

Explore Chapter 4

This chapter explains why people with schizophrenia often turn to alcohol and how it impacts their symptoms and treatment. It also offers guidance on recognizing alcohol misuse in schizophrenia and how families can support the journey to recovery.



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Why do people with schizophrenia turn to alcohol?



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How does alcohol affect schizophrenia and its treatment?



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How to detect alcohol misuse in someone with schizophrenia?



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How can you support the journey to mental health and sobriety?



Fast Facts

Alcohol as a coping mechanism.

Many people with schizophrenia turn to alcohol as a way to cope with distress, social isolation, or symptoms of their condition, but this often leads to worsening mental health and dependence.

Impact on treatment and health.

Drinking not only makes schizophrenia symptoms harder to manage but also can weaken the effects of antipsychotic medications, increase the risk of relapse, and lower the person's quality of life.

Early detection is important.

Recognizing the risk of alcohol use disorder (AUD) when schizophrenia is first diagnosed can help create better and more effective treatment strategies.

Integrated support.

With integrated care for both schizophrenia and alcohol use disorder, along with strong family support, individuals can achieve stability, improve their health, and rebuild their lives.

4.1

Why do people with schizophrenia turn to alcohol?



For many individuals with schizophrenia, alcohol becomes a coping mechanism in their attempts to self-medicate, ease social discomfort, and manage stress.

The social environment also plays a role. Being surrounded by alcohol, whether through social gatherings or community settings, can make it harder to avoid drinking. Some individuals may turn to alcohol to feel accepted or escape loneliness.



While alcohol may provide temporary relief, it ultimately worsens mental health problems, increasing the risk of dependence and making schizophrenia symptoms harder to manage.

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How common is Alcohol Use Disorder in people with Schizophrenia?

Alcohol Use Disorder (AUD) is **one of the most common** co-occurring conditions in schizophrenia.



Researchers show that around **21% of people** with schizophrenia have experienced alcohol use disorder at some point in their lives, and **11% are currently dealing with it.**

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The WHO's survey found that people with psychotic experiences **are more than twice** as likely to struggle with AUD as those without schizophrenia: **17.1% of those with psychotic experiences** had a history of alcohol use disorder, compared to just **7.2% of those without such experiences.**

This highlights the deep connection between alcohol use disorder and schizophrenia.

How does alcohol affect the brain?

Research has shown that **alcohol triggers the release of dopamine**, a brain chemical associated with pleasure and reward.

However, **long-term alcohol use damages the dopamine system, making the brain less sensitive**

to pleasure. Even after quitting alcohol, these changes may persist, worsening schizophrenia symptoms.

This **disruption in dopamine processing** is closely connected to the **development of psychotic symptoms** in schizophrenia.

Why are mental health and alcohol use disorders so closely connected?

The connection between alcohol use disorder and other mental health conditions can be complex. It may result from:

- Alcohol's **direct impact** on mental health
- **Shared** genetic or environmental factors
- **Overlapping traits** between schizophrenia and alcohol dependence
- A **broader pattern of co-existing disorders** that affect mood, behavior, and cognition

Research shows that **risk factors** for alcohol use disorder **can emerge early**, even before drinking becomes a problem.

These factors **increase the likelihood** of developing mental health issues, like anxiety, depression, and aggressive behavior.

The **internalizing-externalizing** framework **helps explain** how different mental health symptoms are related **and why alcohol use disorder often coexists with schizophrenia.**

“Internalizing” involves symptoms like sadness and anxiety.

“Externalizing” includes symptoms like aggression.

This model helps explain why people with alcohol use disorder often struggle with multiple mental health conditions, as **they may share common underlying causes.**

Why do some drinkers develop alcohol use disorder while others don't?

A person's genetic and biological characteristics help explain why not everyone who drinks develops Alcohol Use Disorder (AUD).

Researchers have identified **specific genetic variations** that can increase the risk of AUD, even in those who don't consume large amounts of alcohol.

These genetic factors may help explain why some individuals transition from occasional or heavy drinking to full-blown addiction.

Understanding these variations opens new possibilities for targeted prevention and treatment strategies, making interventions more effective.

Does alcohol cause or worsen psychosis in schizophrenia or offer relief?

Alcohol does not directly cause schizophrenia. Research shows that people with schizophrenia often

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turn to alcohol after experiencing anxiety or psychotic symptoms.

This suggests that alcohol is often used as a coping mechanism for feelings of distress and anxiety rather than a trigger for symptoms.

What is Alcohol-Induced Psychosis, and how is it different from schizophrenia?

Acute alcohol intoxication, especially in individuals who are already vulnerable, and long-term misuse of **alcohol can potentially lead to alcohol-induced psychosis**.

Typically, alcohol-induced psychosis is **triggered by alcohol withdrawal**, a condition also known as **alcohol withdrawal delirium**.

Symptoms may include auditory and visual **hallucinations and paranoia**, but these **typically resolve within 72 hours**. It's important to note that this **condition is not the same as schizophrenia**.

How are schizophrenia and alcohol use disorder linked?

Alcohol use in people with schizophrenia is influenced by a mix of genetic and biological factors, as well as life circumstances.

Genetic and family factors: Studies show that people with schizophrenia are more likely to develop alcohol problems if they have close relatives with Alcohol Use Disorder (AUD). However, schizophrenia itself **is not more common** in children of parents with AUD.

Biological influences: Many individuals with schizophrenia drink alcohol to self-medicate, hoping to ease their symptoms, but alcohol often makes things worse. Brain chemistry also plays a role - changes in dopamine levels may make people more sensitive to alcohol's rewarding effects, increasing the risk of addiction. Additionally, schizophrenia can impact impulse control and thinking abilities, making it easier to develop a drinking problem, even with small amounts of alcohol.

Social and environmental factors: Life challenges also contribute to alcohol use. Many people with schizophrenia struggle with stress, poverty, and loneliness, which may lead them to alcohol as a coping mechanism. Some use alcohol as a way to fit in socially or feel a sense of belonging. Additionally, changes in mental healthcare - such as moving away from hospital-based treatment to independent community living - can sometimes leave individuals with fewer job opportunities, less access to recreation, and limited social support, making alcohol more appealing.

4.2

How does alcohol affect schizophrenia and its treatment?



Alcohol can have a serious impact on schizophrenia, often making symptoms worse and affecting a person's mental state.

Since antipsychotic medications are primarily processed by the liver, alcohol can interfere with this process, reducing their effectiveness or causing stronger side effects.

The global impact of alcohol use disorder

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Alcohol use disorder remains a **major contributor to illness and death worldwide**. Globally, an estimated 400 million people (or 7% of the world's population aged 15 years and older) live with alcohol use disorders.

This disorder **occurs when someone loses control over their drinking**, leading to dependence, increased tolerance, and serious negative effects on their mental, physical, and social well-being.

It accounts for about **10% OF THE GLOBAL BURDEN** of disease related to substance use and mental health disorders.

Alcohol use disorder is highly disabling and is linked to numerous **health problems, both physical and psychological**.

When schizophrenia meets alcohol use disorder

When someone with schizophrenia also has an alcohol use disorder (AUD), it can make their illness harder to manage.

This may lead, among others, to:

- **worsening psychotic symptoms,**
- **more frequent relapses,**
- **lower quality of life,**
- **reduce the effectiveness** of antipsychotic medications,
- **difficulties adhering to treatment.**

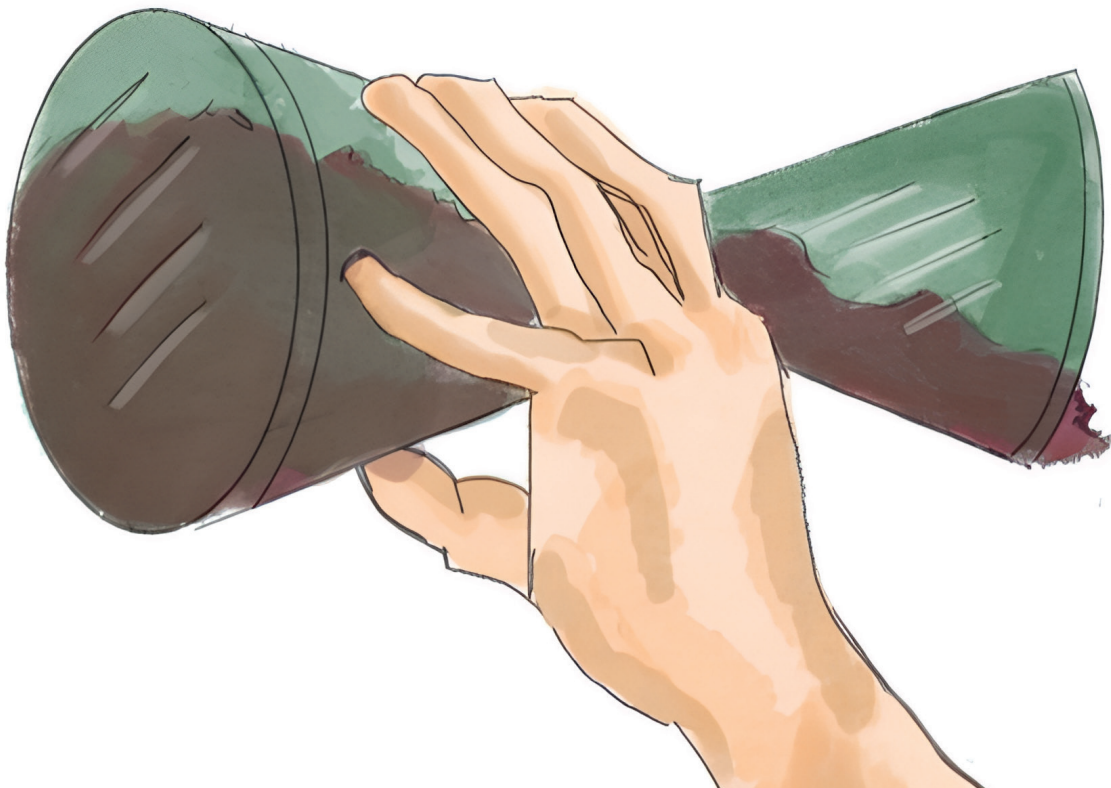
Studies have also found that those who drink heavily tend to have a longer history of schizophrenia and often require extended stays in mental health facilities.

For instance, chronic schizophrenia patients with alcohol use disorders tend to experience more severe positive symptoms, such (hallucinations or delusions), and greater levels of depression and negative symptoms (like emotional flatness) and suicidal behavior compared to those who have never used alcohol.

In cases of first-episode psychosis, alcohol use before hospitalization has been linked to more frequent positive symptoms, while also being associated with negative symptoms.

Moreover, alcohol consumption negatively affects cognitive function and reduces the quality of life in individuals with schizophrenia.

It also contributes to an increased risk of death from various causes in this population.



Early intervention matters

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Treating schizophrenia alone may not be enough to prevent the onset of alcohol use disorder. Identifying individuals at risk early is crucial for providing **timely preventive measures**.

Addressing alcohol use **before it escalates** can help reduce its harmful impact on health, improve treatment adherence, and lower hospital readmission rates. **Early intervention** plays a key role in enhancing overall well-being.

4.3

How to detect alcohol misuse in someone with schizophrenia?

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Recognizing alcohol misuse in someone who has schizophrenia can be challenging, as the symptoms of both conditions may overlap.

For example, isolation, disorganized thinking, and changeable behavior can be symptoms of both schizophrenia and alcohol misuse.

However, being aware of the specific **behavioral changes, physical symptoms, and subtle signs that indicate alcohol misuse** can help families identify problems early and take necessary action.

“**Early recognition allows for timely intervention, improving overall treatment outcomes and well-being.**

Specific indicators that can help distinguish alcohol-related issues:

Changes in behavior, such as increased secrecy, neglect of responsibilities, or a noticeable decline in personal hygiene.

Physical signs, like the smell of alcohol, unclear speech, or unsteady gait may also be apparent.

Another red flag is a **sudden increase in the consumption of alcohol or frequent intoxication**, especially in situations where the individual previously did not drink heavily.

Monitoring **how alcohol use affects their mental health symptoms** -

If there is a noticeable **worsening of hallucinations, delusions, or mood instability following alcohol consumption**, this could indicate a harmful relationship with alcohol.

It's also important to consider the **impact on their treatment** -

If they are **missing medications, avoiding therapy, or becoming more isolated**, these could be signs that alcohol misuse is interfering with their recovery.

What is alcohol-induced psychotic disorder?

Alcohol-induced psychotic disorder is considered a separate condition from schizophrenia.

It can also be distinguished from other alcohol-related disorders, like **alcohol withdrawal delirium**.

About 1/3 of people with alcohol dependence **who experience psychotic symptoms** are diagnosed with **alcohol-induced psychotic disorder**.

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Several theories attempt to explain how alcohol-induced psychotic disorder may develop. It might arise as:

- a way of self-medicating schizophrenia symptoms,
- a direct result of excessive alcohol use,
- a separate but concurrent condition.

Alcohol and violence in people with schizophrenia

Understanding the link between alcohol use, schizophrenia, and violent behavior is key to effective support.

- Research shows that a **history of violent incidents is a major predictor** of developing an alcohol use disorder (AUD) after a schizophrenia diagnosis.
- This underscores the importance of **closely monitoring both** alcohol consumption and any history of violence.
- Being **proactive** about these issues can greatly enhance your loved one's treatment and overall well-being.

Do men and women experience alcohol differently?

Men and women react differently to alcohol, and these differences are rooted in biology.

Women tend to become intoxicated after consuming smaller amounts of alcohol compared to men.

This **discrepancy** may be attributed to the fact that women typically have less total body water than men of similar size, resulting in **higher blood-alcohol concentrations** following equivalent alcohol consumption.

Additionally, **women possess a lower concentration of gastric alcohol dehydrogenase**, which breaks down alcohol in the stomach, compared to men.

4.4

How can you support the journey to mental health and sobriety?



Supporting a loved one with both schizophrenia and alcohol use disorder is a delicate balance that requires empathy, patience, and informed action.

Practical steps to create a **supportive environment**, encourage **treatment adherence**, and **promote sobriety** are crucial.

Equally important is that caregivers practice **self-care** to maintain their own well-being while continuing to offer support.

Reducing alcohol use can improve outcomes for dual schizophrenia

Alcohol use can significantly worsen the challenges faced by individuals with schizophrenia.

While alcohol is often responsible for poor outcomes, other factors - like other **substance abuse, lack of medication adherence, and stressful living conditions** - also play a role.

Studies show that people with both schizophrenia and alcohol use disorder are **more likely to experience negative outcomes**, including higher rates of depression, homelessness, and hospitalization.

However, **those who achieve sobriety tend to see improvements in their mental health, stability, and overall quality of life.**

These findings highlight the importance of an **integrated treatment approach** that addresses **both schizophrenia and AUD simultaneously**.

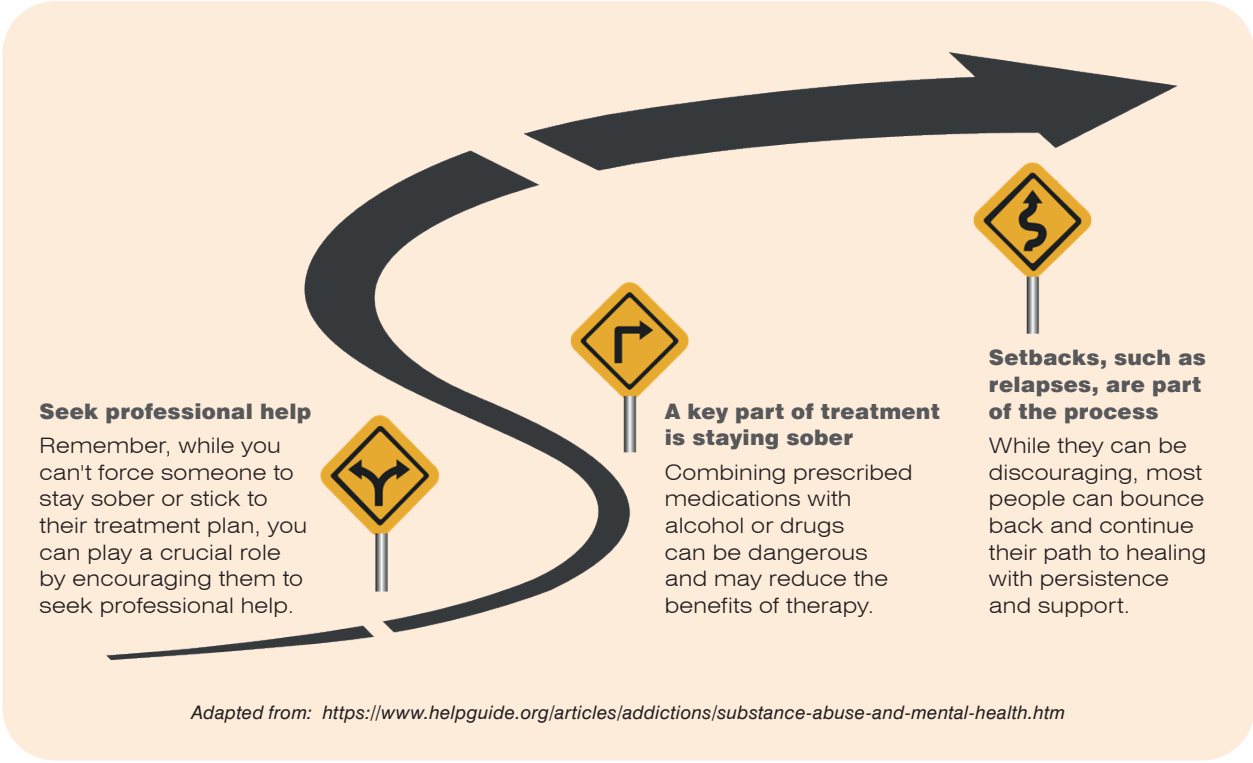
Key steps in managing schizophrenia and alcohol use disorder

- 1 The first step, **engagement**, focuses on building trust between the patient and the treatment team.
- 2 Next comes **persuasion**, where the goal is to motivate the patient to manage both conditions and work toward recovery.
- 3 During the **active treatment** phase, patients learn the skills and receive the support necessary for managing their illnesses and improving their lives.
- 4 Finally, **relapse prevention** involves strategies to help patients avoid setbacks and reduce their impact if they occur.

How can you support the journey?

Supporting someone dealing with both alcohol use and mental health issues can be tough. However, recovery is achievable.

Although the journey demands time, dedication, and bravery, many have successfully overcome these challenges and become stronger.



Recent research shows that treating mental health and substance use disorders together, rather than separately, leads to better outcomes.

Integrated treatment programs, usually run by teams of specialists, focus on outreach, comprehensive care, and a step-by-step approach to recovery.

The involvement and support of family and relatives are of crucial importance for the well-being of these patients.

Supporting a loved one through the challenges of schizophrenia and alcohol use disorder isn't easy, but with patience, awareness, and the right care, you can make a meaningful difference in their journey to recovery.

Key takeaways for caregivers:

- **People with schizophrenia may use alcohol to cope with distress, but it often worsens symptoms and leads to dependence.**
- **Alcohol can reduce the effectiveness of antipsychotic medication and increase relapse, hospitalization and health risks.**
- **Early detection of alcohol misuse is crucial to prevent further complications and reduce recovery.**
- **Family support and integrated treatment for both conditions greatly improve outcomes and long-term stability.**
- **Caregivers can help by watching for signs of alcohol misuse, encouraging treatment, and offering non-judgemental support.**

References:

1. Degenhardt L, Saha S, Lim CCW, Agui-lar-Gaxiola S, Al-Hamzawi A, Alonso J, et al. The associations between psychotic experiences and substance use and sub-stance use disorders: findings from the World Health Organization World Mental Health surveys. *Addiction* [Internet]. 2018 Feb 21;113(5):924–34. Available from: <https://pubmed.ncbi.nlm.nih.gov/29284197/>
2. Lv M, Wang X, Wang Z, Li X, Wang L, Tan Y, et al. Alcohol drinking in male pa-tients with chronic schizophrenia: preva-lence and its relationship to clinical symp-toms. *Frontiers in Psychiatry* [Internet]. 2023;14:1164968. Available from: <https://pubmed.ncbi.nlm.nih.gov/37520222/>
3. Castillo-Carniglia A, Keyes KM, Hasin DS, Cerdá M. Psychiatric comorbiditi-ties in alcohol use disorder. *The Lan-cet Psychiatry* [Internet]. 2019 Oct;6(12). Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7006178/>
4. Kember RL, Vickers-Smith R, Zhou H, Xu H, Jennings M, Dao C, et al. Genetic Un-derpinnings of the Transition From Alcohol Consumption to Alcohol Use Disorder: Shared and Unique Genetic Architectures in a Cross-Ancestry Sample. *The Ameri-can Journal of Psychiatry* [Internet]. 2023 Aug 1;180(8):584–93. Available from: <https://pubmed.ncbi.nlm.nih.gov/37282553/>
5. Swendsen J, Ben-Zeev D, Granholm E. Real-Time Electronic Ambulatory Moni-toring of Substance Use and Symptom Expression in Schizophrenia. *Ameri-can Journal of Psychiatry* [Internet]. 2011 Feb;168(2):202–9. Available from: <https://pubmed.ncbi.nlm.nih.gov/21078705/>
6. Canver BR, Newman RK, Gomez AE. Alcohol Withdrawal Syndrome [In-ternet]. *Treasure Island (FL): Stat-Pearls*; 2024. Available from: <https://pubmed.ncbi.nlm.nih.gov/28722912/>
7. Drake R, Mueser K. Co-Occurring Alcohol Use Disorder and Schizophrenia. *Alcohol Health and Research World* [Internet]. 2002 Jan;26(2):99–101. Available from: <https://pmc.ncbi.nlm.nih.gov/articles/PMC6683824/>
8. World Health Organization. Global status report on alcohol and health and treat-ment of substance use disorders. Geneva; 2024 Jun. Available from: <https://www.who.int/publications/i/item/9789240096745>.
9. Hunt GE, Large MM, Cleary M, Lai HMX, Saunders JB. Prevalence of co-morbid substance use in schizophrenia spectrum disorders in community and clinical settings, 1990–2017: Systemat-ic review and meta-analysis. *Drug and Alcohol Dependence* [Internet]. 2018 Oct;191:234–58. Available from: <https://pubmed.ncbi.nlm.nih.gov/30153606/>
10. Jones RM, Lichtenstein P, Grann M, Lång-ström N, Fazel S. Alcohol Use Disorders in Schizophrenia: A National Cohort Study of 12,653 Patients. *The Journal of Clinical Psychiatry* [Internet]. 2011 Jun 15 [cited 2020 Oct 30];72(6):775–9. Available from: <https://pubmed.ncbi.nlm.nih.gov/21733478/>
11. Levit JD, Meyers JL, Georgakopoulos P, Pato MT. Risk for alcohol use problems in severe mental illness: Interactions with sex and racial/ethnic minority status. *Jour-nal of Affective Disorders* [Internet]. 2023 Mar 15;325:329–36. Available from: <https://pubmed.ncbi.nlm.nih.gov/36587907/>
12. Robinson L, Smith M, Segal J. Dual di-agnosis: Substance abuse and mental health [Internet]. *HelpGuide.org*. 2018 [cit-ed 2025 Jul 11]. Available from: <https://www.helpguide.org/articles/addictions/substance-abuse-and-mental-health.htm>