

## UNDERSTANDING AND MANAGING THE RELAPSE PROCESS

The relapse process is the movement away from recovery. It means that if we are not paying attention to our recovery and not doing things that contribute to the process of recovery, we may be unconsciously moving in the direction of relapse. Relapse is not uncommon during recovery. It may happen once or even more than once during different stages of recovery. Relapse and recovery go side by side. They can be actually perceived as two sides of the same coin.

### **What exactly is relapse?**

We think that ‘relapse,’ means taking drugs after a period of abstinence, following treatment. It is actually not so. Relapse is not the mere event of going back to drugs.

An ‘event’ is something that has already happened, and therefore cannot be changed. It is not an event. Then what is relapse?

### ***It is a process***

‘Process’ refers to any ongoing situation that takes place stage by stage, and therefore can be interrupted and stopped at any point of time. Relapse is a process that creates, in stages, an irresistible craving in our mind for drugs. It is actually this thought process, which should be called a relapse. Relapse begins in the mind; and it begins much earlier than when we actually take drugs again.

### ***Relapse occurs within our mind***

‘Relapse patterns’ are formed by our attitudes and thought processes. In other words, we begin to ‘slip’ at the thought level.

### ***Relapse shows itself in a progressive pattern of behaviour***

Others can notice our thought processes through our behaviour. Our actions, reactions and responses show that we are heading towards drug use again.

## ***Relapse is preventable***

A common mistaken belief is that relapse occurs suddenly and spontaneously without warning signs. This belief produces a feeling of helplessness and powerlessness. This makes it sound like a mysterious process over which we recovering people have no control, and all we can do is to hope and pray that relapse does not occur. This is not true. There are many warning signs that precede a relapse. Once we learn to recognise and manage the early warning signs of relapse, we can stop the process and prevent a return to drugs.

However, 'a dry drunk / stoned experience' always precedes a return to drugs. In other words, there are certain warning signs of relapse that appear before we start abusing again.

### **\*What is 'dry drunk'?**

'Dry drunk' is an important term that has to be understood by us because we are likely to experience many 'dry drunk' problems during recovery. 'Dry drunk' is a term that describes the state of any alcoholic who is not at all comfortable when he is abstaining. We have to admit that during the drinking period, we displayed certain unproductive behaviour patterns and attitudes. If these traits persist even after we give up drinking, then we are called 'dry drunk'.

'Dry' refers to the fact that we are not drinking. 'Drunk' signifies the display of the same deviations in attitude and behaviour as were exhibited during the drinking period. To put it plainly, there is no improvement in the quality of our lives.

As alcoholism is a condition that affects us both physically and emotionally, the state of being a 'dry drunk' also does the same. Many of us believe that when we stop drinking, a state of normalcy will return automatically. But, the state of normalcy will return only if we stay away from alcohol and at the same time, make efforts to change our thinking and behaviour.

### **What and how do we change?**

*The basic premise of fire fighting is 'If an inflammable material and a source of heat and air come together, there is fire'. Most of the fire fighting techniques are based on choking off air supply.*

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\*Though 'dry drunk' is a term coined to refer to alcoholics, the same can very well be applied to drug dependents also.

In our case, addiction and the availability of drugs are permanently existing conditions. Like choking the air supply in fire fighting, we have to alter our thoughts, attitudes, behaviour and life style to prevent a relapse.

All along, our priority had been taking drugs. We kept saying “I will have just for today, I will stop tomorrow.” Now our thinking has got to change. Now we should focus on ‘abstaining just for today’. In sober life everything else will remain the same. We have to live with the same family, go to work in the same old office, live in the same neighbourhood, but our thinking has to alter, the way we are going to look at them, has to change. If our thinking remains just the same as when we were abusing, then we could be termed ‘dry drunk’.

*A man went to bathe in a river. The river was huge and broad. Suddenly, flash floods caused it to swell. As he was bathing in the middle of the river, the currents pushed the man deeper and further into it. Luckily he had just learnt swimming and he put in efforts and proceeded towards the shore. He stopped swimming for a moment, as he was tired and the strong currents pushed him in further. He lost the gains he had made. He doubled his efforts against the current of the river to move ahead. With some effort, he was in the same place, when he put in all his might and doubled the effort and pace, he moved ahead and reached the shore.*



Similarly recovery is not just staying off addictive substances. One needs to make conscious efforts to effect positive life style changes. If we are dry drunk, we are in danger of being swept back. Only consistent effort will see us moving upstream towards safety. I can now tell you with conviction, that dry drunk problems have to be recognised if they are to be checked. If only we are honest enough, can we recognise them.

## **What are the warning signs of relapse ?**

### **I Changes at the thought level**

#### *Thoughts about the associated pleasures*

We start thinking constantly about the pleasures associated with drugs.



*Two monks who were on a pilgrimage came to the bank of the river. There they saw a girl dressed in all finery, obviously not knowing how to cross, since the waves were high. Without much ado, one of the monks took her on his back, carried her across and put her down on dry ground on the other side.*

*Then the monks continued on their way. After an hour, the other monk started complaining, "Surely it is not right to touch a woman, Isn't it against the commandments to have contact with women? How could you go against the rules of a monk?"*

*The monk who had carried the girl, calmly but firmly replied, " I set her down by the*

*river an hour ago, why are you still carrying her?"*

Like the second monk, even when not taking drugs, we keep thinking about them.

By now, we would have realised and learnt from experience that taking drugs only leads to problems and situations that are difficult to handle. Unable to get rid of the unrealistic thoughts, we let them take root and allow them to grow into a big poisonous tree. We believe that there is nothing wrong in thinking about the pleasures associated with drugs. Our thoughts go out of control and the old morbid preoccupation starts.

### ***Fear about well being***

During the initial stages of abstinence, we experience extreme fear and anxiety.

*"How am I going to face life and solve problems without drugs?"*

Since chemicals had always been our trusted friend, there may be a total lack of confidence about our ability to manage life without using them. Even minor events lead to a lot of worry and anxiety. Everything seems threatening. Life and living appear to be unmanageable. Everything causes worry, anxiety and a feeling of helplessness.

### *Loneliness leading to depression*

We experience intense loneliness. Even when people are around, we feel deeply lonely. All along, we had been inside a circle drawn by ourselves with only the chemicals beside us. Sometimes our so called friends would be around. But the substance was the most important thing for us. Family members, real friends - all of them came after. Now during the initial stages of abstinence, we find it extremely difficult to socialise and form new friends. We are unable to open out and share our feelings even with the closest family members. Joy, happiness, and elation - all along, everything was associated only with drugs. Now, we are unable to relax or enjoy. This makes us very depressed. When the family members see us isolating ourselves in a corner, they want to cheer us up. They talk to us, try to 'humour us', take us out etc., But most of these efforts will only fail unless we attempt to make an effort to come out of this syndrome.



### *Irritation and anger*



We consider staying away from drugs a major sacrifice, and therefore, become frustrated, get angry and show our resentment towards others. We feel that others are very critical. We start expecting others to listen to whatever we say, and act according to our demands. If this does not happen, we get extremely angry and become highly critical. In other words, we turn out to be 'difficult people'. This uncontrolled anger, in turn, increases our own stress and anxiety.

Anger and resentment, let me repeat, are strong impediments to recovery. They interfere with our efforts to build meaningful relationships and leave us hurt, frustrated and anxious. When angry, we lose sight of the goal and indulge in things that are destructive to our well being.

## ***Impatience***

The thought 'I had tried my best and nothing is working out' begins to develop, and we become impatient. We think that things are not happening fast enough, or others are not doing what they should be doing

*After listening to a music concert, a young man was returning home and, he thought "I wish I knew music."*

*He approached a teacher, "Ustad! I would like to learn music from you. How long will it take for me to learn it?"*

*"For six months, you will learn the beginners' lessons and later you will learn to sing songs," said the Master.*

*"Excellent!" said the young man, "I shall begin with the seventh month."*



Similarly we are also very impatient and want the 'world to change by the weekend'. For instance, we would have developed a number of health problems over quite a number of years. But the moment we stop taking drugs, we want to become totally fit. We would have lost our job, and immediately after treatment we want a job. We become impatient and keep complaining about things. It is important to understand that if we expect miracles to happen within a short time, we will only be disappointed.

## ***Self pity***

*"Why do these things happen to me? Why am I alone branded an addict?*

*Nobody appreciates what I am doing!" are the feelings we get on occasions.*

Finally, these 'whys' only lead to clever explanations and rationalisation of what we do and how we behave.



*Monkey hunters use a box with an opening at the top, big enough for the monkey to slide his hands in. Inside the box, are nuts. The monkey grabs the nuts, and now his hands become a fist. The monkey tries to get his hand out. But the opening which is big enough for the hand to slide in, is too small for the fist to come out.*

*Now the monkey has a choice, either to let go off the nuts and be free or hang on to the nuts and get caught.*

*What does it do every time?*

*It hangs on to the nuts and gets caught.*

We hang on to the nuts of self pity that keep us from moving forward in life. We keep rationalising by saying, "I am unfortunate.... unlucky. I'm like this because....I cannot do this because....., and whatever comes after 'because' are the nuts we are hanging on to, that push us into the relapse cycle.

## **II. Changes at the behavioural level**

### ***Compulsive behaviour***

All along we had been holding on to drugs. Now we hold on to some other activity as a substitute. Compulsive behaviours are actions that produce immediate excitement or emotional release and are followed by long-term pain and discomfort. These behaviours can be internal (thinking, feeling, imagining) or external (working, playing, talking). To give a few examples, when we are in the company of others, we either talk continuously or remain absolutely silent. We gamble, spend money on horse races and start taking other mood-changing drugs. We take sleeping tablets or pan masala.



*A man was on his hands and knees, searching for something. A passerby came and asked him, "Sir, what are you searching for?"*

*"My key!"*

*Both men got on their knees and searched. After awhile the passerby asked him, "Where exactly did you lose it?"*

*"At home", came the reply.*

*"Then why are you searching here?"*

*"Because it is brighter and more convenient here!"*





Like this man, we are also looking for gratification and satisfaction in places where it cannot be found. We want easy solutions, instant answers and indulge in pursuits which are counterproductive. We actually resort to this behaviour to alter our moods, turn off the mind and evade reality. This is unhealthy behaviour which will lead us back to chemicals.

### ***Impulsive behaviour***

We take major decisions without proper thinking.

*Mohan, a father of two children, had borrowed from many sources. During recovery, he was struggling to make both ends meet.*

*That morning Mohan started for his office as usual. He missed his bus and was late by a few minutes. His supervisor got angry and shouted at him for coming late. Mohan got very angry and resigned his job immediately without thinking for a moment.*

These impulsive actions lead to extremely stressful situations, and as a method to cope, we get back to drugs.



### ***Tunnel vision***

We start looking at life in isolated compartments and not as a whole. This inevitably leads to too much concentration on one area of life, resulting in a total neglect of other areas. We attach undue importance to one area of life neglecting all others. For example, we start for work everyday very early in the morning, and keep working till late at night. We come home very late, never communicate with the wife or children; eat little and go to sleep. We do this repeatedly. In other words, we attach undue importance to our official lives and overwork when it is not necessary at all. This leads to a total neglect of our health, our family, friends, and the other areas of our life.

### ***Denial and defensiveness***

We continue outright to deny the truth about ourselves. We do not accept the need for a change in our lifestyle.



*"I am quite okay. I am able to abstain.*

*There is no need to change anything in my life."- this is how we feel.*



We feel very resentful when the counsellor asks, "What are the changes you have made in your life?" We openly reject all possible help. We start ignoring all crucial activities - no self-help group meetings; no concentration on the '24 hour schedule'; no more visits to the temple. We find many reasons for avoiding NA and our arguments show an attempt to ignore the truth that we need help to recover.

### ***Overconfidence***

Over a period of time, we convince ourselves that we have the sufficient will power never to take drugs again. We make 'tall promises'. We visit drug dens. Everyone asks, "How can you do that? Won't you feel tempted?" Our answer is always, "I have the will power! I know what I'm doing. I can abstain if I want to". We are overconfident and believe that our addiction is absolutely under control.

*A farmer planted two saplings and wanted to erect a fence around them. The first plant shouted, "I do not want any fence. It will only curb my freedom. I want to grow up as a big tree."*



*The farmer explained, "The fence will not interfere with your freedom. On the other hand, if there is no fence, the cows and goats will eat you away. But when you grow into a tree, I myself will remove the fence because you will need it no more. You will be surprised to see the very goats and cows which are a threat to you now since you are a tender plant, coming and resting under your shade."*

*The sapling was adamant and would not listen to the farmer. So he put a fence around the second sapling and went away. Goats and cows came and ate up the first plant. The second plant was well protected and grew up into a beautiful shady tree.*

During the initial stages of abstinence, it is important that we erect a fence around ourselves and avoid people and places connected with drugs. We should also consciously avoid thoughts connected with drugs. Chemicals have got a hold on us. We are like pins near a powerful magnet. As long as we are within the force of the magnet, we will be drawn closer to it. If we try to establish our willpower by drawing close to the people or places connected with drug use, we will not be able to resist the temptation.

### ***Progressive loss of daily structure***

Irregular eating and sleeping habits creep in. All the daily routines become haphazard. Regular hours of getting up or going to bed disappear. We are unable to keep appointments. We have a lot of idle time. Wishful thinking begins to replace realistic planning. We become daydreamers. Treatment and recovery lose their priority.

### **III Thoughts of controlled use**

At this point of time, we feel that we could overcome our problems by taking drugs. We are convinced that we could use drugs in a controlled manner.

*"I have abstained for so long. I deserve a joint"*

*"If only I could smoke a little bit of ganja to calm my nerves.....! Why not?"*

*"I will take one puff today.. only one.. after that I'll not take it at all!"*

And we start with a small quantity; but very soon lose control and return to obsessive drug use.

### **Examples of 'relapse indicators'**

#### ***1. Changes in attitude***

- Not caring about sobriety
- Becoming too negative about life

#### ***2. Changes in thought***

- Thinking that I 'deserve' because I have been sober for quite sometime.
- Thinking that I can use substitute drugs

- Thinking that my problem is ‘cured’ since I have been abstaining for sometime.

### 3. *Changes in feelings*

- Increased moodiness or depression
- Strong feelings of anger and resentment
- Increased feelings of boredom and loneliness

### 4. *Changes in behaviour*

- Increased episodes of arguing with others
- ‘Forgetting’ to take disulfiram / naltraxone
- Skipping self-help group meetings
- Stopping in a drug den to socialise
- Increased stress symptoms such as smoking more cigarettes
- Threatening to use drugs to have our way
- Talking repeatedly about the associated pleasures

Thus, a return to chemicals, though not through conscious choice, is the end result of ignoring a series of warning signs. The ultimate end of these warning signs is a return to drugs. When this happens, we recognise only the urge which impels us to take drugs, and overlook the warning signs.

*A prince was told that there was an evil man in his kingdom who had to be destroyed. The prince went in search of the man and found that he was a dwarf.*

*“What harm can I do to you?” said the dwarf, “Spare me”. So the king spared him and returned home.*

*His tutor, a wise man, sent him back to destroy the dwarf. The prince found that the dwarf had grown a little taller and stronger, but could not bring himself to slay him. He let him go unharmed for the second time.*



*The tutor sent him back a third and a fourth time. Each time, the prince found that the dwarf had grown a little taller and stronger. Now, the hesitant prince refrained from slaying him, as he was not sure of his ability.*

*Finally, the tutor lost his patience and told the prince that he was being extremely foolish. Realising the truth, the prince set out to destroy the evil man once and for all. But now, he found that the dwarf had grown into a mighty giant. Both men wrestled for hours. There were times when the prince was on the verge of defeat. Finally, summoning all his strength, he gave the giant a mighty blow and the giant fell down dead. The prince returned home a better and stronger man.*

The dwarf represents the craving for drugs. In the initial stages, it is easy to overcome this urge. When we do not deal with it, it can assume grand proportions and lead us back to uncontrolled use. When we deal with it positively by saying 'NO', we become stronger and more confident, and find pleasure in staying sober.

As we have seen, we can be in relapse before we actually start using again. However, there may be certain occasions when a family member, a friend or a well wisher may be able to identify the warning signs before we ourselves recognise them. We should be open and honest enough to accept their feedback. Sobriety is possible provided we put in efforts. Recovery calls for change; and the change is definitely worth the rewards.