





David Smallwood

Who
Says
I'm an
Addict?



A book for anyone who is partial to
food, sex, booze or drugs

First published and distributed in the United Kingdom by:
Hay House UK Ltd, Astley House, 33 Notting Hill Gate, London W11 3JQ

Tel: +44 (0)20 3675 2450; Fax: +44 (0)20 3675 2451

www.hayhouse.co.uk

Published and distributed in the United States of America by:

Hay House Inc., PO Box 5100, Carlsbad, CA 92018-5100

Tel: (1) 760 431 7695 or (800) 654 5126

Fax: (1) 760 431 6948 or (800) 650 5115

www.hayhouse.com

Published and distributed in Australia by:

Hay House Australia Ltd, 18/36 Ralph St, Alexandria NSW 2015

Tel: (61) 2 9669 4299; Fax: (61) 2 9669 4144

www.hayhouse.com.au

Published and distributed in the Republic of South Africa by:

Hay House SA (Pty) Ltd, PO Box 990, Witkoppen 2068

Tel/Fax: (27) 11 467 8904

www.hayhouse.co.za

Published and distributed in India by:

Hay House Publishers India, Muskaan Complex, Plot No.3, B-2,

Vasant Kunj, New Delhi 110 070

Tel: (91) 11 4176 1620; Fax: (91) 11 4176 1630

www.hayhouse.co.in

Distributed in Canada by:

Raincoast Books, 2440 Viking Way, Richmond, B.C. V6V 1N2

Tel: (1) 604 448 7100; Fax: (1) 604 270 7161; www.raincoast.com

Text © David Smallwood and Gary Thompson, 2014

The moral rights of the author have been asserted.

All rights reserved. No part of this book may be reproduced by any mechanical, photographic or electronic process, or in the form of a phonographic recording; nor may it be stored in a retrieval system, transmitted or otherwise be copied for public or private use, other than for 'fair use' as brief quotations embodied in articles and reviews, without prior written permission of the publisher.

The information given in this book should not be treated as a substitute for professional medical advice; always consult a medical practitioner. Any use of information in this book is at the reader's discretion and risk. Neither the author nor the publisher can be held responsible for any loss, claim or damage arising out of the use, or misuse, of the suggestions made, the failure to take medical advice or for any material on third party websites.

A catalogue record for this book is available from the British Library.

ISBN 978-1-78180-409-4 in print
ISBN 978-1-78180-450-6 in ePub format
ISBN 978-1-78180-449-0 in Kindle format

Contents

Foreword by Dr Neil Brener, MBBS, MRCPsych

Part One: Understanding Addiction

Chapter 1 Why Do I Always Want More?

Chapter 2 We Are Ruled by Our Emotions

Chapter 3 Looking Beneath Addiction

Chapter 4 Sensitivity: Gift or Curse?

Chapter 5 The Watchers

Chapter 6 Codependency – When Caring Becomes Too Much

Part Two: So, What's *Your* Vice?

Chapter 7 Sugar: The World's Most Addictive Substance

Chapter 8 How Many Times Did You Check Facebook Today?

Chapter 9 Do You Shop Till You Drop?

Chapter 10 Confessions of a Workaholic

Chapter 11 When Too Much Sex is Never Enough

Chapter 12 Drugs: The Many Roads to Hell

Chapter 13 Do You Overdose on Anger?

Chapter 14 Anorexia, Bulimia, Overeating and Self-Harming

Chapter 15 Cigarettes and Caffeine

Part Three: The Road to Recovery

Chapter 16 Denial: The Enemy of the Addict

Chapter 17 Hitting Rock Bottom

Chapter 18 The Shame Sack

Chapter 19 Childhood Trauma and Family of Origin

Chapter 20 The 12 Steps

Chapter 21 Early Days: Avoiding Relapse

Chapter 22 Long-Term Recovery: Laying Our Demons to Rest

Part Four: The Challenges Ahead

Chapter 23 Has Modern Life Led to More Addiction?

Chapter 24 Why Do Doctors Get It Wrong?

Conclusion: The Human Condition

References

Appendix 1: Suggested Reading

Appendix 2: Self-help Fellowships

Appendix 3: Addiction Case Studies

About the Author

Join the Hay House Family

Foreword

Dr Neil Brener, MBBS, MRCPsych

The world of addiction treatment is changing. The concept of what addiction is, and how it affects the lives of individuals and their families, has become more prominent, and this has allowed treatment programmes to develop.

Up until recently, there has been a misperception in the medical profession that detoxification from drug is tantamount to a treatment programme. Outcome results have therefore been poor, and this has led to a debate around total abstinence versus controlled use and harm reduction.

Due to changes in our understanding of addiction via a better understanding of the neuropathology (how the brain chemistry works), we are starting to re-evaluate this. If we start from the premise that addiction is much wider than just drug and alcohol problems, and includes areas such as gambling, codependency, eating disorders and some sexual behaviour, we start to see that addiction includes both chemical *and* behavioural addiction.

We then have to start thinking about where this all comes from. Not all of it can be explained by neurochemistry – some of it comes from an understanding of a person's emotional world. Ideas around this are also changing.

For the understanding of the treatment of addiction, we need to constantly re-evaluate what we do. Over the years, I have been an exponent of trying out different treatment modalities to aid the addict's recovery. This has led to the introduction of different types of treatment, including equine therapy and trauma work.

From working in the addiction field for a number of years now, I have always been struck by the idea that addiction is a progressive, fatal illness. It is not only destructive to the individual, but it can also have devastating effects on family, children, the workplace and society at large. If we accept this, the goal that we must always be working towards with our patients is total abstinence in all of the multifaceted ways that addiction can present.

The addictive process is 'sneaky', and when you feel you have it under control, it can emerge in other forms, such as over-exercising, workaholism, etc.

It is essential that the whole patient is treated, rather than just their drug or alcohol issues. While this is all happening, there has to be some help and support for families if the addict is going to make sustained recovery. The more a family understands about the problems, and how they can contribute to the recovery, the more likely it is to happen and be sustained.

I feel we're on the cusp of the medical profession and politicians seeing addiction differently. Hopefully this will be a catalyst for more treatment to become available to members of the public and their families.

All too often, addiction treatment has been seen as a method for reducing crime, and while this is,

course, important, it doesn't take into account the devastating effect of addiction on individuals' lives. When the addiction pebble is dropped in the river, the subsequent ripples affect us all in different ways.

I got into working in addiction by mistake. It has always been seen as one of the Cinderella subjects in psychiatry, but it is amazing when you see a patient turn their life around from their active addiction into an abstinence/recovery. The effect it has on them and everybody around them is transforming and a joy to behold.

I believe that books like *Who Says I'm An Addict* will help people to understand what addiction is and enable them to recognize it in all its forms, and allow people into therapy to make this transformation. I have worked with David Smallwood for many years, and have found his approach to be a constant revelation into our understanding of the devastating effects that addiction has on individuals, families, and society.

I hope that his book will be a stepping stone for many people to get further help and support in their recovery.

Dr Neil Brenner is a consultant psychiatrist with over 25 years' experience of working with adult patients in the UK's National Health Service, and in the private sector.

Part One

Understanding Addiction



Why Do I Always Want More?

Most alcoholics will regularly go out with the absolute intention and firm belief that they'll only drink two or three beers. Yet *ten* drinks later they're staggering home, despite the fact that they never planned to get smashed.

I don't think I ever *meant* to get wasted, apart from on two occasions. One was the day I got married and the other was the day my daughter was born (strangely, on neither occasion did I really get that drunk). But there were plenty of times when I'd go to the pub, bump into somebody I knew, and use that as an excuse to go off on a huge drinking binge.

A lot of heavy drinkers will relate to this, if they're honest. The night begins so well, and you fully intend to take it easy. But inevitably, almost before you notice it, one drink has become four and four soon becomes a blur. That quick drink after work unexpectedly turns into a late-night session.

I know people who are constantly late for family gatherings – and also regularly miss important business meetings – because they never seem able to leave the pub on time. They curse themselves for it afterwards, yet it keeps on happening. That first drink might be great, and the second and third ones are wonderful, but by the end of the night they've had *way* too many. Occasionally, they might manage to stay on the straight and narrow, but sooner or later they slip back into their old ways.

Addiction Has No 'off' Button

Interestingly, this urge to consume *more* isn't confined to alcoholics. It affects everybody from time to time, regardless of age or background. For example, how often have you sat on the sofa to relax with a guilty treat – a bar of chocolate, say, or one of your favourite cookies? You fully intend to enjoy it, but at the same time you're determined not to make a pig of yourself. You're adamant that you'll just have a small portion: surely that won't do any harm? The first bite is delicious:

Mmm... it's so tasty. Maybe another bite won't hurt? Oh, go on then, just one more.

Before you know it, you've polished off the whole lot and you're left wondering how your good intentions vanished like a wisp of smoke. Does this sound familiar? Well, we've probably all experienced similar moments.

For most people this sort of behaviour is probably the exception rather than the rule, and it doesn't adversely affect the quality of their everyday life. But for addicts it's very different, because it becomes a compulsion that they simply can't control. Whenever I picked up a drink, I couldn't predict the outcome of events – apart from the fact that more often than not, things would end in chaos. I didn't mean to get drunk; it just happened.

Similarly, someone who's addicted to sex probably doesn't wake up with the intention of sleeping

around, but during the course of the day they find themselves in a situation where they feel unable to resist the urge. If, in the morning, you ask them: ‘Are you planning to watch pornography today, or maybe have a one night stand this evening?’ they’ll say ‘No’ – and they fully believe they’re telling the truth.

These weird behaviours exist in lots of different areas of our lives. These days, my favourite addictive substance is sugar. I can go to a restaurant intending to order a balanced meal, because I’m determined to eat wholesome and healthy food, and things will start off well. But then the waiter tempts me with a sugary dessert, and without thinking about it, I accept. Then, on the way home, I’ll buy a bar of chocolate. This may sound harmless, but in fact it’s an addictive process.

Addiction can be summed up by one word: MORE! We are powerless to resist MORE food, MORE sex, MORE shopping, MORE Facebook, MORE booze or MORE drugs.

There are many, many people who are addicted to sugar, and believe it or not, it can be just as deadly as drugs or alcohol. I’ve known of people who can sit alone in a room and binge on plastic grocery bags full of sweets until they’re physically sick. Addicts always want more, and they have no idea why.

Addiction is a Loss of Control

When someone comes to me for an assessment, I often know what their problem is before they’ve even opened their mouth – and they’ll almost certainly be in denial about their predicament. Usually a suffering addict is incapable of uttering a single truthful statement about their habit, so I simply ask them how I can help.

I take everything they say with a pinch of salt, and then I ask them what their partner or their boss would say about their problem. That’s often when things start to get uncomfortable. People typically end up in rehab because they’ve suffered a nasty consequence of their habit. Perhaps they’ve been caught being unfaithful to their partner, or they’ve lost their job, or they’ve done something silly with someone in a toilet, or crashed their car and knocked someone over.

Most addicts I’ve met are good people who wouldn’t dream of doing such things under normal circumstances. Yet when they’re under the influence of sex, alcohol, sugar or cocaine – it doesn’t really matter which – they’ll do things that are very bad for their own wellbeing and for the wellbeing of others.

It’s usually only when the consequences of their addiction become unbearable that an addict seeks help. That moment might come when their spouse threatens to leave them, or when their boss tells them they’re fired. It might come when they end up in the Accident and Emergency department at the hospital, or when a police officer wakes them up in a cell and asks, ‘Do you know what you did last night?’

One addict told me that, for him, an average weekend’s recreation involved five or six grams of cocaine, several bottles of champagne and two prostitutes. He’d retire to a hotel bedroom, where he

remain from Friday night until Monday morning. Afterwards, he'd attempt to go to work as if nothing had happened. It was killing him, and I could see that just by looking at him.

His story is extreme, but his problem has elements that are common to *all* forms of addiction. It wasn't a high blood alcohol level that made him behave like that, nor was it the effect of the cocaine on his brain chemistry, or the rush of endorphins from the sleazy sex. The cause was something much deeper, and that something is what this book is about.

My own way of falling into addiction came when, as a teenager, I was feeling low and isolated. One day, I turned up early to meet someone in a pub and I ordered a pint of beer. By the time the person I was meeting arrived, I was on my second pint and it felt like a Saturn V rocket had just taken off my head!

Suddenly the whole world was in high definition. And I could talk and make people laugh, and do all sorts of things. The anxiety and trepidation I'd been feeling on a daily basis just dissolved in the time it took to tip the beer down my throat.

But unfortunately, that's not all the alcohol dissolved. Having a drink to feel good eventually became *needing* a drink just to feel okay. A compulsion to drink more and more soon kicked in big time. I drank to celebrate *and* to commiserate. I drank when I was feeling up because I wanted to get even higher, and I drank when I was down because it was the only way I knew how to cope.

Although I didn't know it at the time, the reason I was doing this was because of the effect it had on my *feelings*.

The way that addiction affects our emotions is similar in all types of addictive behaviour – whether you're a gambler chasing the thrill of a big win or a shopaholic seeking the feeling of happiness you get from buying a nice new pair of shoes.

At the time we may think this behaviour is harmless – after all, it's natural to want to feel the best we can, so why shouldn't we indulge moderately in things that give us a little lift now and then?

In my case, the problem was that it led me into a complete meltdown. The word 'moderation' didn't exist in my vocabulary. Something within me led me to keep on drinking, even when the consequences stopped being positive and became extremely negative. I boozed constantly until I was eventually arrested for violent behaviour and sent to a psychiatric hospital.

When you're driven away in handcuffs in an ambulance, as I was, it should tell you that it's time to make a few lifestyle changes. Unfortunately, when it happened to me, I couldn't understand this because I'd driven myself insane. I'd lost control of my actions. Why else would I have drunk vodka for breakfast every day, and repeatedly got smashed out of my head, regardless of the chaos it caused? Addiction is a loss of control. This is a common factor, regardless of what it is that we're addicted to.

An Addictive Nature

Our media almost universally portrays addicts as people who are physically dependent on drugs or booze through their own feckless choices. But in fact, an addict actually has no *choice*, because the alcohol or drug abuse is really just a symptom of a very complex emotional condition that robs them of any control.

This can surface in lots of different ways, and as a result, people can become addicted to all sorts of things: exercise, gambling, overeating, anger outbursts, computer games... In fact, when I use the word 'addict', I generally mean it to include somebody who has an *addictive nature* (even though they may never have taken illegal drugs).

This is because, as we'll see later in the book, I believe we can become addicted to almost anything with the power to alter our moods. Very few people are completely immune to this effect – all of us exist somewhere on the addictive spectrum – but for most of the population it doesn't cause serious problems.

However, for a sizable proportion of the population – perhaps as much as 10 per cent – addiction has the potential to become a serious affliction. These are the people I call 'addicts', even if they may not currently be in the throes of an active addiction. Instead, the condition might be dormant within them and it makes them extremely susceptible to addictive processes.

During my work as a therapist at the Priory Hospital North London, I encouraged everybody on the recovery programme to call themselves an 'addict', rather than an 'alcoholic' or a 'compulsive eater'. This is because it's not the *type* of addiction that matters so much – the important thing is the *effect* it has on our feelings. Here's a typical addiction story:

Imagine that you're starting down the path to drinking too much. If you're lucky someone says, 'Don't you think you should cut down on your booze a little?' Maybe they say this before the stage where your habit becomes out-and-out alcoholism. Perhaps you're just at the *start* of a process in which you use drink to improve the way you feel. You might think to yourself, *It's true, I do drink a lot. Perhaps I should cut down?*

Now what can happen next is that whatever was causing you to drink will probably start to surface in other ways. Without further thought you might say to yourself, *Ah, I know what I need to do. I need to stop drinking, so I'll go to the gym instead.* And before you know it, you're over-exercising in an intensive bid to get the perfect body.

What you're actually doing now is continuing to try to make yourself feel better, only in a different way. If you're not careful, you'll end up becoming obsessed with going to the gym, and becoming addicted to excessive exercise.

As we'll see later, one reason why the medical profession finds it so hard to diagnose and treat addiction is because doctors routinely confuse physical dependency on drugs or alcohol with what we call 'true addiction' – which is something that's caused by psychological and emotional factors.

Of course, physical dependency on a substance can be very dangerous, but in the main I regard it as a symptom of addiction, rather than a cause. If you habitually use something like alcohol or nicotine your body builds up a physical dependency on it in order to function. When you withdraw from the substance it can cause physical cravings and severe medical complications, but these can be alleviated.

with treatment.

However, the underlying *emotional* issue that caused the physical dependency is still likely to be present – and sooner or later it will come bubbling back to the surface like sulphur in an acidic lake. This is the nature of true addiction: it exists in our mind and in our emotions. Being hooked on substances (like drugs or alcohol) and being addicted to behavioural processes (such as overeating or overwork) are the same thing. They're our attempts to change the way we feel.

It's interesting to note that almost all the literature published by Alcoholics Anonymous refers to alcoholism as a 'spiritual' illness rather than a physical one. It's very hard to define what spiritual means. It doesn't necessarily mean religious: it refers to something more abstract that exists somewhere in our psychology as human beings.

The implications of this are enormous because it means the medical profession is looking for a cure for addiction in the wrong place. The mainstream medical approach to treating addiction (with the notable exception of most leading private clinics) is to concentrate on breaking physical dependence, but this alone cannot solve the underlying problem.

The 'Gift' of Addiction

We know that addiction can kill. We know it can ruin the lives of addicts and those around them. We know that it destroys relationships with family and friends, and that it eats away at the very soul of an individual, wrecking their hopes and dreams.

So, it might surprise you to learn that I consider addiction to be a very special gift. This is because during almost two decades of working as a therapist in treatment centres – patching up the carnage and misery caused by patients' destructive abuse of drink and drugs – I've never met an addict who isn't kind and generous once they're in recovery.

I've found that the overwhelming majority of addicts are extremely caring of other people. They're very sensitive and loving, and when they're sober they make good friends who are reliable and dependable. They're also capable of great creativity, and many go on to rebuild their lives through acts of charity and kindness.

I've seen addicts give up highly paid careers to become poets or artists. I know of one person who quit a highly lucrative job in order to work as a volunteer in a war zone, driving medical supplies to injured civilians.

When they're not under the influence of their addiction, far from being selfish and thoughtless towards their fellow human beings, the majority of addicts are extremely sensitive towards others. And this sensitivity can be a great gift.

So, what is it that makes addicts behave in a destructive way when they're in the grip of their demon? Well, I believe that whatever we're addicted to, the answer is the same: there's an underlying part of our nature that causes us to want to alter our feelings.

The next time you're on the sofa and are tempted to reach for that extra chocolate cookie, ask yourself this question: does the feeling inside you that's making you yearn for more mean that you have an addictive nature? We'll discover the answer together over the following pages.

It's possible to become hooked on *anything* that has the power to change our moods. Whatever it is we're addicted to, the process involved is the same. The question is: what causes this universal lack of self-control?

We Are Ruled by Our Emotions

Have you ever been transported back in time by a piece of music? You know the sort of thing I'm talking about: it might be a favourite pop song from your youth – or something else that has the power to overwhelm you with strong memories.

You hear it by chance and suddenly it's as if you're back in the day. You're 16 years old again, and you can literally *feel* the past come alive. Tangible emotions are stirred up – happy or sad – and all from just overhearing a simple tune.

I call this a 'Sgt. Pepper moment', because that's the one song that always triggers it for me. It reminds me of the time when, as a shy and scared teenager, I went to a record shop before going into college and bought a copy of the album *Sgt. Pepper's Lonely Hearts Club Band* by The Beatles. When I took the record into college everybody was falling over themselves to look at it because I was the first guy in town to buy it.

So there I was, sitting in the physics laboratory with this big vinyl record. I opened up the sleeve and saw a large, close-up colour picture of the four Beatles dressed in silk military-style suits – and I felt just *fantastic*. I had the first copy of the album *everybody* wanted, and it was all mine.

This happened during the 1960s, but to this day, my memory of those feelings is still vivid, and remembering that moment fills me with emotion. Recently, I was in a record shop and I saw a CD of *Sgt. Pepper* with the original artwork on the cover – the one with the famous drum and all the faces of the crowd. You can guess what happened next: I thought, *I have to buy that!*

When I got the CD home and opened it up, I saw the same full-colour picture of The Beatles that I had stared at all those years ago. I was overwhelmed by the memories it evoked within me. It was as if I was back in that physics lab, with my life still ahead of me. Even *thinking* about it now makes the hair stand up on the back of my neck, because it brings back every intense feeling of joy and fear that I experienced as a teenager.

It's not only musical cues and photographs that have the power to do this. Similar memory-feelings can be stirred up by smells, noises, colours and events. We all experience these from time to time, and when they happen it's likely that the area of our brain called the *limbic system* is at work.

Introducing the Limbic Brain

The limbic system consists of the parts of our mind that govern our feelings and emotions, and our long-term memory. It operates by influencing something called the autonomic nervous system, which is a control network that functions independently of our conscious awareness. It's highly interlinked with the brain's pleasure centre, which plays a key role in sexual arousal, and also in the highs we feel from recreational drugs.

This area of the brain is also the part that will keep us alive in an emergency – and for this reason has the power to override *everything* that we do. I think of it as being a bit like a flight computer on a passenger jet that's flying by the wire. When the plane's nice and steady the computer is dormant in the background – quietly monitoring everything.

But if the plane suddenly hits an air pocket or turbulence, the computer overrides the flight instructions and compensates for any sudden loss in altitude in order to stop the plane from plunging earthwards. The limbic system has a similar function in our brain when we encounter danger.

Here's a good example of the limbic system at work:

Imagine you're in a room and I'm about to throw a baseball at your head with all my strength. As the ball hurtles towards your face at great speed, your instincts tell you that when it connects it will almost certainly smash some of your teeth and facial bones.

So, what do you do? You instantly duck, and attempt to block it, of course. You do this without thinking: it's a reflex action over which you've no control. Your brain processes the information about an incoming threat and your limbic system kicks in to react in superfast time. *Bang!* It does this in order to protect you, and it happens without the need for conscious thought.

The important thing here is that your reflexes react *in a way that's beyond your control*. You probably couldn't stop yourself from ducking, even if you wanted to. It's a prime example of how our gut instincts and feelings – in this case fear of being hit by a baseball – can cause us to react in a certain way without our having any control over it.

Our limbic system has the ability to override our conscious actions, and we're powerless over its effect on us.

Remember how, in the previous chapter, we discussed the fact that addiction is all about a loss of control? Well, if our limbic system can cause us to act without control on autopilot, I believe the same process can cause the lack of control that people experience when they're addicted to something.

It explains how a heavy drinker can intend to have only one or two drinks on a night out, but then slip into downing a bucketful without thinking about it. After many years spent working with heavy drinkers, and people suffering from other forms of addiction, I'm convinced there's an overwhelmingly strong connection between the limbic system and addictive behaviour.

The Limbic Brain and Memory

Our limbic brain is capable of creating strong associations between memories and emotions. When we perceive a threat it creates powerful feelings that the brain is capable of storing away. Here's an example that illustrates this process:

Imagine you're a small child out in the street with your parents. Suddenly, a big dog comes over, and before your mother or father can intervene, the animal jumps up at you. The dog might just want to be friendly, but as you're very young, you don't know whether this creature with big teeth will hurt you.

or not. As far as you're concerned, it's a dangerous animal and your parents might not be close enough to protect you.

What happens next is very interesting. A part of your neurological system called the thalamus (which is the brain's telephone switchboard) takes the information about the big dog and sends it to your amygdala, the part of the limbic system that governs your feelings of fear and reward. The amygdala can react in several ways, one of which is to go: *This is a threat! FREEZE.*

If this happens, you'll be frozen to the spot with fear. And from that moment on, if you see a big dog you'll experience an urge to freeze. If the effect is powerful enough, this may stay with you for life. Some people who have an unpleasant encounter with a dog when they are very young can be afraid of the animals till the day they die.

Here's one more example of your limbic system in action:

You're walking down the street when you hear a car backfire, causing an almighty noise. The sound startles you, and it makes you physically jump out of your skin. Again, this is an involuntary act over which you've no control. You do it without thinking.

Your limbic system does many things like this, and one of its most important functions is to act like a radar warning system that's on constant alert for danger. It's a bit like a sixth sense. In fact, in my opinion, that's *exactly* what it is.

Our Sixth Sense

Our limbic system works via a whole range of feelings and emotions – we *feel* scared and we react accordingly. We *sense* that something isn't quite right. We become *aware* of danger and take evasive action.

Our brain does this by tuning in to complex nuances in our surroundings that go beyond our conscious understanding of normal visual and audible signals. When we walk into a room where other people are present, we start analyzing thousands of subtle pieces of information. Without realizing it, we're constantly monitoring body language, smells, temperature and ambience. This process is fed by our five physical senses of vision, hearing, smell, touch and taste.

I believe that when all of this data is combined in the limbic part of the brain it creates a sixth sense – our emotional ability to read a situation and translate it into feelings. This has been called many things throughout history: our *intuition*; our *instinct*; our sense of *deja vu*. It's our ability to *just know* when something doesn't feel quite right, without actually being able to explain why.

Our sixth sense is a process that operates all the time, without our knowledge, and it guides us via our feelings.

If our limbic brain has the power to override our conscious thoughts, this means we cannot easily influence how it makes us behave. The process is hardwired into our very nature as human beings. We have no control over our jump reflex when we're startled, and in the same way, an addict has no

control over his or her addiction. This lack of control explains why addicts are so prone to relapse even when they're determined to stay clean.

As a therapist, one of the things that puzzled me for many years was the way people could walk out of rehab centres having seemingly overcome their demons, only to go back to their old habits. There seemed to be no explanation for this. When patients leave a treatment centre like the Priory they're hopefully no longer *physically* dependent on substances or alcohol. In that sense they're 'clean', and when they say they'll never pick up another drink or drug they're 100 per cent committed to that.

Many addicts are intelligent, considerate people with good jobs and loving families. Yet around a third of them revert to their old behaviour when they get back into daily life. It's as if the pressure of an ordinary lifestyle is simply too much for them. They'll often resume drinking in the full knowledge of the enormous dangers involved, yet something beyond their control makes them do it. I believe what actually happens is that their limbic system kicks in and causes them to react in a way that they don't understand.

Throughout nature we see many examples of animals with highly developed limbic systems, and humans share many of these characteristics. Horses, in particular, are incredibly attuned to their surroundings, and they're very astute at reading the emotions of people and other animals. Anybody who's worked with horses will tell you that they'll instantly pick up on our moods and react accordingly. If a rider is in a bad temper, or giving off aggressive vibes, the horse will quickly become agitated too. But show a horse love and care and it will relax and cooperate.

In this respect, horses are the perfect limbic beings. They're at one with nature. We can learn a lot from them about the dynamics of addiction. In fact, for this reason, many treatment centres use equine therapy as a way of helping addicts re-connect with their feelings. At treatment centres like the Priory therapists take a group of patients to a riding school and invite them to lead horses and ponies around obstacles.

The humans quickly learn that the horses pick up on their moods and will happily respond to positive influences, but the opposite occurs if they try to use force (I guess the old saying that you can lead a horse to water but you cannot make it drink is true!) This is something that addicts empathize with because without knowing it, they do exactly the same.

The Dark Castle of Addiction

Addicts are *very* sensitive to other people's feelings. Yet, paradoxically, when they're in the grip of their addiction these same people are capable of being extremely selfish – I know that I certainly was when I was a heavy drinker. It's as if addicts build a dark castle to hide inside – one full of mistruths, lies, manipulation and denial.

When I was boozing I wouldn't think twice about lying to my partner if it meant I could create an opportunity to guzzle a drink. Before I knew it, I'd be telling lies on top of lies without even pausing to think. Just so I could get a sly drop of alcohol.

There's a dark side to the limbic system that's visceral by nature. It operates beyond our conscious control and it can lead us to react to people and

situations in ways that we know are bad for our long-term wellbeing.

This type of behaviour is very common, and it can be enormously hard on the family and friends of addicts, who cannot understand why their loved one (who is so kind and caring in normal circumstances) can act in such a selfish way.

How often have you heard someone say something like, 'I know it was wrong of me, but I can't help the way I feel.' You'll usually hear this when someone's done something wrong, like having a huge outburst of temper or cheating on a partner. This is interesting because it shows that our feelings and emotions – through our limbic system – can have a hold over us in ways that we don't fully appreciate or understand.

The point here is that we don't always react in a considered way: we can become a slave to our emotions. If a person tells me they've been fired from their job for smelling of alcohol, I know it's likely that they're already pretty far down the road to a very serious addiction. By the time they reach this stage they'll be weighed down by years of deceit around their drinking. This is invariably the case, regardless of their background. An important factor in understanding addiction is to acknowledge that it affects people from all walks of life.

Addicts come in all shapes and sizes, but their problems are always similar. It's often said in therapy circles that addiction is 'an equal opportunities illness'.

One alcoholic I know has a photograph of himself with a group of fellow patients in a rehab centre. Among them are an affluent banker, a failed musician, a photocopier salesman, a relative of a Hollywood star, an accountant, an unemployed teenager and a retired nurse. On any given day in the Priory you'll find patients from a wide variety of backgrounds (the only common factor is that they've been lucky enough to get into private treatment).

These people suffer from a wide range of compulsive behaviours, from alcoholism and hard drugs through to food and gambling addictions. Yet in all cases their problem causes them to act in a similar way. It's as if there's something at work deep within human nature. I believe that what we're witnessing here is the limbic system misfiring and influencing us in a negative way.

I freely admit that as a violent alcoholic I lost control over my own behaviour. I simply *had* to indulge in booze or drugs, regardless of the consequences. All I can say is that my problem seemed to come from deep within me. It was visceral by nature, and it defied logical explanation.

My experience may have been extreme, but perhaps it holds an important clue for understanding our nature as human beings. In my subsequent life as a leading therapist, I've met thousands of people who've become addicted to everyday things, ranging from sex to spending. My work has led me to conclude that the urge to overindulge may be far more universal than we currently understand.

Looking Beneath Addiction

When we indulge in a pleasurable activity – like a workout at the gym or buying ourselves a nice treat – something very interesting occurs within our brain. It triggers the release of natural substances called endorphins, which make us feel good. These are the body's way of perking us up, and they create a sense of contentment and wellbeing.

If you're someone who likes to exercise you'll know that after a good session in the gym you feel tired and healthy. You glow, both physically and mentally, and this is because exercise is a natural way of boosting our endorphin levels. Another natural activity that can produce this effect is laughter. When we joke and smile we feel better for it – not just while we're laughing, but afterwards too.

When we drink alcohol – or consume other addictive substances – it also triggers the release of endorphins. The booze makes us experience a change in our brain chemistry that causes us to feel more relaxed, and we may lose some of our inhibitions. For ordinary drinkers this isn't a problem. They can enjoy the buzz without going over the top; they have the self-control to avoid overindulgence.

This is a good thing, because otherwise diminishing returns set in. This happens when the benefits we get from each drink become smaller and smaller – hence the phrase 'the first drink is always the best'. If we carry on drinking, we eventually end up getting completely smashed, with all the negative baggage that entails.

So what is it that makes some drinkers able to stop before they get hopelessly drunk, while others become slaves to alcohol?

Understanding Endorphins

The word 'addict' comes from the Latin word *addictus*, which in ancient Rome was the word for a slave who was tied to a master by a debt. And just like a slave, an addict is powerless over his or her habit.

They become enslaved by a type of behaviour that involves repeated use of a substance or a process despite suffering consequences that are increasingly negative. This pattern can occur beyond the conscious awareness, and it repeats itself, with results that get worse and worse.

Addiction is when you keep doing the same thing over and over again, regardless of the consequences and despite the fact that it's causing harm to you or to others. If the first thing you do when you wake up in the morning is reach for a bottle of vodka, that's a pretty obvious clue that you're an alcoholic. But many, many people have drink problems that affect them in ways that are far more discreet, yet still have an extremely bad effect on their life and their health.

The drinking patterns of alcoholics vary enormously from one individual to the next. Some may drink every day, while others might go several days or even many weeks without touching a drop, only then take part in a huge binge. The thing they have in common is that when they're in the grip of the drink problem, the rush they receive from booze – and the subsequent effect on their feelings becomes highly addictive.

Conversely, there are some heavy drinkers who aren't necessarily alcoholics. They might drink large quantities, but the difference is that they reach a point in the evening when they decide they don't want any more, and they're able to stop. And they seem to have no problems coping with the effects of alcohol.

I've met people who can drink all day at a racecourse, yet they never actually get drunk, and when they head home they're in reasonably good shape. (I must say that these people are becoming pretty rare in my experience, but they do exist!) Such drinkers seem to instinctively know when they're reaching the tipping point and they slow down.

But an alcoholic doesn't *want* to slow down. He or she wants to find the tipping point and charge right through it. And it's not just alcoholics who behave like this. If a gambler can't resist blowing his wages, it's the mood lift from the endorphin rush of placing the bet that he's seeking.

Anything that boosts our endorphin levels, or which has the power to change our mood, can become addictive.

Of course, it would be an oversimplification to say this is the only factor involved, but it's very important to understand the relationship between endorphins and addiction. However, it's clearly not the endorphins *themselves* that are the problem (otherwise we'd all be addicts, since we all create them). So there must be something else in the make-up of an addict that makes them so desperate to constantly change the way they feel.

Doughnuts and Discomfort

In order to understand addiction, we need to be aware that it isn't just the *amount* that we consume (although obviously that's an important indicator). Addiction is also characterized by the *manner* in which we behave, and the *reasons* we do it. We need to understand what drives us to self-destruct despite the chaos and harm it causes.

Let's imagine that you're partial to the odd Krispy Kreme doughnut. Nothing wrong with that, after all, they're delicious. Maybe you've had a hard day at work and you want to put your feet up and enjoy one with a cup of tea. Afterwards, you feel pleasantly full, and you spend the rest of the evening watching television before retiring for a good night's sleep.

The enjoyment you got from the sugar rush in the doughnut probably contributed to your feeling contentment by boosting your endorphin levels, and it also changed your neurotransmitters in the brain – and you felt nice and full afterwards, too. No harm done (except, perhaps, to your waistline).

Now let's imagine a very different scenario. Let's suppose you're in the grip of a serious eating

disorder and are addicted to sugary foods. One doughnut will never be enough. After the first two or three, you'll probably stop getting any real enjoyment, but still you crave more. The effect each doughnut has on your endorphin levels might be negligible by now, but still you yearn for a boost.

You feel sick and bloated, yet you carry on bingeing. Not just on doughnuts but on anything sugary you can get your hands on. Suddenly, instead of making you feel better, the bingeing is making you feel a whole lot worse. You're also worried about putting on weight, and you feel dirty and disgusting, so, in secret, you make yourself throw up.

It's a nightmare scenario, yet the next day you repeat the whole process. You start off by seeking a lifestyle to improve the way you feel, so you reach for something sugary, and so on. However, the thing we need to tackle in order to understand why you're addicted to doughnuts isn't the *physical* way they affect you. The thing we need to discover is *why* you constantly want to change the way you *feel*.

It's the effect on your feelings that's driving the addiction, not the doughnuts themselves. The impact on your body chemistry is part of the process, but it's not the cause. It's whatever it is that's making you feel shit to begin with that's to blame.

Whatever substance or process we're addicted to, the process involved is usually the same. There's an underlying problem or issue that's causing us anxiety, and we try to alleviate it through our addiction. We may not consciously think about this anxiety; in fact, we may not even be aware of it.

These hidden feelings of discomfort can be the result of deep-rooted emotional issues that aren't always obvious, but the background anxiety they cause is always there, eating away at us.

If you harbour secret feelings of unease, it's only natural that you'll want to escape the distress they cause you, hence the constant craving to improve your mood by deadening down your feelings.

The word 'disease' sums up this phenomenon very literally, because the best way I can describe addiction is to say that addicts suffer from a form of '*dis-ease*'. In other words, they're never 'at ease'. This leads them to behave in a way that's slightly out-of-kilter with much of the rest of the population. Many addicts seem to have a different way of 'doing life' to other people, and for them, this creates a vague feeling of disconnection.

The causes of these negative emotions are varied and complex, but they're not necessarily triggered by huge events. It's the constant anxiety thrown up by normal, everyday life that addicts find so hard to deal with. A recovering addict friend of mine has a phrase to describe this problem: it's not the elephants that trample you – it's the rabbits that kick you to death.

It's natural for our body to want to alleviate any distress caused by anxiety. In fact, as we saw in the previous chapter, the limbic system in our brain is programmed to evaluate any threat and take action, even when we're unaware of it. Our subconscious mind works in a very complex way, so if we secretly have issues about things like self-confidence or buried trauma, our limbic system will be highly sensitive to this.

If you suffer from 'dis-ease' in certain situations, or in life generally, it would be logical for your limbic system to counteract this. The problem for an addict is that the way they do it is by snorting a line of cocaine, or reaching for a bottle of Scotch or by gorging on a mountain of chocolate.

In doing this, they're attempting to 'medicate' any negative feelings they might have. Addicts are usually seeking to medicate their mood in an attempt to dull down or avoid emotional pain, even when they're not aware of it.

We can only achieve long-term success in understanding addiction by tackling the causes of background anxiety and the emotional issues that I believe all addicts secretly suffer from. I'm certain of this because I've seen what happens in rehab clinics if we fail to tackle it – the patient invariably relapses.

Clearly, there's something much deeper going on than a person simply choosing to get high by snorting drugs or drinking to excess. Something compels them to keep on doing it, and as a result they develop a tolerance, which means they need to consume more and more of the same substance in order to make them feel good.

Most people who drink alcohol can probably remember the first time they drank enough to feel intoxicated. Some years down the line, they can probably drink twice as much and just feel good rather than drunk, and that's because a tolerance has built up. But they know when to stop.

An alcoholic, on the other hand, doesn't want to stop, and as a consequence, they'll drink more and more until they're drunk. After a while, though, even constant drinking won't hit the mark, and in those circumstances they have a horrendous time just trying to feel normal. In fact, it feels like they're going insane.

Champagne or Cooking Wine: What's Your Poison?

Most people think of 'an addict' as someone who is physically dependent on drugs, but there are many other forms of addiction that can ruin lives. Similarly, the very label 'alcoholic' is confusing because for most people it summons up a stereotypical image of a homeless drunk on a park bench.

But in fact, it doesn't matter if someone is getting wrecked on the world's most expensive champagne in a posh nightclub or if they're glugging cheap cooking wine in an alleyway – it still has the same effect.

A guy who lives in a £2 million mansion may feel anxious about different things to someone who lives on the streets, but the fear he feels is just the same. In my opinion they're drinking for the same reasons.

By the time an addict reaches the point of entering a treatment centre, they have the demeanour of someone who's been beaten into submission. They feel as if their life is over and they can no longer cope. Yet before they reach this point, they might still appear outwardly normal to the rest of the world; in fact, they may come across as very confident and self-assured. For every drunk in a park or junkie in a doorway there are millions of 'functioning addicts'.

Many of these addicts hold down very good jobs and they can sometimes be pillars of the communities. ~~They are often highly intelligent and creative too. Their work life is often the last area to be affected by the consequences of their addiction – after all, they need to regularly indulge in the addiction in order to feed it, and that requires an income. If they go to work while drunk or high they won't last very long, and if they're out of a job they won't be able to buy alcohol or drugs.~~

If we're to solve the riddle of addiction, I believe we need to go beneath the surface to discover the real reason for an addict's dysfunctional inability to deal appropriately with their emotions. And at the very heart of this problem is the issue of sensitivity.

Every addict I've ever met seems to suffer from an oversensitivity to emotional distress. Often they're not even aware of this – but when I talk to them, in order to get beneath the surface of their problems, I find that this is always the case.

Sensitivity: Gift or Curse?

In [chapter 1](#), I said that I believe addiction is a gift. This might seem a very strange thing to say, since it refers to a disease that causes so much harm. How can something with the potential to wreck lives be a blessing?

It's difficult to see anything positive in a condition that leads people to become slaves to their compulsions, often turning them into liars and cheats along the way. But these negative consequences, horrific as they can be, are mainly just the symptoms of addiction. I believe that at the heart of the disease lies a deep sensitivity to the stresses and strains of everyday life.

It's worth pausing here for a moment to explore this further. If we say that someone is kind and sensitive, we mean it as a compliment. We're saying that we believe they have a caring nature and that they're compassionate and mindful of the feelings of other people. I would say that this is true of the way most addicts behave when they go into recovery, and even when they're in the grip of the addictive behaviour they are still capable of flashes of great kindness.

But there's also another meaning to the word 'sensitive', and this definition is highly relevant to addicts. My dictionary defines the word sensitive as follows: *easily hurt; tender. Responsive to external stimuli or impressions. Easily offended or shocked.* It also points out that if we describe a subject or issue as being sensitive, we normally mean that it's liable to arouse controversy or *strong feelings*.

There's also a more blunt way of putting it: people with an addictive nature are simply too touchy for their own good!

I don't mean this as a criticism – I'm simply stating it as a fact. A lot of suffering alcoholics, and people with other addictive traits, will deny they're touchy until they're blue in the face. In fact, even the very suggestion that they're touchy can make them super touchy!

Exquisite Agony: Supersensitivity

I have a friend who drank heavily for 25 years. He always swore blind that he was the most easy-going man on the planet, yet he was always stomping around in a fury. He was angry and fed up at work and full of rage whenever he took to the wheel of his car. He'd also get into petty arguments and shouting matches with shop assistants.

Whenever his wife told him he was too touchy about life in general, he'd react with amazement and insist that all he wanted to do was chill out with a quiet pint. Unfortunately, he could never enjoy a 'quiet pint' because he'd invariably down eight or nine pints and wake up the next day with a steaming

sample content of Who Says I'm An Addict: A Book For Anyone Who Is Partial To Food, Sex, Booze Or Drugs

- [download The Atlantic Coast: A Natural History](#)
- [Angler: The Cheney Vice Presidency here](#)
- [**download online State of Siege \(Tom Clancy's Op-Center, Book 6\)**](#)
- [Green Petroleum : How Oil and Gas Can Be Environmentally Sustainable pdf, azw \(kindle\)](#)
- [click The Smashing Book #3: Redesign the Web](#)

- <http://nexson.arzamaszev.com/library/Bret-Easton-Ellis-och-de-andra-hundarna.pdf>
- <http://test.markblaustein.com/library/Angler--The-Cheney-Vice-Presidency.pdf>
- <http://econtact.webschaefer.com/?books/On-Political-Equality.pdf>
- <http://jaythebody.com/freebooks/The-Cuban-Kitchen.pdf>
- <http://cavalldecartro.highlandagency.es/library/Art--Literature--and-Passions-of-the-Skies--Analecta-Husserliana--Volume-112-.pdf>