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Special Report:

Hughes Takes ICAA Presidency As Multination Congress Gathers

Prize Lecture Picks Tolerance as Prime Research Target

Dr. Harold Kalant, co-winner of the Jellinek Memorial Award, emphasized the significance of tolerance phenomena in drug dependence and important research needs for the future. Tolerance, he said, is nothing more than a decrease in sensitivity to the effects of a specified drug, best described in terms of the dose-response curve. In the tolerant state, there is a shift in this curve, so that more drug is needed to produce a given effect, or less effect is produced by a ven dose.

In discussing the mechanisms of tolerance, he said that there is no evidence to support the theory that the absorption of the drug might be decreased from the gastrointestinal tract, and little evidence to support the theory that more of the absorbed drug might be bound to plasma or tissue proteins, or in some other way kept from reaching its site of action in the brain. In contrast, a drug might be broken down more rapidly in the liver or other tissues, so that its duration of action in the body is shortened. On the other hand, the nervous system might be altered in some way which renders it less sensitive to the drug which actually reaches it.

It has been shown that for alcohol the nervous system alteration is by far the most important mechanism.

Regardless of the nature of the change (metabolic or nervous system), there has long been an empirical differentiation between acute and chronic tolerance, on the basis of the length of treatment required to produce them. In discussing the relationship between acute and chronic tolerance, Kalant described the work of his own research group in measuring tolerance. They make extensive use of a moving-belt test, which permits sequential measurements of the

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Senator Harold Hughes (D.-Iowa), long active in the field of alcoholism, was elected President of the International Council on Alcohol and Addictions at the 30th International Congress on Alcoholism and Drug Dependence held in Amsterdam September 4-9. He is the first American to hold the two-year post.

The Congress on "Man and His Mind-Changers," which was the first meeting of this magnitude since the 1970 Congress in Australia, attracted 1200 participants. Queen Juliana of the Netherlands received a delegation from the Congress, as did the American Ambassador.

A highlight of the Congress was the presentation of the E. M. Jellinek Memorial Award for outstanding contribution to the study of the problems of alcohol to Dr. Harold Kalant and Mr. Robert Popham. Both men are associated with the Addiction Research Foundation of Ontario, Dr. Kalant as Associate Research Director and Mr. Popham as Head of the Research Division. They are the first North Americans to receive the award.

AMSA Annual Meeting Honors Marvin Block

Dr. Marvin A. Block of Buffalo was honored by the American Medical Society on Alcoholism at its third annual meeting in Atlanta, Georgia, on September 9, when he received the AMSA Medal of Achievement, the organization's highest award.

In making the presentation, Dr. Stanley E. Gitlow, AMSA President, cited Dr. Block's 25 years of service in the field of alcoholism and his role in gaining the AMA's recognition of alcoholism as a disease. Dr. Block has also been a member of the board of the National Council on Alcoholism for several years.

At the scientific meeting, the first morning was devoted to a presentation by 3 patients of the Georgia drug treatment program, with commentary and guidance by Dr. Peter Bourne, Director, Office of Drug Abuse, Georgia Department of Human Resources. The importance of alcohol as the initial drug of abuse became apparent.

In the afternoon a panel moderated by Dr. Frank A. Seixas discussed "Alcoholism—A Disease or a Symptom?" Panelists included Dr. Stanley Gitlow, Dr. Maxwell Weisman, Dr. Marvin A. Block, and Dr. Alfred E. Messer.

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Following are brief reports of some of the papers presented at the Congress:

No Clear Relation Between Drinking Laws and Drinking Behavior

Three hypotheses relating drinking laws and drinking behavior are frequently presented, said R. Room of the School of Public Health of the University of California. The null hypothesis, that drinking laws have no effect on drinking, is usually presented by the liquor industry. However, Prohibition did alter behavior, in fact, lessening per capita consumption. Another theory is the "constant proportion" hypothesis, that any factor raising or lowering the alcohol consumption in the whole population will have a proportionate effect on the alcoholism rate. An alternative "inoculation" hypothesis, that the proportion of excessive drinkers can be reduced by policies increasing the acceptance of moderate styles of drinking, is coming into favor. However, evidence presented so far on behalf of these theories is inconclusive. Future work will probably result in specification of the conditions under which these theories apply rather than proof or disproof of one or the other.

Borderline of "Loss of Control" Difficult to Define

"Loss of control" is not a sharply demarcated biochemical borderline but

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EDITORIAL

The selection of Dr. Marvin A. Block of Buffalo as the first recipient of the AMSA award for achievement in the field of alcoholism honors a man well known to all who have devoted themselves to this area. Best known perhaps for his advocacy of the AMA's recognition of alcoholism as a disease, Dr. Block's dapper and sparkling appearance, peppery and rapid repartee, and tireless work in lecturing and writing, bringing the disease concept of alcoholism to thousands around this country and many others, will be long remembered. His ideas are available to all through his book *Alcoholism: Its Faces and Phases* and other volumes.

He has also performed large services in committee work in the AMA, N.Y. State Governor's Advisory Council on Alcoholism, and NCA Board of Directors. Dr. Block was one of AMSA's first members when it became national in scope, and he has served as its vice-president as well as vice-president of NCA. Dr. Marvin A. Block epitomizes not only medical professionalism but also the national aspirations of AMSA and the links to NCA.

During the annual meeting culminating in the award ceremony, we learned that, although there is no particular item of progress to report, the negotiations with NCA are continuing and there is considerable hope of bringing them to a successful conclusion in the next few months. So, as we hail the contributions of Marvin Block, we can look forward to an era in which his advice and counsel will continue to benefit both AMSA and NCA—perhaps simultaneously.

FAS

Implanted Disulfuram

Yields Poor Results

Implantation of disulfuram pellets (Esperal) in an experimental group of 20 patients in Aruba proved disappointing according to a report given at the AMSA Annual Meeting by O. R. Wever, M.D., President of the Foundation Against Alcohol Abuse in Aruba. Two of 7 patients chosen despite the contraindications set out by Van Erp in his previous work in Amsterdam died violent deaths. Both had suffered recurring depressive spells. Depression is an absolute contraindication for this type of treatment, said Wever. Overall results with implantation have not resulted in an improved recovery rate, but further tests are warranted, he believes.

Criteria Committee Issues Guidelines

The first set of medical guidelines for the diagnosis of alcoholism was released in August, with the joint publication in the *American Journal of Psychiatry* and the *Annals of Internal Medicine* of the NCA Criteria Committee report. The 13-member committee was headed by Samuel C. Kaim, M.D., Director, Staff for Alcoholism and Related Disorders of the VA. Frank A. Seixas, M.D., Medical Director of NCA, acted as staff.

The criteria are divided into major and minor signs and three levels of severity. There are separate data "tracks" for physiological and clinical signs and behavioral, psychological, and attitudinal indicators.

Copies of the criteria report are available from NCA, 2 Park Avenue, New York City 10016.

ADPA Holds 23rd Annual Meeting in Atlanta

In cooperation with the Southeastern Conference of Alcohol and Drug Programs and the Georgia Department of Human Resources, the Alcohol and Drug Programs Association of North America held its 23rd Annual Meeting in Atlanta September 10-15. The AMSA Annual Meeting was held in conjunction with this conference.

Among the highlights of the conference was a varsity debate by University of Georgia debaters on the subject: "Resolved: That Public Intoxication Should Be Handled in the Health Care System."

A panel, with Edward Blacker, Ph.D. presiding, discussed the Uniform Alcoholism Act and the repeal of public intoxication laws.

Program speakers included Fenton Moss, Director, Western Region Indian Alcoholism Training Center; Ronald J. Catanzaro, M.D., Director of the Palm Beach Institute; Jean J. Rossi, Ph.D., Program Director of Lutheran General Hospital, Park Ridge, Ill.; Donald Catlin, M.D., Walter Reed Army Institute of Research, Washington; and many others.

The conference also scheduled several small group presentations on subjects such as traffic safety, community action, education, halfway houses, occupational programs, research and training, social work, and treatment services.

Charles B. Methvin of the Georgia Department of Human Resources was chairman of the Conference Task Force; and George C. Dimas, Director of the Alcohol and Drug Section of the Portland Mental Health Division, was Program Chairman.

BOOKS

Recent Advances in Studies of Alcoholism: An Interdisciplinary Symposium. Edited by Nancy K. Mello, Ph.D. and Jack H. Mendelson, M.D.

National Institute of Mental Health, National Institute on Alcohol Abuse and Alcoholism, Rockville, Md. 1971. 920 pp. \$3.75 paper.

The proceedings of a symposium held in Washington June 25-27, 1970, sponsored by the National Center for Prevention and Control of Alcoholism.

MEETINGS

NOVEMBER 27—AMSA, District VI Meeting, in conjunction with the Minnesota Winter School on Alcohol Problems. Kahler Hotel, Rochester, Minn. Information from D. H. Petersen, M.D., Willmar State Hospital, Willmar, Minn. 56201.

Block Honored At AMSA Meetings

(Continued from page 1)

At the award dinner Dr. James Knight illuminated some spiritual experiences in dealing with the alcoholic patient.

The second day of meetings featured a clinical symposium held at the Georgia Mental Health Institute in cooperation with the Alcohol and Drug Programs of America. Featured on the program were Dr. Peter Bourne, Dr. David H. Knott, Dr. James Beard, Dr. John Mooney, Professor Harrison Trice, and Dr. Helen Denham. The luncheon speaker was Jack H. Watson, Jr., Chairman of the Georgia Human Resources Board.

New officers were elected for the coming year at the meeting. Maxwell N. Weisman, M.D., of Baltimore is the new President; LeClair Bissell, M.D., of New York, Vice-President; Sidney S. Greenberg, M.D., of New York was elected Secretary and Percy E. Ryberg, M.D., of New York, Treasurer.

Members of the Executive Board are R. G. Bell (Toronto); M. A. Block (Buffalo); N. J. Bradley (Park Ridge Ill.); L. A. Cloud (New York); R. F. (New York); S. E. Gitlow (New York); C. S. Lieber (New York); D. G. Mackay (Montreal); D. H. Petersen (Willmar, Minn.); and F. A. Seixas (New York).

RESEARCH and REVIEW

Alcoholics Treated by Behavior therapy Practice Controlled Drinking

A year after treatment by behavior therapy methods, including videotaping drunken behavior for later viewing, a group of alcoholics have demonstrated the ability to practice controlled drinking. The results of a second group of alcoholics, whose treatment goal was abstinence, have not been as good. The study was reported by Mark B. Sobell and Linda C. Sobell of the Orange County (Calif.) Alcoholism Services and was conducted at Patton State Hospital.

Four experimental groups were established: two (30 members) whose goals were nondrinking and two (40 members) aimed at controlled drinking. One half of each group was treated with conventional methods and the other with behavior therapy.

At six-month follow-up each of the groups had at least one member practicing controlled drinking, with more of them in the controlled drinker experimental groups. During the second six-month follow-up the incidence of controlled drinking decreased severely for all groups except the controlled drinker experimental subjects. Controlled drinking was defined as consuming 6 oz. or less of 86 proof liquor or the equivalent daily.

Using other measures of adjustment as well as drinking behavior, such as vocational status, interpersonal relations, and use of therapeutic supports, on the whole the subjects who received individualized behavior therapy functioned much better than subjects receiving conventional therapy. (*Behavior Therapy*, September 1972)

Alcohol Acts as Depressant in Heart Disease Patients

Although alcohol may stimulate the healthy heart, it has the opposite effect when disease is present. When catheters were introduced into the hearts of 10 heart patients and 4 normal subjects by a team from Misericordia-Fordham Hospital in New York, led by Dr. Lawrence Gould, the 4 normal subjects showed a significant increase in heart stroke power and pumping ability after consuming 2 oz. of whisky. The heart patients, however, showed a decrease of both measures. Dr. Gould suggests that the advisability of alcohol use for heart patients is open to question. (*A.M.A. Journal*, Vol. 218, p. 1799).

Suicide Attempts Linked to Alcoholic Intoxication

Of 34 patients admitted to the VA Hospital in Durham (N.C.) with wounds inflicted in suicide attempts, 29 were alcoholics. Of these, 26 were intoxicated at the time of the attempt. Two distinct patterns of suicide attempts were discerned by Demmie G. Mayfield, M.D., and Dan Montgomery, M.D. Seven patients with an "abreactive" syndrome made their attempts after becoming abruptly intoxicated. These attempts occurred after an encounter with another person that resulted in anger, aggression, and hyperactivity. These patients seldom sustained severe injuries.

Eleven patients with a "depressive syndrome of chronic intoxication" made the attempts after two weeks of more of excessive drinking during which they had increasing depression in mood, motor retardation, and withdrawal.

While the majority of these patients inflicted potentially fatal injuries, such depressions are detectable, said the authors, and these suicides are potentially preventable.

An unexpectedly high incidence of amnesia and denial (42%) was found. (*Archives of General Psychiatry*, Vol. 27, September 1972, pp. 349-53)

Psychiatrists Engage in Dialogue on Alcoholism

At the 1972 annual meeting of the American Psychiatric Association in Dallas, Dr. John Ewing of the University of North Carolina convened for the sixth time a group of alcoholism psychiatric experts who meet annually for a "Dialogue on Alcoholism." The original group consists of nine people who attended whenever possible and who are frequently joined by regular participants from the audience. This year the group was joined by Dr. Frank Seixas, Medical Director of the NCA and Editor-in-Chief of PAN.

Professor Michael Beaubrun from the University of the West Indies in Jamaica, a regular member of the panel, discussed his marijuana research and the fact that in Jamaica there is an inverse relationship between alcohol consumption and marijuana. The possibility that cannabis might have uses as a treatment modality is under consideration.

Dr. Seixas discussed the controversial issue of whether or not some alcoholics can return to social drinking and also described animal studies in which the drinking of alcohol by monkeys is influenced by injecting minute amounts of alcohol into the cerebral ventricles.

A member of the audience, Dr. Maryonda Scher, a psychiatrist from Seattle, Washington, claimed little trouble in getting alcoholic patients sober. The real problem then is how to treat them in sobriety. This was discussed in some detail by all members of the panel and various club and evening clinic plans were described.

Other psychiatrists participating were Keith Ditman of Los Angeles, Ruth Fox of New York, and Robert Moore of San Diego. They were pleased to welcome Dr. Max Hayman of California.

These two-hour sessions have fulfilled the function of establishing communication between psychiatric experts in alcoholism on an annual basis as well as enabling them to answer questions and respond to comments from other professionals who are faced with problems concerning alcohol use and abuse.

John A. Ewing, M.D.

Membership Application

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NEWS FROM THE NETHERLANDS: ICAA CONGRESS REPORTS

(Continued from page 1)

rather a diffuse border area, depending on the meaning and relevance of certain drinking situations and types of alcohol for a particular individual, said M. M. Glatt (U.K.). After interviewing several hundreds of patients at length about their experiences in attempting controlled drinking, he concluded that although as a rule most of them had been able to maintain a "moderate" drinking pattern for some days or weeks, as soon as circumstances became unfavorable or outside pressures intervened, the patient reverted to "bout" drinking with eventual "loss of control."

Psychophysical Effects of Congeners

Most congeners in alcoholic beverages exist in such small amounts that in practice they are not harmful, said K. Eriksen of the Research Laboratories of the State Alcohol Monopoly (Finland). However, it is likely that some of the most potent behavioral changers may have special side effects in intoxication or in the symptoms found in hangover. A less studied, but more important, question is the chronic effect of congeners. Animal studies have shown more harmful effects with wines and whiskeys than with pure ethanol.

Pyrazole Derivatives Inhibit

Alcohol Metabolism

Pyrazole and a number of pyrazole derivatives are potent inhibitors of alcohol metabolism in vivo, essentially by inhibiting liver alcohol dehydrogenase (LADH), according to U. Rydberg (Sweden). Minimally effective doses of pyrazole and 4-methylpyrazole given to rats resulted in an increased behavioral depression parallel to an inhibition of ethanol metabolism but more clearly expressed as corresponding to the blood ethanol level. Moreover, pyrazole, 4-methylpyrazole and also 3-methylpyrazole, a noninhibitor of ethanol metabolism, gave increased impairment together with ethanol but also when administered separately, indicating direct "toxic" effects on the nervous system.

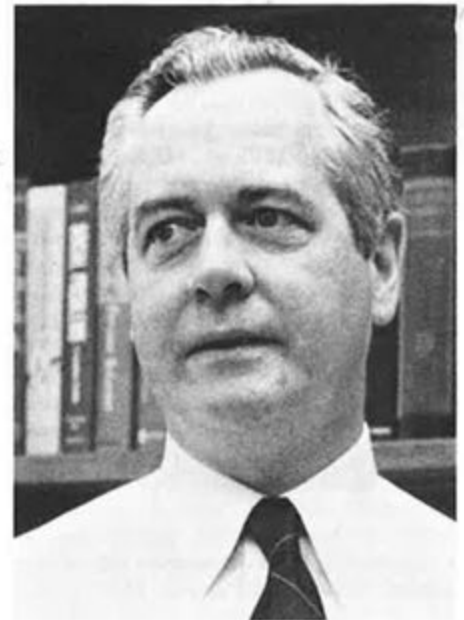
Narcotics Addicts

Abuse Alcohol

Nearly 10% of the 700 narcotics addicts admitted each month to the Bernstein Institute of Beth Israel Medical Center in New York have a problem with alcohol at admission or have had such a problem in the past. Addicts 35 and older showed a significantly higher daily use of alcohol than the younger addicts; Hispanic addicts used alcohol less than the general population and non-Hispanic



Award Winners: Dr. Harold Kalant (left), and Mr. Robert Popham of the Addiction Research Foundation of Ontario received the E. M. Jellinek Memorial Award at the Congress (see story, page 1).



blacks used alcohol more. There were no significant differences between male and female addicts in the use of alcohol. Most of the daily alcohol users drank wine. The study was reported by George W. Jackson, M.D. and Alex Richman, M.D., of Beth Israel.

Hospitalized Minnesota Indians

Indian alcoholics are, on the average, 15 years younger than Caucasian alcoholics, said H. Hoffman (U.S.A.) in describing the social psychiatric history of 40 Minnesota Indians hospitalized for alcoholism. Indians were found to drink for several reasons: to overcome a feeling of hopelessness and depression characteristic of the reservation environment; to cope with anxiety caused by cultural stress; to compensate for low self-esteem; and to conform with their peers since they had been exposed to heavy drinking since childhood.

First Clinic for African Alcoholics in South Africa

Under tribal conditions, Africans had no drinking problems, said M. V. Gumede of South Africa. However, westernization, urbanization, and industrialization brought a breakdown in tribal control, with a concomitant increase in drinking. Alcohol abuse and alcoholism are now common in African society, along with breakdown of family life.

Gumede described the operation of the first outpatient clinic, opened in 1969 near Durban, which has treated 600 volunteer patients.

Alcohol Quotient Measures Consumption

J. A. Ewing and B. A. Rouse (USA) presented the Alcohol Quotient (A.Q.), defined as "an index which numerically represents the relatively hazardous nature of any individual's drinking during the past year."

The A.Q. formula is:

$$AQ = \left[F \left(\frac{A-10H}{0.6W} \times 100 \right) \right] \times D \times N$$

when W = body weight in grams

A = grams of alcohol per occasion

H = duration of drinking occasions in hours

N = number of occasions per annum for each beverage and type of drinking

F = 0.6 for alcohol exclusively drunk with meals

0.9 for party snacking while drinking

0.8 for drinking on a full stomach

D = number of hours of duration of drinking in excess of 3 hours

Interviews have been completed with a total of 1800 people, alcoholics and nonalcoholics, to obtain means and ranges.

EXPERTS PRESENT LATEST FINDINGS ON ALCOHOL AT AMSTERDAM MEETINGS

Survey Finds Abnormal Drinkers in General Practice

If family doctors ask questions about alcohol abuse to "at risk" patients, a considerable proportion of "hidden alcoholics" will probably be detected, concluded R. H. Wilkins (U.K.) after a one-year survey of selected patients of a health center. The population surveyed was mainly working class, aged 15 to 65, and were those believed to have a drinking problem or to have an abnormal drinker in the family. Of the 546 studied, 403 patients were then classified as "abnormal drinkers." Important predictors of alcoholism were peptic ulcer, gastritis, anxiety state and depression, divorce, drunken offenses, living in a hostel for the homeless, and being the father of a neglected child. A control group not known to have any risk factors showed a significantly lower proportion of abnormal drinkers (10 out of 130).

Drinking Probabilities Among American Males

A national probability sample of 1561 men aged 21-59, reported by D. Cahalan, showed that half of the men reported some drinking problem within the past three years, and that a fifth had relatively high overall scores. All problems were most prevalent in the youngest age groups, with most problems diminishing rapidly after age 50. Men of the lowest socioeconomic status had more severe problems and a high ratio of interpersonal problems to alcohol intake. Cahalan concludes that while environmental factors predominate among the correlates of problem drinking, certain personality characteristics—notably impulsivity and lack of ego-resiliency—are also of material importance.

Effects of Ethanol on Lipoprotein Metabolism in Rat Liver

Lipoprotein synthesis and secretion were studied in isolated rat livers perfused with a semisynthetic medium in work conducted by J. Papenberg and U. Garbe of the German Federal Republic. As compared to the control experiments, ethanol depressed the synthesis and secretion of the VLDL-fraction significantly, while synthesis of the LDL-fraction and the $d = 1,040-1,063$ fraction is decreased to a minor extent by ethanol. The synthesis of the HDL-fraction is enhanced significantly by ethanol. The authors conclude that ethanol obviously can inhibit protein synthesis of the liver cell directly.

Liver Disease Studied in Unselected Group of Alcoholics

J. N. Santamaria et al. of Australia conclude that while continued alcohol excess appears to contribute to the progression of acute alcoholic hepatitis (AAH) to cirrhosis, some other factor apart from alcohol must contribute to the development of AAH as opposed to fatty liver. They reviewed a series of 100 liver biopsies obtained from patients attending a clinic for the treatment of their drinking problems rather than any physical complication. Biopsies showed alcoholic hepatitis progressed to cirrhosis. The authors found that less than one-third of the male patients had acute alcoholic hepatitis \pm fibrosis or cirrhosis. The remainder had a fatty liver \pm fibrosis. The incidence of AAH \pm fibrosis or cirrhosis was higher in the small female group of patients.

Treatment Monopoly Obstacle in Alcoholism Work

According to I. Babow (U.S.A.), the treatment monopoly based on the assumption that only a person who has been an alcoholic can understand and help other alcoholics has been a major obstacle in improving their treatment. He feels this exclusive approach tends to create a closed system which discourages research on the outcome of various treatment modalities. As an alternative to "therapeutic nihilism," he proposed an alternative approach based on systems analysis. This incorporates the service contribution by former alcoholics but provides a much broader spectrum of care and gives attention to any problems of living as well as the drinking problem.

Arrests for Drunkenness Vary by Region in Finland

Analyzing a representative sample of all arrests for drunkenness for Finland for 1970, S. L. Saira found that the number of arrests depends not only on the amount of alcohol consumption but on the enforcement of the law, the efficiency of the police, and public opinion. In towns the arrested persons are frequently homeless men who have taken their alcohol out of doors. In rural districts some sort of violent trouble more commonly leads to the arrest. The most frequently arrested 10% of the subjects account for 45% of the arrests.

Alcohol Associated with Assaultive Behavior

Familiarity with the victim, guns, and alcohol were the most common factors found in the histories of 322 males entering the prison system of the state of

North Carolina over a two-year period. The prisoners were all convicted of crimes involving serious assaultive behavior, said D. Mayfield.

Alcohol use and abuse were extensive, with 43% of the drinkers diagnosed as alcoholic. Prior to the assault, 65% of the prisoners had been drinking as had 39% of the victims. The majority of victims (75%) were men; women victims were usually related to the assailant.

Despite their obvious difficulties, 60% of the alcoholic subjects refused to define their drinking as a problem, and had rarely been encouraged to enter treatment. Only 16% of the subjects intoxicated at the time of the assault claimed any degree of amnesia.

Fusaric Acid Inhibits Effects of Ethanol

Fusaric acid, 5-butylpicolinic acid, has proved to be a potent inhibitor of dopamine B-hydroxylase and has also been clinically assessed as a new hypotensive agent, said M. Ogata et al. of Japan. In their work, 30 hospitalized male alcoholics were given fusaric acid or a placebo. After seven days, they were given alcohol. Five symptoms were more frequent in the fusaric acid group: fall of blood pressure, body flush, increase of pulse rate, feeling of getting drunk, and change of taste.

The authors postulate that these findings are sufficient to discourage further alcohol ingestion without constituting danger to the patient. Long-term trial of fusaric acid as an adjunct to outpatient treatment is now in progress.

Alcoholics and Self-Destruction

The self-destructive tendencies of 85 chronic alcoholics, with neurotic patients as controls, were analyzed by K. Ohara, et al. of Japan. They found that although the rate of attempted suicide in both groups was 15%, the death wish was found in 28% of alcoholics and 85% of neurotics. Alcoholics chose violent methods of suicide, suggesting impulsivity. Many more alcoholic patients wished to be killed as compared to neurotics. The attempted suicide group was more aggressive, thoughtless, and irritable than the nonsuicide group of alcoholics.

Mortality Rate Higher for Alcoholics

A follow-up study of 45,000 men treated for 1 to 14 years in the in- and outpatient facilities of the Toronto Addiction Research Clinics revealed that the mortality rate for alcoholics was higher than in the general population. The study was reported by W. Schmidt and J. De Lint.

Kalant and Keller Address Plenary Sessions of International ICAA Congress

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drug effects on motor performance at short intervals after a dose of alcohol, pentobarbital, THC or other drugs. This generates a time-effect curve, in which acute tolerance is shown by "scallop" of the curve, indicating a rapid decrease in drug effect at a time when the drug concentration has scarcely decreased.

If the time-effect curve is examined, with ethanol one finds that the "scallop" or acute tolerance becomes more marked on repeated testing, before any significant change is evident in the maximum effect. Reduction in peak effects seems to result from earlier and more marked expressions of acute tolerance.

This may be related to the "carryover" phenomenon, in which if a subject is made tolerant by chronic treatment with a drug, then allowed to recover, the tolerance reverts to normal. However, some residual long-lasting alteration continues. On exposure to a second cycle of chronic drug treatment, the same subject becomes tolerant more rapidly than the first time, and still more rapidly on a third cycle.

Keller Reviews

Multidisciplinary Approach

Addressing a plenary session of the Congress, Mark Keller, Editor of the *Quarterly Journal of Studies on Alcohol*, reviewed the history of the multidisciplinary approach toward alcoholism, which began nearly 40 years ago. Summing up this wholistic perspective, he said that there is a sharply distinct dif-

ference among individuals — possibly among groups—in degree of vulnerability to alcoholism. A genetic factor may well contribute to this vulnerability, but it might be a negative factor, that is, the genetic factor may be one that makes the development of alcoholism unlikely, rather than one that positively increases vulnerability.

An infant-rearing and childhood-developmental factor, possibly excessive dependency or dependency conflict, is also involved in laying the groundwork for the ultimate psychological vulnerability. The combined personality and social development that occurs in adolescence may lead those who are most vulnerable toward alcohol. Social and cultural phenomena begin to play a significant role. It is a reasonable guess, said Keller, that "the more vulnerable an individual was to begin with, whether genetically or by childhood experience and adolescent reinforcement, the more likely he is to grasp at the glass crutch and finally to arrive at the stage of helplessness — confirmed alcoholism." The process itself may take from 5 to 10 or 12 years.

Other Reports

• Of all Swedish drivers detained by police for drunken driving, 15% to 20% have taken a drug of some kind in addition to alcohol, said R. Andreasson and R. Bonnischen. • W. W. Moore, Jr. (U.S.A.) outlined the cooperation between the National Council on Alcohol-

ism and the U.S. Department of Transportation in traffic safety. • A double medication technique with cyanamide, administered to the male patient without his knowledge by his wife, has proved successful in Japan, said K. Arikawa, et al.

• A fourth of 376 patients entering the emergency room of a large urban general hospital in Edmonton, Alberta, had been drinking, according to studies reported by J. A. L. Gilbert. • About half of the patients who sought treatment at the alcoholism clinic of Boston City Hospital did not return for a second visit, and further dropouts occurred in the next few weeks. About a quarter of those who apply remain in active treatment, said C. M. Rosenberg. • Nine categories of negative consequences of on-the-job behavior of alcoholic employees were reviewed by M. A. Maxwell (U.S.A.). Deterioration of work behavior and personality changes, as well as absenteeism, were most common. • M. Mann (U.S.A.) detailed 150 years of alcohol problems in the United States.

• Treatment success, as indicated by a study of 1000 patients, seems to depend most of all on achieving sustained performance in the treatment dialogue. Other factors, such as early diagnosis and involvement of the total family unit are also significant, said J. R. Moon et al. of Australia. • The typical high school user of alcohol shows a similar profile to the drug user, while at the university level, there are significant differences, according to a survey conducted by B. Kissin, et al. (U.S.A.). • J. F. Hallan (U.S.A.) outlined a systems approach to alcoholism programming and to drug problems, including system-mapping, system design, and system engineering.

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