

Returning From Relapse

Few people catch a quality life of sobriety on the first pass, but bouncing back even better is possible.

by Tracey Dee Raub



Photo: James Steidl

Ninety percent.

That's the widely accepted statistic on the number of people recovering from substance abuse who will have at least one relapse in the first four years.

By many studies, those who move into long-term sobriety have this daunting reality to heed: People with more recovery time are less likely to return to a program of recovery after a relapse than those who are new to recovery.

The short version of these studies and statistics? No one struggling with alcoholism or addiction is ever out of the woods. Relapses happen to the majority of those who undertake recovery. That's just fact.

What's tragic, however, is when the fear, shame, guilt and remorse at the core of this disease propel a slip into a full-blown, prolonged relapse and, in the saddest situations, result in death.

"I take this illness very, very seriously," said Johanna O'Flaherty, vice president of treatment services at the Betty Ford Center in Rancho Mirage, Calif. "I tell everyone I work with to jump back into the river because no matter how long we are in the river, we are a just few strokes away from a relapse."

O'Flaherty, a recovering alcoholic with 34 years, went in and out of relapse during early sobriety. Although she can cite a long list of factors that contribute to relapse, this one trumps them all: "SLIP: Sobriety Lost Its Priority," she says. "When sobriety loses its priority, all of us, no matter how much we have been around, are in trouble."

Deni Carise, chief clinical officer and senior vice president for Phoenix House treatment and prevention centers, stresses the importance of recognizing alcoholism and addiction as chronic medical disorders that can be affected by behavior, just like diabetes, hypertension and asthma.

"The predictors of relapse in substance abuse, diabetes, asthma and hypertension are all the same," says Carise, who has been sober for 17 years since a relapse after nine years in recovery.

"With all of them, if you don't take the medicine and you don't follow professional guidance, you will relapse," she says.

In the case of diabetes, for instance, not following the prescribed diet will trigger a return of the condition; in substance abuse, dropping out of a support program is likely to do the same.

She cited the Institute of Medicine report, "Addiction Treatment Compared With Treatments for Other Illnesses," that found the top relapse predictors to be the same in all four chronic illnesses: lack of adherence to treatment, poverty, low family support and co-occurring medical or psychiatric disorders.

Specifically of substance abuse, she adds, "The only immediate reason you relapse is you forget the most important thing you need to do is not pick up a drink or drug."

O'Flaherty and Carise both stress learning to identify triggers to avoid any relapse at all. And yet, they are realistic.

"We've had people come in for first treatment and stay sober for years," Carise says. "And we have people who have been to treatment one, two, three, 10 times. And suddenly, the 12th time is the charm.

"People relapse when they lose a spouse or parent or job, but people also stay sober when they lose a spouse or parent or job. You don't have to relapse, no matter what happens. And if you do, you have got to get right back in there."

O'Flaherty tries to help clients understand that with a strong program of recovery and a rich life, it's possible to succeed on a first try.

"Despite the statistics, I emphasize that there are many people who do not relapse," she stresses. "Relapse is very painful."

RELAPSE STORY: DENI CARISE

Chief Clinical Officer and Senior Vice President, Phoenix House

She was just going to dabble in it, have one little drink to make her feel better.

Deni Carise was finishing graduate school, stressed out, depressed, uncertain about her future and far away from her friends while on a business trip in California.

She also was nine years clean from cocaine and alcohol when her mind began to play tricks on her.

"I forgot how important it was not to drink or drug," says Carise.

So she sidled up to the bar, ordered a drink, then another. And then she had another idea.

"I decided to meet with a woman who dealt drugs," she says. "I was going to freebase, hop back on a plane, go home and pretend it never happened."

Lucky for her, the cocaine was never delivered.

"It was hugely beneficial to me," says Carise, who has since remained clean for 17 years. "I already knew I couldn't be in the same zip code as cocaine. It was clear that was the drug that was going to kill me. But even though I had been sober for awhile, I never felt I had a problem with alcohol."

The experience was excruciating, but the lesson she learned powerful: "The Deni who drinks is the Deni who drugs, is the Deni who can't keep a job, is the Deni who can't keep an apartment for a month. I learned that not drinking is just as important as not doing cocaine."

At home, she got right back to her program, confessed and moved forward. She remains grateful for having been welcomed by her fellowship because she was afraid that wouldn't happen.

"I think AA teaches us to some extent that if you have one drink, you are right back where you were immediately," Carise says.



“That is helpful to many people. But I also think that teaches people that if you do slip, you might as well do it all the way because you have totally blown it. I think that is unfortunate because this is a chronic disease.”

A great proponent of Alcoholics Anonymous, she also believes there’s room for thoughtful criticism along with acceptance.

“Of course it’s better not to relapse,” she urges. “The truth is, you might not come back.”

RELAPSE STORY: JEAN MACKIE

Addictions Interventionist

Alcohol, specifically wine, was Jean Mackie’s drug of choice. At age 49 and nearly eight years sober, the professional interventionist says a one-night relapse was the best thing that ever happened to her sobriety.

“It was not fun,” she says. “So it was great.”

Mackie believes she was born with an addictive brain. “I came out afraid of the world,” she says. It was many years before she discovered alcohol could quell that fear. She never drank in high school or even in college. After moving to New York City as a young adult, she sometimes joined the bar scene. She noticed she tended to get quite drunk.

“I told myself I was just going overboard once in a while because I was working so hard and socially starved,” she recalls. “I was a struggling actor and producer. I made good money as a party designer. I had no balance in my life. I always worked. I lived like that for 23 years. Something had to give.”

At first, what gave was alcohol. And then it began to take.

Mackie went from social drinker to a full-blown alcoholic in about four years. She drank in the morning, on the job and pretty soon couldn’t go an hour at an event without “throwing it down me.”

After a particularly ugly night, her parents, partner, his dad and a counselor planned an intervention while she was passed out. It

worked and she checked into the Betty Ford Center for 30 days.

“I do not come from money, so for two reasons, I wanted to leave treatment,” she says. “First, when I heard the cost, I almost passed out. There are my mom and dad bailing me out again. And second, everyone I met had been through treatment numerous times: three, seven, more. I thought, ‘Let’s just call this a day now. I’m going to an island to drink myself to death, and no one will worry about me ever again.’”

She didn’t leave. But she did relapse a month out of treatment.

“It was the night before Halloween, and I was working a party alone with a bartender,” she recalls. “Four hours of tray passing—and I hate tray passing. It is pretentious and snooty. I always used to drink to get through this.”

This night was no different.

“I made it for two hours,” she says. “I was bussing a tray of glasses to the back, and there was a half-glass of wine. I went into the bathroom, drank it. ... And then I quickly thought, ‘Nobody saw you, and it’s not going to happen again. Right, Jean?’”

Six or so minutes later, it happened again.

“That tickle came to my brain that said, ‘Hey old friend.’ ... I started taking people’s glasses and downing them. I wanted it to kick me over the bar, but it wouldn’t let me be safe. It kept saying, ‘No, we need more, we need more.’”

At home, she crawled into bed and played normal. In the morning, however, she couldn’t hold the secret any longer.

“I told my boyfriend I drank. He looked at me and said, ‘I know.’ We fought. It was ugly.”

And then it was over.

“The biggest thing I learned is there was still a question in my mind: ‘Are we done here?’” she says in hindsight. “That one night was what I needed to lock it in. I had my *Good Housekeeping* Seal of Approval. I have no off switch.”

RELAPSE STORY: STEVE WEINGLASS

TV and Music Producer and Manager

“Want to hear an anecdote?” Steve Weinglass asks.

It’s a rhetorical question. The 63-year-old music professional, who has been sober for seven years, doesn’t wait for an answer. He starts telling the story of his bizarre trip to recovery.

It’s nine years ago. Weinglass is driving alone from the East Coast to Los Angeles to check into treatment for his crack addiction. In the spirit of a truly determined addict, he partied all the way.

“The trip was ridiculous,” he says.

Somewhere along Route 10 on the Gulf Coast, he was listening to a news radio show in which the police chief was receiving accolades for his good job handling Mardi Gras. This was when Weinglass realized he was running out of drugs.

“There was a call-in, a lady who was a local and questioned this praise. She went on to say, ‘Because we all know those deals on such-and-such street were all happening,’” he says. “So I wrote down on my little pad the streets she mentioned. I stopped and got a map and drove to those streets. And sure enough, I scored real well in New Orleans.”

Fast forward a few weeks: Weinglass is in the care of the Musician's Assistance Program (today MusiCares), founded in the 1980s by the late, great jazzman Buddy Arnold, who struggled with his own addictions. Weinglass is a resident of a sober living facility for musicians, connected to the outpatient clinic Matrix and attending meetings with peers who are showing him they can do what they want while staying sober.

He immersed himself. "But," he cautions, "I was harboring a reservation in my head. I wasn't being completely honest. ... I had this idea that once I got some of this sobriety, I would have myself a little party again."

Have you made it back after a relapse? Share your insight with your fellow Renewers by emailing us at editor@reneweveryday.com with the subject line "Return from Relapse."

That's how the first of three relapses came about after nine months: a little crack here, a little there—silence— and soon a lot of crack.

"It was shameful," he recalls. "I had made serious friends. And

here I was lying and cheating again. To realize that I had slipped back into being a liar really bothered me. But I couldn't admit it."

When he was no longer able to "keep the fake on," he sought help from a clinical psychologist at Matrix.

"She said I had to tell people. I said I couldn't do that. She asked if I thought they were going to judge me. I said, yeah. She said, 'I will walk you to the room.'"

Then this very serious woman added, "And if they give you a hard time, fuck them."

Weinglass laughed, a lot. And while he was doing so, she opened the door. He was back.

Despite returning to treatment, Weinglass had two more relapses, each shorter, so that what he hopes will be his last encounter with crack was a two-night affair.

As to what he was thinking, he doesn't believe he was—and that was the problem.

"I turned it all off," he says. "I let my craving overrun my sensibility."

He used a number of strategies to achieve a new level of honesty and commitment. One unconventional method was when his sponsor asked him to start looking for people to sponsor after just 30 days of sobriety.

"I had to stay ahead of them and listen," he says. "That has worked for me ever since. I hear their lies and identify the lies within myself."

To prevent a next relapse, he says, above all there is this: "If you look in the mirror and you can't tell yourself you are done, it's not going to work."

What does Weinglass say to himself in that moment?

"I say, I'm done." ■

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HOW TO REDUCE THE RISK OF RELAPSE

Talk to any alcohol and substance abuse counselor and he will tell you that the relapse happens long before the ingestion of a drink or drug. If you are in recovery, regardless of how long, you need to be on guard for a potential relapse every day. Here are indicators of high-risk individuals, behaviors to watch for and ways to prevent relapse:

Risk Factors

- No treatment; "white-knuckling it"
- Lack of adherence to treatment
- Dual diagnosis/psychiatric comorbidity
- Poverty
- Lack of family support
- Cross-addictions

Warning Signs

- Dishonesty: telling lies, not just about thoughts of using but in any area
- Moral breakdown: personal values lose their value
- Impatience: a sense that recovery is not happening fast enough
- Isolation: not telling people how you feel or calling anyone when you feel like using
- Anger: argumentativeness, frustration and self-righteousness
- Depression: a prolonged sense of despair and hopelessness
- Self-pity: wondering, "Why me?"
- Cockiness: an inflated sense of having beaten the illness
- Complacency: losing sense of priority
- Ungratefulness: wondering, "Is that all there is?"

Prevention Techniques

- Maintain stability, especially in the first few years of sobriety. Avoid upheaval such as moving, changing jobs and other drastic life changes.
- Choose a support group that works for you, and stay very close to it.
- Honestly talk problems through with a trusted friend, counselor, clergy person or sponsor.
- Reflect daily through meditation, prayer or any other preferred quiet time.
- Exercise, and recreate. Endorphins lift your mood, and the activity keeps you healthy.
- Eat nutritiously. It's no secret that hunger hurts sobriety.
- Sleep and rest. Ditto to above. Tired is a danger zone.
- Seek fulfillment and fun. Using takes time. Fill your life with things that satisfy you. Volunteer. Play music. Read novels. Join a craft group.

Sources: McLean Center at Fernside, Princeton, Mass.; The Hazeldon Foundation; National Institute for Health; National Center for Health Statistics; The Betty Ford Center; Phoenix House