

Alcohol and Surgery

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It is important to understand the risks associated with alcohol use and surgery.

Abstaining from alcohol prior to surgery is recommended as it has been shown to be associated with fewer postoperative complications.

Postoperative Complications Related to Alcohol Use Can Include:

- Infection to the surgical site
- Slower wound healing
- Increased risk of irregular heart beat or rhythm (arrhythmias)
- Prolonged length of stay
- Increased difficulty with anesthesia and pain management
- Postoperative delirium (confusion)
- Withdrawal symptoms that may include seizures and delirium tremens (DTs)

Alcohol Withdrawal

Among surgical patients who consume higher amounts of alcohol, patients who undergo alcohol withdrawal before, during or after their surgery have higher levels of illness than patients without withdrawal. Symptoms of alcohol withdrawal generally begin within 6 to 24 hours of the last alcohol use or sudden decrease in chronic alcohol use.

Alcohol Withdrawal Symptoms:

- Trouble sleeping
- Sweating
- Shakiness
- Racing Heart
- Restlessness
- Sensed things that were not there
- Nausea
- Seizure

Some patients may require medically supervised withdrawal. Please discuss your concerns with your family and primary care provider.

It is important to disclose your alcohol use with your surgeon and primary care physician. Questions to ask yourself:

- Had times when you ended up drinking more, or longer than you intended?
- More than once wanted to cut down or stop drinking, or tried to, but couldn't?
- Spent a lot of time drinking? Or being sick or getting over the after effects?
- Experienced craving — a strong need, or urge, to drink?
- Found that drinking — or being sick from drinking — often interfered with taking care of your home or family? Or caused job troubles? Or school problems?
- Continued to drink even though it was causing trouble with your family or friends?
- Given up or cut back on activities that were important or interesting to you, or gave you pleasure, in order to drink?
- More than once gotten into situations while or after drinking that increased your chances of getting hurt?
- Continued to drink even though it was making you feel depressed or anxious or adding to another health problem? Or after having had a memory blackout?
- Had to drink much more than you once did to get the effect you want? Or found that your usual number of drinks had much less effect than before?
- Found that when the effects of alcohol were wearing off, you had withdrawal symptoms?

Based on the number of questions you answered "yes" to—Severity of Alcohol Usage

Criteria: Mild: (2-3), Moderate: (4-5), Severe: (6 or more)

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) defines "risky" alcohol use as:

- **Men under age 65**
Greater than 14 standard drinks/week on average or more than 4 drinks on any day (or episode of drinking) in the last year*
- **Women and all adults 65 years or older**
Greater than 7 drinks per week on average or more than 3 drinks on any day in the last year*

*Amounts are based on a standard drink. Defined as 12 grams of ethanol, 5 ounces of wine, 12 ounces of beer, or 1.5 ounces of 80 proof spirits

Please talk to your physician about any concerns you have abstaining from Alcohol. Additional resources can be made available to you.

Support Services:

The Substance Abuse and Mental Health Services Administration (SAMHSA) supports alcohol treatment services. Its website is designed to help find services that might help if you or a loved one are concerned about Alcohol Use Disorder (AUD)

<http://findtreatment.samhsa.gov/TreatmentLocator/faces/quickSearch>

Alcoholics Anonymous (AA) http://www.aa.org/pages/en_US/find-aa-resources