



Patient & Family Guide
2020

Home-based Withdrawal Management Pilot for Support Persons



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Home-based Withdrawal Management Pilot for Support Persons

Welcome! Your loved one is enrolled in the Mental Health and Addictions Program (MHAP) Home-based Withdrawal Management Pilot. This is a key step in their recovery.

The pilot is for people who:

- › are at low risk of severe (very bad) or complicated withdrawal and
- › may benefit from medication-assisted alcohol withdrawal in a home or community setting.

Please read this guide carefully. It has helpful information for you, as your loved one's support person. If you or your loved one have any questions or concerns at any time, please contact the Withdrawal Management Unit at 902-425-1099 to talk with a nurse.

What is addiction?

- Addiction (also known as substance use disorder) is a chronic (ongoing) health condition. Using a substance (such as alcohol) repeatedly over time can lead to changes in the brain. This may make it hard for someone with addiction to resist strong urges to use the substance, even when it is harmful. Addiction can be managed like other chronic diseases (such as diabetes or heart disease).
- Sometimes a person needs medical or other supports to withdraw safely from substance use because of the changes in their brain and body.

What is alcohol withdrawal?

- Alcohol is a depressant. This means that it slows down your central nervous system (brain and spinal cord).
- When a person drinks alcohol every day for several weeks or longer, their central nervous system speeds up to work against the effects of the alcohol. This is called tolerance.
- Over time, their body and brain become dependent on alcohol. This means they need more alcohol to get the same effect.

- When a person who is dependent on alcohol stops drinking suddenly, their brain and body need to adjust. Their central nervous system will take several days to slow down to normal. During this time, the person may have acute alcohol withdrawal.
- Symptoms of acute withdrawal start about 12 hours after the person's last drink. Symptoms often start to get better after 3 days of not drinking alcohol, but may last up to 7 days (1 week).
- The type of symptoms a person has and how bad they feel them depends on:
 - › how much alcohol they have been drinking.
 - › how long they have been drinking.
 - › their overall health.
 - › their medical history.

- Withdrawal can be very uncomfortable and is sometimes a risk to their overall health. Rarely, alcohol withdrawal may lead to serious illnesses, such as:
 - › Delirium (confused thinking and actions)
 - › Hallucinations (seeing, hearing, or feeling things that are not there)
 - › Seizures (convulsions)
 - › Severe dehydration (not having enough fluids)
 - › Heart problems
 - › Death
- The home withdrawal process is for people who are not likely to get seriously ill from withdrawal.

How do I support my loved one during the withdrawal process?

- A person is only able to participate in home withdrawal if they have a support person with them (in person) throughout the withdrawal process. The support person can be someone they are currently living with or a family member or friend who agrees to stay with them during the withdrawal process.

- **It is important to support your loved one during the withdrawal process.** To safely support them, **you must** attend their in-person assessment at a Withdrawal Management Unit.
- If your loved one is assessed as being eligible for home withdrawal, and is willing to proceed, you must both sign consent forms to take part.
- Please review the patient pamphlet *Home-based Withdrawal Management Pilot* with your loved one.
- Shortly after you arrive home from the in-person assessment, a nurse from the Withdrawal Management Unit will call to help you and your loved one get ready for the withdrawal process. **You must be available by phone at all times. If anything changes and you will not be available by phone, please contact the Withdrawal Management Unit as soon as possible.**
- After the first followup call, medication will be ordered to the pharmacy for you to pick up or have delivered.

- Once the withdrawal process starts, the nurses will check in with you by phone or video at least every 12 hours until the process is complete. During the withdrawal process, your role will be to:
 - › help to create a calm and positive atmosphere.
 - › fill their prescription.
 - › keep the medication in a secure place.
 - › help them take their medication as directed.
 - › encourage them to drink and eat small amounts of food.
 - › encourage them to relax.
 - › help them manage pain or discomfort, per their doctor's instructions.
 - › **call the Withdrawal Management Unit or 911 if they have any of the symptoms listed on page 9.**
 - › be available by phone at all times until the withdrawal process is complete.
- **Please note: If you withdraw your support during the process or are not able to do any of the items listed above, your loved one will not be able to continue as part of the pilot. They will be offered a spot on the waiting list for inpatient care instead.**

What are the symptoms of alcohol withdrawal?

- It is normal for your loved one to have discomfort and symptoms during the withdrawal process. If their withdrawal symptoms cause them discomfort, it is important that you encourage them to take their diazepam (Valium®) prescribed by their doctor.
- Common withdrawal symptoms may include:
 - › Anxiety
 - › Feeling irritable or agitated
 - › Restlessness
 - › Sleep problems
 - › Mild headache
 - › Mild nausea (feeling sick to your stomach), stomach cramping, or upset stomach
 - › Mild tremors (shakes)
 - › Mild muscle aches or cramping
 - › Itchy skin or tingling (“pins and needles”)

- Less common withdrawal symptoms may include:
 - › The same symptoms as above, but worse
 - › Panic attacks
 - › Feeling very depressed
 - › Mood swings
 - › Vomiting (throwing up)
 - › Bad sweats and/or chills
 - › Feeling like your heart is racing

It is important to call the Withdrawal Management Unit for advice if your loved one has any of these less common symptoms.

Rare, serious withdrawal symptoms that need immediate medical attention include:

- › Hallucinations
- › Confusion or not being unaware of where you are (You may notice this before your loved one.)
- › Delusions (having strange ideas or paranoia [mistrust] that is not real. You may notice this before your loved one.)
- › Blacking out or fainting
- › Fever over 38° C/100.4° F
- › Seizures

These symptoms listed are a medical emergency. Call 911 right away or go to the nearest Emergency Department. Then call the Withdrawal Management Unit.

What medications can help my loved one manage their withdrawal symptoms?

- Diazepam (Valium®) is a medication that can be used to treat alcohol withdrawal symptoms until withdrawal is complete.
- **It is important to read the information from the pharmacy when you get the medication.**
- Your loved one will receive the medication in 5 mg tablets. Store the medication in a secure place that only you or your loved one can access. It is best if you give your loved one the medication.
- Make sure your loved one takes the medication as directed. They do not need to take it on a schedule, only as needed.
- The tablets can be taken with or without food.
- The tablets must be swallowed whole. **Make sure your loved one lets the tablets dissolve in their mouth. Make sure they do not chew or crush the medication** or take it in any way other than as directed.
- For the first 24 hours, your loved one can take 1 to 2 tablets every 4 hours, as needed. **They should NOT take more than 10 mg (2 tablets) every 4 hours. They should NOT take more than 40 mg (8 tablets) total in the first 24 hours (1 day).**

- This medication can make people feel tired or a little dizzy. If you notice that your loved one is unusually sleepy, unsteady on their feet, or confused after taking this medication, contact the Withdrawal Management Unit before they take another dose.
- **Do not let your loved one drive, operate heavy or dangerous machinery, or make important decisions while they are taking this medication and going through withdrawal.**
- Contact the Withdrawal Management Unit if they are not feeling well and it is not yet time to take another dose.
- Contact the Withdrawal Management Unit as soon as possible if your loved one loses or accidentally throws out the medication during the withdrawal process. The missed doses may or may not be replaced.
- This medication will not be prescribed after the withdrawal process is complete. Please return any leftover medication to the pharmacy for safe disposal.

This medication is NOT to be taken with alcohol. Your loved one must stop taking this medication if they use any alcohol at all during the withdrawal process. If this happens, contact the Withdrawal Management Unit as soon as possible for further advice.

What else can I do to help my loved one through withdrawal?

- Keep your home as quiet and peaceful as possible. Even if your loved one has trouble sleeping, resting can help.
- Encourage them to try to eat regularly. Even a small amount of food can help. They should try to avoid spicy, hard to digest, and rich foods.
- Encourage them to keep up their fluid intake. They should:
 - › Drink plenty of water, taking small sips at a time.
 - › If they are a regular coffee or tea drinker, try to help them limit these drinks, as extra caffeine can disrupt their sleep and make them feel more anxious.

- › Electrolyte replacement drinks (like sports drinks) may be used in moderation, but may upset their stomach.
- › Most “energy drinks” contain a lot of sugar and caffeine. They should not be a main source of fluid intake.
- Help to reassure your loved one and distract them from their cravings. Remind them of the 5 Ds:
 - › **Do** an activity (like watching a video, playing cards, or listening to music).
 - › **Delay**. Encourage them to put off making a decision for an hour.
 - › **Drink** a lot, especially water.
 - › **Discuss** their reasons for stopping alcohol use.
 - › **Do** gentle exercise (like walking, stretching, or yoga).
- Be patient and willing to listen.

- Over-the-counter medications may help with some withdrawal symptoms. **These medications must be used as directed on the package.** They include:
 - › Advil® (ibuprofen) or Tylenol® (acetaminophen) for headaches and muscle aches
 - › Imodium® (loperamide) for diarrhea (loose, watery poop)
 - › Gravol™ (dimenhydrinate) for mild nausea
 - › Benadryl® (diphenhydramine) for mild itching
 - › Zantac® (ranitidine) for acid indigestion
- Gravol™ and Benadryl® can make people feel tired and/or dizzy. Your loved ones should not use more than recommended on the package.
- Your loved one should talk with their pharmacist before taking any over-the-counter medication to make sure it will not interact with any other medications they are taking.

How long will the withdrawal process take?

- Usually, most withdrawal symptoms stop after 3 days of not using alcohol. They may still have some symptoms, especially anxiety or trouble sleeping.
- Craving alcohol usually stops, but can happen every once in a while. This is normal.
- You will know your loved one is getting to the end of withdrawal when the symptoms get weaker and happen less often.

What will happen after the withdrawal process?

- Near the end of the withdrawal process, the Withdrawal Management Unit's discharge planner will work with your loved one on their plan for ongoing recovery/addiction treatment.
- Recovery is different for everyone. We suggest that your loved one continue ongoing recovery work after their alcohol withdrawal. Scientific studies show that working on your recovery every day can improve your chance of reaching your overall recovery goals.

- The nurse will confirm with you and your loved one when they have completed the withdrawal process and no longer need medication. They will help to answer any questions you may have.
- A discharge planner will also call your loved one to see how they are doing after the withdrawal process. They will help to make sure your loved one will be able to continue with their recovery after this pilot is over.

How do I contact the Withdrawal Management Unit?

- You and your loved one may call the Withdrawal Management Unit at any time during this pilot.
 - › Phone: 902-425-1099
 - › Hours: 24 hours a day, 7 days a week
- You can also call the Mental Health Mobile Crisis Team:
 - › Phone (toll-free): 1-888-429-8167
 - › Hours: 24 hours a day, 7 days a week
- **Call 911 or go to the nearest Emergency Department if your loved one has any of the symptoms listed on page 9.**

How can I give feedback on the pilot?

- **We welcome your feedback.** You can give feedback on the home-based withdrawal management pilot by:
 - › Completing the feedback form you were given at the in-person assessment. This feedback is confidential and will help us improve the home-based withdrawal process.
- You can give feedback on your experiences with Nova Scotia Health by:
 - › Phone (toll-free): 1-844-884-4177
 - › www.nshealth.ca/contact-us/patient-feedback

What are your questions?

Please ask. We are here to help you.

Looking for more health information?

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

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The information in this pamphlet is to be updated every 3 years or as needed.