

Women seek alcohol treatment between an average of 4 to 5 years earlier than men

August 9 2013

Epidemiological studies have revealed that historical differences between men and women in substance use – such as lifetime dependence rates, and quantities of alcohol consumed – have narrowed in recent decades. However, recent examination of gender differences in drinking patterns and rapidity of disease progression in women, generally referred to as "telescoping," among treatment-seekers is largely lacking. Results from a new study of these gender differences in a sample of individuals seeking treatment for a substance use disorder are only partially supportive of gender-contingent telescoping.

Results will be published in the January 2014 issue of *Alcoholism: Clinical & Experimental Research* and are currently available at Early View.

"Historically, alcoholism has been considered a 'male disease' due to its markedly higher prevalence among men," explained Ben Lewis, a postdoctoral associate in the psychiatry department at the University of Florida as well as corresponding author for the study. "More recently it has been recognized that while men may have a higher prevalence, [women](#) may be uniquely vulnerable to negative consequences of chronic drinking. In particular, it was recognized that women might experience a 'telescoping' effect, wherein they progress more rapidly through various stages of the disease."

"Although we have considerable knowledge regarding the evolution of [alcohol](#) problems, research focusing on how men and women differ in

how alcohol use disorders develop, what factors put drinkers at greater risk compared with those who do not develop alcohol-related problems, and what variables are most important in the maintenance of sobriety as they pertain specifically to men compared with women may aid in tailoring medical and psychosocial treatment methods," added Rosemary Fama, senior research scientist and senior research neuropsychologist at Stanford University School of Medicine and SRI International.

"While previous examinations of [gender differences](#) among treatment seekers have been conducted, these examinations generally use somewhat strict exclusion criteria, meaning that participants are often selected based on factors such as age and education, and often report limited use of other drugs," said Lewis. "Our study is unique in that no such exclusions were made. We feel this makes our findings more applicable to the broad population of treatment seekers."

Lewis and his co-author and mentor Sara Jo Nixon asked men (n=274) and women (n=257) in substance abuse treatment facilities to complete inventories quantifying affect, intellectual ability, and drinking consequences. Data were also collected and analyzed pertaining to family history, spousal alcoholism, and nicotine use, as well as alcohol drinking levels, age at drinking milestones such as first drink and first intoxication, and progression from milestones to alcohol problems or treatment.

"Certain aspects of our findings confirm 'telescoping' in women, but importantly, others do not," said Lewis. "For example, the finding that men and women both transitioned from early drinking events to problems with alcohol in the same average time would not support the concept of telescoping. In contrast, and more consistent with telescoping, women moved from experiencing drinking problems to treatment an average of four years earlier."

"More specifically," said Fama, "in a moderately large heterogeneous population of drinkers seeking treatment, a telescoping effect is observed. Women, on average, sought treatment between four to five years earlier than men; in other words, 10 years versus 15 years. Although the study does not specifically address why this is the case, it is important for primary physicians and first line health care workers to know that it takes, on average, approximately 10 years to progress from self-reported problems with alcohol to treatment for women, and approximately 15 years to progress from self reported problems with alcohol to treatment for men."

Both Lewis and Fama were unsure why exactly women experienced a more rapid progression to treatment. Fama speculated that women may progress to treatment more rapidly than men because women may view alcohol-related problems as less of a social stigma than men. "That is, women may be more apt to admit they need professional help for their drinking and that they have a 'problem' with their pattern/amount of alcohol consumption than do men," she said. Conversely, Lewis said the data suggest that [men and women](#) entered treatment with similar levels of negative consequences, although women reach this "threshold" earlier.

"The bottom line," said Lewis, "is that hopefully these results will raise awareness concerning the restricted time window between alcohol problems and the development of sufficient negative consequences to prompt seeking treatment among women. These findings emphasize the need for greater attention to women's issues, determining sex-specific risk factors, as well as identifying subgroups most likely to require treatment. Additionally, there must be a greater awareness of the importance of intervening when alcohol problems are first experienced. If we are able to develop appropriate interventions, we may mitigate the need for inpatient [treatment](#) for some of these women."

Fama agreed. "This study shows that women start drinking regularly

around the same age as men – the average age was approximately 18 for men and 19 for women – with self-reported problems starting in their early 20s for both sexes. Alcohol use problems appear to be just as relevant in women as in men in young adulthood; thus, programs educating young women and health care providers to the incidence and prevalence of alcohol related conditions in early adulthood are certainly warranted."

Provided by Alcoholism: Clinical & Experimental Research

Citation: Women seek alcohol treatment between an average of 4 to 5 years earlier than men (2013, August 9) retrieved 4 May 2024 from <https://medicalxpress.com/news/2013-08-women-alcohol-treatment-average-years.html>

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