ADHD, Alcoholism and Other Addictions by Wendy Richardson, M.A., LMFCC

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It is common for people with ADHD to turn to addictive substances such as alcohol, marijuana, heroin, prescription tranquilizers, pain medication, nicotine, caffeine, sugar, cocaine and street amphetamines in attempts to soothe their restless brains and bodies. Using substances to improve our abilities, help us feel better, or decrease and numb our feelings is called self-medicating.

Putting Out Fires With Gasoline

The problem is that self-medicating works at first. It provides the person with ADHD relief from their restless bodies and brains. For some, drugs such as nicotine, caffeine, cocaine, diet pills and "speed" enable them to focus, think clearly and follow through with ideas and tasks. Others chose to soothe their ADHD symptoms with alcohol and marijuana.

People who abuse substances, or have a history of substance abuse are not "bad" people. They are people who desperately attempt to self-medicate their failings, and ADHD symptoms. Self-medicating can feel comforting. The problem is that self-medicating brings on a host of addiction-related problems that over time make our lives much more difficult. What starts out as a "solution" can cause problems including impulsive crimes, domestic violence, addictions, increased high risk behaviors, lost jobs, relation-ships, families, and death. Too many people with untreated ADHD, learning and perceptual disabilities are incarcerated, or dying from co-related addiction.

Self-medicating ADHD with alcohol and other drugs is like putting out fires with gasoline. You have pain and problems that are burning out of control, and what you use to put out the fire is gasoline. Your life may explode as you attempt to douse the flames of ADHD.

An article in *American Scientists* tells us that, "In the United States alone there are 18 million alcoholics, 28 million children of alcoholics, 6 million cocaine addicts, 14.9 million who abuse other substances, 25 million addicted to nicotine."(1) That adds up to at least 63.5 million Americans addicted to substances.

Who Will Become Addicted?

Everyone is vulnerable to abusing any mind-altering substance to diminish the gut wrenching feelings that accompany ADHD. There are a variety of reasons why one person becomes addicted and another does not. No single cause for addictions exists; rather, a combination of factors is usually involved. Genetic predisposition, neuro-chemistry, family history, trauma, life stress, and other physical and emotional problems contribute. Part of what determines who becomes addicted and who does not is the combination and timing of these factors. You may have a genetic predisposition for alcohol, but if you choose not to drink you will not become an alcoholic. The same is true for drug addictions. If you never smoke pot, snort cocaine, shoot or smoke heroin, you will never become a pot, coke or heroin addict.

The bottom line is that people with ADHD as a whole are more likely to medicate themselves with substances than those who do not have ADHD. Drs. Hallowell and Ratey estimate that 8 to 15 million Americans suffer from ADHD; other researchers estimate that as many as 30-50% of them use drugs and alcohol to self-medicate their ADHD symptoms.(2)

This does not include those who use food and compulsive behaviors to self-medicate their ADHD brains and the many painful feelings associated with ADHD. When we see ADHD, it is import to look for substance abuse and addictions. And when we see substance abuse and addictions, it is equally important to look for ADHD.

Prevention and Early Intervention

"Just Say No!" may sound simple, but if it was simple, we would not have millions of children, adolescents and adults using drugs every day. For some, their biological and emotional attraction to drugs is so powerful that

they cannot conceptualize the risks of self-medication. This is especially true for the person with ADHD who may have an affinity for risky, stimulating experiences. (3)

This also applies to the person with ADHD who is physically and emotionally suffering from un-treated ADHD restlessness, impulsiveness, low energy, shame, attention and organization problems, and a wide range of social pain." It is very difficult to say no to drugs when you have difficulties controlling your impulses and concentrating and are tormented by a restless brain or body. The sooner we treat children, adolescents and adults with ADHD, the more likely we are to help them to minimize or eliminate self-medicating.

Many well-meaning parents, therapists and medical doctors are fearful that treating ADHD with medication will lead to addiction. Not all people with ADHD need to take medication. For those who do, however, prescribed medication that is closely monitored can actually prevent and minimize the need to self-medicate. When medication helps people to concentrate, control their impulses, and regulate their energy level, they are less like to self-medicate.

Untreated ADHD and Addiction Relapse

Untreated ADHD contributes to addictive relapse, and, at best, can be a huge factor in recovering people feeling miserable, depressed, unfulfilled, and suicidal. Many individuals in recovery have spent countless hours in therapy, working through childhood issues, getting to know their inner child, and analy-zing their behaviors and why they abuse substances.

Much of this soul searching, insight and release of feelings is absolutely necessary to maintain recovery. But what if after years of group and individual therapy, and continued involvement in addiction programs, you still impulsively quit jobs and relationships, cannot follow through with your goals and dreams, and have a fast, chaotic or slow energy level? What if, along with you addictions, you also have ADHD?

Treating Both ADHD and Addictions

It is not enough to treat addictions and not treat ADHD, nor is it enough to treat ADHD and not treat corelated addictions. Both need to be diagnosed and treated for the individual to have a chance at ongoing recovery. Now is the time to share information so that addiction specialists and those treating ADHD can work together. It is critical that chemical dependency practitioners understand that ADHD is based in one's biology and responds well to a comprehensive treatment program that sometimes includes medications. It is also important for practitioners to support the recovering person's involvement in Twelve-Step programs and help them to work with their fear about taking medication.

A Comprehensive Treatment Program includes:

- A professional evaluation for ADHD and co-related addictions.
- Continued involvement in addiction recovery groups or Twelve Step programs.
- Education on how ADHD impacts each individual's life and the people who love them.
- Building social, organizational, communication, and work or school skills.
- ADHD coaching and support groups
- Closely monitored medication when medication is indicated.
- Supporting a person's decision to take medication or not. (In time they may realize that medication is an essential part of their recovery.)

Stages of Recovery

It is important to treat people with ADHD and addictions according to their stage of recovery. Recovery is a process that can be divided into four stages:

- pre-recovery,
- early recovery,
- middle recovery and
- long-term recovery.

Pre-recovery:

This is the period before a person enters treatment for their addictions. It can be difficult to sort out ADHD symptoms from addictive behavior and intoxication. The focus at this point is to get the person into treatment for their addictions or eating disorders. This is not the time to treat ADD with psycho-stimulant medication.

Early Recovery:

During this period it is also difficult, but not impossible, to sort out ADHD from the symptoms of abstinence which include, distractibility, restlessness, mood swings, confusions, and impulsivity. Much of what looks like ADHD can disappear with time in recovery. The key is having a life long history of ADHD symptoms dating back to childhood. In most cases early recovery is not the time to use psycho-stimulant medication, unless the individual's ADHD is hindering their ability to attain sobriety.

Middle Recovery:

By now addicts, alcoholics, and people with eating disorders are settling into recovery. This is usually the time when they seek therapy for problems that did not disappear with recovery. It is much easier to diagnose ADHD, and medication can be very effective.

Long Term Recovery:

This is an excellent time to treat ADHD with medications when warranted. By now most people in recovery have a life that has expanded beyond trying to stay clean and sober. Their recovery is an important part of their life, and they now have the flexibility to deal with other problems, such as ADHD.

Medication and Addiction

Psychostimulant medication, when properly prescribed and monitored, is effective for approximately 75-80% of people with ADHD. These medications include Ritalin, Dexedrine, Adderall, and Desoxyn.

It is important to note that, when these medications are used to treat ADHD, the dosage is much less than what addicts use to get high. When people are properly medication, they will not feel high or "speedy," instead they will report an increase in their abilities to concentrate, and control their impulses and activity level. The route of delivery is also quite different. Medication to treat ADHD is taken orally, while street amphetamines are frequently injected or smoked.

Non-stimulant medications, such as Cylert, Effexor, Nortriptyline, Prozac, Wellbutin, and Zoloft,can also be effective in relieving ADHD symptoms for some people. These medications are frequently usedin combination with a small dose of a psychostimulant.

Recovering alcoholics and addicts are not flocking to doctors to get stimulant medication to treattheir ADHD. The problem is that many are hesitant, for good reasons, to use medication, especially psycho–stimulants. It has been my experience that once a recovering person becomes willing to try medication, the chance of abuse is very rare. Again, the key is a comprehensive treatment program that involves close monitoring of medication, behavioral interventions, ADHD coaching and support groups, and continued participation in addiction recovery programs.

There is Hope

In the last few years I have witnessed the transformation of lives that were once ravaged by untreated ADD and addictions. I have worked with people who had relapsed in and out of treatment programs for ten to twenty years attain ongoing and fulfilling sobriety once their ADHD was treated. I have seen people with ADHD achieve recovery once their addictions were treated.

"Each day I understand more about how pervasive ADHD is in my life. My clients, friends, family and colleagues are my teachers. I wouldn't wish ADHD and addictions on anyone, but if these are the genetic cards that you have been dealt, your life can still be fascinating and fulfilling." (3)

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