Did you know …

Whether a person consumes a few drinks or many drinks, the rate of alcohol elimination is the same. The enzymes that remove the alcohol from the body become saturated and alcohol is metabolized at the maximum rate possible. So if you continue to drink more alcohol, the blood alcohol level continues to rise.

In general, alcoholics eliminate alcohol more quickly than non-alcoholics. However, how fast alcohol is eliminated from the body is unique to every individual. This makes estimating a person’s level of intoxication impossible. For treatment advice concerning alcohol poisoning, contact the ISPCC at 1-800-222-1222.

“My friend is drunk. Can I let them sleep it off?”

This is not an unusual call to the ISPCC. Sadly enough, too many high school and college students say they wish they would have sought medical treatment for a friend suffering from alcohol poisoning. College campuses nationwide are reporting an increased incidence of serious alcohol poisoning – even deaths – from excessive alcohol use.

It’s dangerous to assume a person will be fine by “sleeping it off.” A person’s blood alcohol concentration (BAC) can continue to rise even after he or she has passed out. After a person stops drinking, alcohol in the stomach and intestine continues to be absorbed into the bloodstream. It may take from 30-90 minutes after a person stops drinking before reaching their highest level of intoxication. Several different factors affect the level of intoxication of an individual: the person’s size and gender, the amount of alcohol ingested, how much food is in stomach, what medications the person is taking and the individual’s tolerance to alcohol. These factors make it difficult to gauge exactly how much alcohol is too much. The body gets rid of alcohol at a rate of about 1 drink per hour. Drinking more than one drink per hour may cause a rise in BAC because the body is absorbing alcohol faster than it can eliminate it.

Death from alcohol poisoning can occur in one of two ways: (1) the person may vomit after they have passed out, aspirate the vomitus and asphyxiate or (2) the person may stop breathing due to alcohol's direct respiratory depressant effects. Combining other CNS depressants with alcohol can lead to coma or death.

Treatment for alcohol poisoning is primarily supportive: position the patient to prevent aspiration, intubate if the patient can not protect the airway, and crystalloids and vasopressors for hypotension. Activated charcoal has no effect on ethanol absorption. Hemodialysis should be considered for severe or refractory hypotension, or for very high blood ethanol levels.

As students return to class this month, they may find a sub-culture that will encourage partying and binge drinking. Some may die trying to be part of that culture.

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