long periods of abstinence or moderate drinking at sea, interrupted by short and more or less intense drinking bouts in port.

Norwegian seamen are prone to meet violent deaths, not by shipwreck or storms at sea, but by accident or murder while in port. An analysis of deaths among seamen from 1957-1964 showed that drownings occurred three times as often in harbors as at sea and deaths from falls occurred more than twice as often during the short periods when the ship was at dock than when it was at sea. Murder also occurred three to four times as often in harbors.

Suicides, however, occurred three to four times as often at sea, as alcoholics became despondent on a long journey and had neither alcohol nor human comradeship to support them. Poisoning, usually by methyl alcohol, is also more common at sea, usually when a desperate seaman drinks whatever he finds on board. Dr. Brun-Gulbrandsen speculated that seafaring has become a haven for Norwegian men who have social and psychological problems, including alcohol problems, even before they go to sea. Standards for entering the Norwegian merchant marine have been relatively low since World War II, when the industry expanded greatly.

No Significant Differences Found in Two Treatment Groups

No significant differences in results between Aversion therapy and group therapy were found in a study of 194 male alcoholics treated in two Aberdeen hospitals between August 1963 and March 1966. Furthermore, no differences were found between the results of these special treatments as opposed to the routine ward milieu. The study was described to the Glasgow conference by Dr. C. McCance of the University of Aberdeen. Three main patterns of drinking were found in the hospital admissions: continuous drinking, isolated binges, and regular weekend binges (particularly among fishermen).

The Aversion therapy consisted of electric shocks administered to patients as they prepared to enjoy a drink. The procedure was repeated about 5 times at each treatment session. For the other patients, group psychotherapy was held in two sessions a week of an hour each. All patients were encouraged to attend AA meetings.

Follow-up at 6 months and 1 year showed no significant differences between the two treatments. A small group who had both treatments showed no trend toward a better response to one or the other therapy.

Other Speeches

Sir R. Alistair Murray outlined the operation of the Glasgow Information Center, which is run by the Regional Council on Alcoholism. The functions of the center are first, to help alcoholics and their families, and second, to educate the public at all levels. He expressed the opinion that the most effective person for dealing with an alcoholic is a recovered alcoholic. However, non-alcoholics who are well trained can also be effective in running information centers. The center identifies about 300 people who are alcoholics or have a drinking problem each year, and about 180 of these agree to be helped.

Among the speeches dealing with biochemical factors, Drs. H. P. T. Ammon and C. J. Estler presented a discussion of how alcohol interferes in vivo with the process of energy production in the brain. They studied the influence of alcohol on the first stage of glucose breakdown—glycolysis—and the production of chemical energy in the form of ATP and creatinine-phosphate in the brain.

Other topics covered at the conference included personality and family factors, comparative studies, industrial and legal aspects of alcoholism, and community aspects of alcoholism.

Highlights of 29th International Congress on Alcoholism and Drug Dependence

(Continued from page 1)

Alcoholism and the Poverty Population

Reaching alcoholics in ghetto areas requires special techniques, reported H. E. Krimmel of the Cleveland Center on Alcoholism. Recognizing that slum areas have large numbers of alcoholics, the Center began a special project to reach them. They found that it was necessary to reach out to the families in their own neighborhoods, for they would not or could not travel to obtain help, no matter how much they wanted the services. Total abstinence as a goal was found impractical. Long-range goals were not acceptable because of previous disappointments, and immediate satisfactions were crucial. Because the ghetto is primarily a group culture, group therapy may be even more effective there than in other areas.

Driving Histories of Patients Referred to Alcoholism Clinic

Most studies of the relationship between alcohol and traffic accidents focus on the accidents to determine the proportion of drinking drivers and pedestrians who were involved. A study reported by M. J. Keating of St. Vincent's Hospital, Melbourne, reversed the point of view and studied the driving histories of 1,100 patients referred to an alcoholism clinic.

The results showed that the male alcoholic driver had eight times as much chance of being convicted for three serious offenses—drunken driving, dangerous driving, and failing to stop after an accident—as the general population. Approximately 50% of the male alcoholic patients had had an accident, a high proportion involving severe property and human damage. One in 40 male alcoholics had been involved in a fatal traffic accident while driving, one patient's accident resulting in 5 deaths.

Women in both the alcoholic and control groups had a low incidence of conviction for any offense. About 10% of the men had been employed in the transportation industry—as drivers of taxis, ambulances, trucks, etc.

The author recommends that any person convicted of any of the three serious traffic offenses should be suspected of having a drinking problem.

Use of Traffic Law Enforcement Bring Alcoholics into Treatment

R. B. Voas of the National Highway Safety Institute in Washington, D.C. also discussed the use of traffic law to iden-

tify alcoholics. He proposed six types of symptoms which might be used to distinguish between the occasional social drinker who is apprehended for drinking and driving and the "problem drinkers" who require treatment: (1) Blood alcohol levels in excess of 0.15% at time of arrest; (2) one or more previous arrests involving alcohol; (3) previous contacts with social agencies and/or medical facilities; (4) medical signs of alcoholism such as cirrhosis; (5) psychological dependence on alcohol as indicated by questionnaires; and (6) reports of heavy drinking, loss of time on job, marital problems, etc. from interviews by probation officers with family members and employees.

Mr. Voas reported on several experiments in which judges refer problem drinkers to treatment agencies and require their attendance as a condition of their probation. Two small pilot programs, one in Colorado Springs and one in Ann Arbor, have had marked success with court-enforced administration of Antabuse. In the Ann Arbor study 95 individuals convicted of alcohol-related offenses participated. At the end of a year, 67 were still not drinking.

Epidemiology of Alcoholic Cirrhosis

The duration of heavy drinking is a significant factor in the development of alcoholic cirrhosis, according to studies conducted by P. Wilkinson, J. N. Santamaria, and J. G. Rankin of the Department of Medicine of the University of Melbourne. Women appear to be more susceptible to the disease than men. However, intake of alcoholic beverages, the kind of beverage, and socioeconomic status do not appear to be important factors in explaining why only a minority of alcoholics develop cirrhosis, although acute liver damage is a common complication of prolonged excessive drinking. The subjects of the study were 77 patients who had cirrhosis when they were admitted to the Alcoholism Clinic at St. Vincent's Hospital in Melbourne.

The Pathogenesis of Alcoholic Pancreatitis

Recent studies by J. Martos and A. E. Davis of Prince Henry Hospital in Sydney have demonstrated that the height of blood alcohol is more important than the route of administration in producing obstruction to pancreatic outflow, and that intravenous alcohol causes a rise in outflow resistance of the sphincter of Oddi in man. There is no good evidence

for alcohol causing a duodenitis which has been postulated by other workers as a cause of obstruction to pancreatic outflow. Experiments in rats have demonstrated that alcohol has in addition a direct effect on the pancreas shown by a striking increase in leucine amino-peptidase and less of acid phosphatase activity. It is postulated that this direct effect, together with the obstructive effect occurring at times of pancreatic stimulation, are major factors in the etiology of alcoholic pancreatitis.

Comparative Studies of National Attitudes Toward Alcohol

National attitudes toward alcohol vary considerably, according to studies conducted by the Ansvar Insurance Company of Stockholm, Sweden, and reported to the conference by H. G. Neller. Those who do not drink at all vary from 32% in the United States to 3% in West Germany. More than 20% are total abstainers in Finland, Sweden, and Great Britain. Among women the non-drinkers range from 43% (Finland) to 4% (West Germany), while among men the corresponding figures are 23% (U.S.A.) and 2% (West Germany). A larger proportion of rural population are abstainers compared to city dwellers.

Cultural Attitudes and Behavior Toward Alcohol and Drugs

Evidence that cultural attitudes, normative drinking patterns, and the rate of alcoholism are related was presented by M. J. Sargent, University of New South Wales, Sydney. Four types of drinking patterns were predicted—utilitarian, ritual, abstinent, and convivial—for four respective groups—Australian-born, Jewish, Chinese (semi-abstinent), and Japanese. The results confirmed the predictions of the drinking patterns for the Australian, Chinese, and Japanese and partially for the Jewish group (who included more moderate and fewer light drinkers than predicted). The category for "high amount drinking" included 32% of the Australian males, 16% of the Australian females, 19% Jews, 3% Chinese, and 7% Japanese. The rates for problem drinking were 4.8% Australian men, 0.5% Australian women, 2.7% Jewish, and 0% Chinese. The Jewish subjects, compared with the Australians, had an equal frequency of utilitarian reasons for drinking, similar age at first inebriation, a similar degree of permissiveness toward drunkenness, and a higher rate of experimentation with drugs (26%).

TREATMENT CENTERS ATTRACT DIFFERENT TYPES OF DRINKERS

A study of patients applying for treatment at four different types of alcoholism programs showed that each center attracted a different type of person with a different perception of his drinking problem. This research was reported by E. Mansell Pattison, M.D., Ronald Coe, B.A., and Hans Doerr, Ph.D. of the Department of Psychiatry, University of Washington School of Medicine in Seattle.

Patients applying to an aversion-conditioning hospital were relatively well adjusted and perceived of alcoholism as an isolated medical problem. Those at an outpatient treatment clinic were experiencing difficulties in many areas of life but were managing to function. They perceived of alcoholism as a psychological problem. At a community half-way house, the patients' lives had been severely disrupted by alcoholism. They had a good deal of psychological conflict about alcoholism and saw it as their central problem. Patients at a county jail work-rehabilitation program were long-term social isolates, for whom alcoholism was but one facet of a general inability to cope with life. They did not experience much psychological conflict and did not see alcoholism as a central problem. The authors suggest that different criteria are needed to evaluate the effectiveness of these programs in meeting the needs of the particular population they serve.

Long-Term Study Finds Libido Changes Differentiate Male and Female Alcoholics

The libido of men alcoholics declined twice as often as it increased under the influence of alcohol, and it increased among women five times as often as it decreased, according to a comparative study of male and female in-patients being treated for chronic alcoholism in a German hospital. Dr. Klaus Wanke, chief physician of the Frankfurt-am-Main University Psychiatric and Neurological Clinic, reported on differences between men and women alcoholics to the Scientific and Practical Conference on the Study of the Dangers of Addiction held in Nuremberg in December 1969. The analysis covered 495 male patients and 120 female in-patients treated at the Hamburg-Eppendorf Psychiatric University Clinic between 1935 and 1963.

Thirty years ago one of ten alcoholics was a women, whereas today Dr. Wanke estimates that the ratio is one in three. Among the patients studied, alcoholism

was a severe condition among the men and a moderately severe one among the women. There were no significant differences by sex in the frequency of delirium and Korsakoff's psychosis. More than twice as many men were found in the age group up to 30, while women in their 40's were most prone to alcohol abuse.

The men were more subject to internal disease, while the women were more often afflicted with endogenous psychoses. EEG finding for the women were more often pathologic. Women more frequently combined drug and alcohol abuse than men, and were also hospitalized more often and for longer periods. At the onset of addiction, the women drank concentrated beverages more often. Their condition deteriorated faster than in men, often leading to complete withdrawal from occupational or other interests.

ALCOHOLISM RULED DISEASE BY GERMAN COURT

A German court has ruled that alcoholism is an abnormal physical and mental state and as such comes within the definition of a disease requiring medical treatment. The ruling, which was made by the West German Federal Supreme Court for Social Matters, confirmed the rulings of lower courts that a female alcoholic who had been involuntarily hospitalized was entitled to reimbursement from the Health Insurance Agency for the costs of her hospitalization. The Health Insurance Agency claimed that the object of the hospitalization was not therapeutic treatment but detoxification.

CALIFORNIA TRAFFIC FATALITIES ANALYZED

A detailed long-term study of fatal traffic accidents in California has confirmed the involvement of alcohol traffic deaths. A total of 6,740 blood alcohols were studied, or 94.3% of the traffic deaths that occurred in 47 California counties from 1962-1968.

Statistics relating to the study, which was conducted by Royal A. Neilson, are available in a booklet, "Alcohol Involvement in Fatal Motor Vehicle Accidents, California, 1962-1968," from the California Traffic Safety Foundation, 564 Market Street-Suite 515, San Francisco, California 94104.

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