Understanding the Relapse Process in Addiction

By Peggy L. Ferguson, Ph.D.

The relapse process can be easy to miss, and it often starts with a subtle decrease in our efforts to stay in recovery. The setup for the relapse process usually looks like this: We attend meetings, talk to people in the program, and use daily meditation to improve our conscious contact with God as we understand Him. We are working on a program of recovery and experiencing some benefits of abstinence. We feel better physically, emotionally, and spiritually. Relapse in addiction recovery looks like many other medical relapses.

A typical example is stopping antibiotics when we start to feel better. We eliminate the prescription before the symptoms are resolved, and the symptoms return. Similarly, when we start feeling confident in recovery and let up on recovery activities and regimens (like going to meetings, talking to people in the program, using a sponsor, exercising daily, etc.,) we begin to have a return of "symptoms." Even when feeling better, we must remain vigilant and committed to our recovery program. Relapse is predictable and preventable.

Recovery proceeds in stages, beginning with abstinence and evolving into profound emotional, physical, psychological, spiritual, behavioral, and interaction changes. Our schemas of the world and our place in it change. Developmental tasks from one stage of recovery build upon the gains established from the previous stage. Once abstinence is achieved, more energy is focused on addressing lifestyle changes that encourage sobriety. We move into a level of behavioral change that exchanges addictive pleasure-seeking with healthy, joyful, meaningful life experiences. With all the successes due to progressing through stages, our attitudes and thinking about addiction begin to change. Our skill development continues, and we learn to appropriately manage feelings. Finally, genuine self-worth and confidence replace cognitive distortions regarding our

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ability to handle life on life's terms. The Promises of AA illustrate the benefits of the recovery process.

Relapse prevention should involve a plan for moving through the stages of recovery. Impediments and roadblocks occur throughout recovery, and getting stuck at a particular point would be easy. Warning signs of a regression in recovery could include reactivation of self-defeating beliefs, negative emotions, glamorizing aspects of alcohol and drugs while blocking out negatives, and seeking out unsupportive friends who won't challenge addictive behaviors. A return of addiction symptoms usually involves changes in thoughts and feelings. We may revert to old defense mechanisms, which make it easier to let up on recovery activities or return to risky people and situations. We might also experience irritability, anger, extra-sensitivity, fear, and other challenging emotions. If we're not mindful of our thoughts and feelings, we may unwittingly stuff or act them out or even use obsessive-compulsive behaviors to numb them.

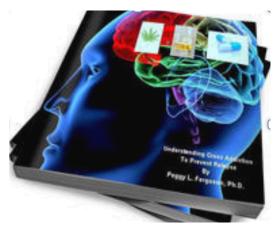
Relapse in addiction is not just about taking that first drink; it is a complex behavioral dynamic that reactivates defenses, isolation, elevated stress, and impaired judgment. Symptoms of relapse include apprehension, denial, white-knuckle commitment to sobriety, a shift in focus to compulsively impose sobriety on others, defensiveness, impulsive behavior, tendencies towards loneliness, tunnel vision, minor depression, feelings of futility, irregular eating habits, listlessness, irregular sleeping habits, progressive loss of daily structure, dissatisfaction with life, feelings of powerlessness and helplessness, unreasonable resentments, and loss of control. These changes often precede the return to drinking. Any of these symptoms can signal an impending relapse.

The changes in thinking, feeling, and behavior are related to old defense mechanisms which justify them: irritability, anger, extra-sensitivity to hurt, fear, and discontent return. When we do not mindfully monitor our thoughts and feelings with an eye on recovery, we are probably not processing them and dealing appropriately with them. Instead, we may be stuffing feelings, acting them out, or using other obsessive-compulsive behavior to numb them. All the while, we would be using the same

distorted thinking processes we had in active addiction to telling ourselves that we are correct and justified in our behavior.

The return to old thinking and feelings can go unrecognized by you for a long time before finding yourself seeking out high-risk environments and people. We develop a mindset that either tells us, "Why not? Might as well..." that we have magically regained "control," or that it is no one's business but our own. The relapse process is typically in place before taking that first drink/joint/pill. Unless you actively monitor your relapse symptoms (and sometimes even then), defenses prevent you from seeing that you are in the relapse process.

Accountability helps with relapse prevention. Others close to you can often tell you are heading for relapse long before you take the chemical. Support groups come in handy for feedback. Listen when they tell you that they see you acting as you did before recovery. Relapse is predictable, especially to those who have been there and done that. At any point in the relapse process, you can interrupt the progressive slide into a return to using by stepping up your recovery activities and asking for help. Consider all the recovery activities you engaged in when you were feeling better. Return to those and consider getting additional help or adding more meetings, activities, and self-care to your recovery routine.



Pay attention! Don't let relapse sneak up on you.

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Understanding Cross Addiction To Prevent Relapse

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