

Health Relatives

The concept of health relatives relates to two patterns characteristics of health issues:

- 1) Certain problems tend to cluster within certain individuals, and
- 2) The incidence of certain health problems tends to cluster in blood relatives.

So the term “health relatives” refers to both the processes that cluster together and to the blood relatives in whom these problems cluster.

Can you picture an alcoholic who has no other problems apart from his or her drinking? Can you think of any who has no issues with anxiety, depression, weight, or other addictions, who eats a balanced diet and enjoys fulfilling relationships, who has the capacity to relax, concentrate, and sleep? If you can't think of any, it's because alcoholism never stands alone. It stands in the context of its health relatives. And, of course, in the context of ones' life. More often than not, people who have an assortment of these problems are likely to come from families with the same or related health problems.

How can this information help alcoholics in recovery?

It can help by directing your search for good matches between problems and solutions to the biological underpinnings of your particular case of alcoholism.

The health relatives of alcoholism include:

- Anxiety
- Depression
- Other mental health problems including schizophrenia
- Attention deficit Disorder and ADHD
- Obesity
- Diabetes
- As well as the blood relatives in whom these problems cluster

The relationships are complicated in their details but simple in underlying principle. All of the problems are caused in large part by our diet and lifestyle. Suppers for Sobriety emphasizes two critical, underlying biological conditions that arise over and over in alcoholics and their loved ones. One is trouble with blood sugar; the other is deficits in the brain chemicals needed to feel normal pleasure. And the two often go hand in hand. (See home page “Counselors” and click on “Including the Body in the Treatment of Alcoholism” for more information on blood sugar, and “Counseling Alcoholics: A Brain-based Body, Mind, Spirit Approach” for more information on the brain chemistry of pleasure.)

There are two general ways to approach alcoholism and its health relatives. One is scientific. It involves precise diagnosis and treatment with medical solutions for narrowly defined problems. It's expensive and not available to those without access to good healthcare. The other is about diet and lifestyle, family, and community. It's not expensive, and it's available to anyone who is able and willing to embrace healthy change.

For people with end-state conditions – diagnoses like diabetes – the scientific approach is necessary and must be part of the solution. For the rest, prevention and harm reduction through diet and lifestyle can fully or partly bypass a diagnosable disease. That's because at their roots, alcoholism and its health relatives are largely *caused* by or at least reinforced by poor nutrition and lifestyle choices. For those suffering with the end-state diseases, both approaches are likely to be needed.

Health Relatives

Consider this observation: The United States spends more than any other country on the planet for health care. We are rated 37th in the world, however, in terms of the health of our population. When epidemiologists gauged the relative importance of the many factors that determine health, genetics, environment and the health care system together account for only 50%. The other 50% is a single factor: lifestyle.

This is very good news for alcoholics and their health relatives because most of your problems fall into the category of challenges over which you already have or can get full or partial control. (See "BRIM Inventory" under "Chapters" on the home page.) The solutions to many of your sufferings will not be found by doctors, scientists or experts of any kind. They require that you accept the challenge to change.

As stated, alcoholism and diabetes crop up often in families. Part of this owes to genetic vulnerability in specific populations, but only part! And you have no control over your parentage. Here is an opportunity to work the wisdom of the serenity prayer.

The BRIM Inventory (See under "Chapters" on the home page) will guide you through the process of applying the wisdom of the serenity prayer to your own case. Genetics falls to acceptance; you cannot change your history. Diet and lifestyle change require courage; having the wisdom to know where to focus your efforts requires your own input and the support of your therapeutic friends.

The important point for people with alcoholism and any of its health relatives is that prevention and treatment rely on what you eat, how you eat it, your stress load (See "How We Understand Alcoholism" under "Chapters" on the home page.), how you use your body, and your context. These are all areas of your life over which you have or can get full or partial control.

At Suppers, we interpret the high rates of obesity, diabetes, and alcoholism as the logical consequence of a collision course. The collision is between our bodies – designed by thousands of years of evolutionary pressure for feast and famine, hard work, and a pure environment – with our lifestyle -- characterized by plentiful junk food and substances, lack of physical activity, and an increasingly toxic environment.

Alcoholism, diabetes, and obesity are particularly tight health relatives biologically. What they all have in common is a problematical carbohydrate metabolism. Estimates by nutritional psychologists of the percentage of late stage alcoholics who develop blood sugar regulation problems vary, but typically indicate a majority. Of course, Type II diabetes itself is defined by the body's loss of capacity to regulate blood sugar through appropriate insulin responses. And concerns about obesity, now epidemic among American children – have prompted the Centers for Disease Control to estimate that one out of three American children will become diabetic in their lifetimes.

At the time of this writing, the figure is one of two for Hispanic children, and African Americans are in between. The fastest growing subgroup of the population to be diagnosed with Type II diabetes – once a disease of the aged -- is Hispanic men in their 30s. Native Americans also have extremely high incidence of both alcoholism and diabetes, now the fastest growing disease on the planet.

The Suppers approach does not dispute the role of social and economic pressures in Native American, Hispanic, and African American populations that support high rates of alcoholism, obesity and diabetes. It simply calls for the biological contribution to be dealt with as well.

Health Relatives

In all three populations, the people in question have only in recent generations been exposed to the western diet and lifestyle. So their people suffer the consequences of refined food and relative physical inactivity in addition to their social and economic disadvantages.

Take the example of a Central American immigrant who finds himself working in an American city. For all previous generations, his ancestors subsisted on whatever nature and their own labors could provide: water, whole plant-based foods, and wild meats that required much physical labor to gather or produce. Nature ensured that their bodies were designed to survive famine and hard conditions.

Then one of their sons arrives in an American city where, suddenly, food is cheap and plentiful, and his diet is composed of new and highly refined ingredients. What might be the consequence?

The consequence is exactly what we are seeing: high rates of diabetes, obesity, and alcoholism. His body is, in a sense, ancient. It is genetically crafted by survival pressures in his native land for the conditions in his native land. But he and his family are the first generations to suffer the consequences of the modern diet and lifestyle, unlike European Americans, who have been exposed to these ingredients and refining processes for many generations. The first generations suffer the greatest consequences of the collision between the ancient bodies and the modern diet and lifestyle.

Add to his plight that he is poor and stressed, that junk carbohydrates are cheap, plentiful and more addictive than whole foods, and the consequences of the collision course are reinforced: diabetes, obesity, and alcoholism.

The same scenario applies to any group whose members arrive in the land of plenty in ancient bodies designed by the simple diets and challenging physical conditions of their biological homeland.

There is no such thing as a genetic epidemic. There is only genetic vulnerability and how it combines with all the other circumstances. The rest is accounted for through our habits and the culture in which we form these habits. The solution lies in creating a culture that supports our basic biological need for wholesome food and meaningful activity and our basic human need for healthy connections.

At Suppers, our understanding is that the incidence of preventable disease including alcoholism and its health relatives will continue to rise until the individuals, families, and culture meet these most basic human needs. And our forum for making these changes is the family tables of Suppers for Sobriety.