

20 Remembering your last drunk

That's not a typographical error. The word is "drunk," not "drink," as you'll see.

"A drink" is a term which has awakened pleasurable echoes and anticipations in millions of people for centuries.

Depending on our age, and on the circumstances which surrounded our first experiences with alcohol, we all have various memories and hopes (sometimes, anxieties) aroused by the thought of a cool beer, a martini, a gin and tonic, a Scotch and soda, a sip of wine, or whatever.

Repeatedly, in the early drinking of most people, the anticipations were fully met by the desired drink. And if that happened often enough, we naturally learned to think of "a drink" as a satisfying event—whether it gratified our need to conform to a religious custom, quenched our thirst, graced a social occasion, relaxed us, stimulated us, or gave us any other kind of satisfaction we sought.

It is not difficult for a 55-year-old Finn, for example, when he hears someone suggest a drink, to recall the flush of warmth that a shot of vodka or aquavit brought on a cold day in his youth.

One young woman may instantly visualize an elegant crystal glass of champagne, glamorous surroundings, new clothes, a new lover. Another may think of a pull from a bagged bottle toted by the long-bearded youth in denim at her side while the music rocks, the strobe lights flash through the sweet smoke, and everybody screams in ecstasy.

One A.A. member says "a drink" makes him almost taste pizza with a brew. A 78-year-old widow among us is inevitably reminded of the sherry egg-nogs she began to like at bedtime in a nursing home.

Although perfectly natural, such mental images are now, for us, misleading. Those were the ways some of us *began* to drink, and if that had been the whole truth of our drinking history, it is unlikely that we could have developed much of a drinking problem.

A searching, fearless look at our complete drinking record, however, shows that in the last years and months our drinking never created those perfect, magic moments again, no matter how often we tried for them.

Instead, over and over, we wound up drinking more than that, and landed in some kind of trouble as a result. Maybe it was simply inner discontent, a sneaky feeling that we were drinking too much, but sometimes it was marital squabbles, job problems, serious illness or accidents, or legal or financial worries.

Therefore, when the suggestion of "a drink" comes to us, we now try to remember the *whole* train of consequences of starting with just "a

drink." We think the drink all the way through, down to our last miserable drunk and hangover.

A friend who offers us a drink usually means simply that one sociable glass or two. But if we are careful to recall the full suffering of our last drinking episode, we are not deceived by our own long-ago notion of "a drink." The blunt, physiological truth for us, as of today, is that a drink pretty surely means a drunk sooner or later, and that spells trouble.

Drinking *for us* no longer means music and gay laughter and flirtations. It means sickness and sorrow.

One A.A. member puts it this way: "I know now that stopping in for a drink will never again be—for me—simply killing a few minutes and leaving a buck on the bar. In exchange for that drink, what I would plunk down now is my bank account, my family, our home, our car, my job, my sanity, and probably my life. It's too big a price, too big a risk."

He remembers his last drunk, not his first drink.

21 Avoiding dangerous drugs and medications*

Mankind's use of various chemicals to change moods and alter feelings is ancient and widespread. Ethyl alcohol was probably the first of such chemicals, and may have always been the most widely popular drug for this use.

Some drugs have legitimate value and are beneficial when administered by knowledgeable physicians if used solely as directed, and discontinued when they are no longer a medical necessity.

As A.A. members—not physicians—we are certainly not qualified to recommend any medications. Nor are we qualified to advise anyone not to take a prescribed medication.

What we can do responsibly is to offer only our personal experience. Drinking became, for many of us, a sort of self-medication. We often drank to feel better and to feel less sick.

And thousands of us used other substances to "feel better," too. We discovered stimulants that seemed to counteract the effects of a hangover or relieve our depression (until they let us down, too), sedatives and tranquilizers that could substitute for the alcohol and calm our nerves, prescription and over-the-counter medications and pain killers

*See also Appendix—excerpt from A.A. Conference-approved pamphlet, "The A.A. Member—Medications and Other Drugs."