

## **Checklist of 21 Symptoms Leading To Relapse**

The time to prevent a relapse is long before the irrational thinking has reached the final insanity of taking the first drink, pill or fix. The following is a list of common symptoms leading to a possible relapse - or what the 12 Step programs commonly call "stinking thinking."

- 1. EXHAUSTION:** Allowing yourself to become overly tired or in poor health. Many chemically dependent people are also prone to work addictions. Perhaps they are in a hurry to make up for lost time or overworking to compensate for feelings of guilt or personal inadequacy? Good health, proper self care and enough rest are essential to recovery. If you feel physically well, you are more apt to have a healthy and optimistic mental outlook (think well). If you feel physically poor or fatigued, your thinking is more likely to deteriorate toward becoming negative. A pessimistic attitude may follow and if you feel badly enough, you might begin thinking that a drink couldn't make it any worse or that it could help you return to a positive frame of mind.
- 2. DISHONESTY/DENIAL/RETURN TO DENIAL:** This begins with a pattern of unnecessary little lies and deceits with fellow workers, friends and family. Then what follow are important lies to yourself, justifying, minimizing or generalizing addictive thinking and behavior. This is called rationalizing, making excuses for not doing what you do not want to do, OR for doing what you know you should not do. Small deceits sow the seeds for major dishonesty. Dishonesty & recovery don't mix.
- 3. IMPATIENCE:** Things are not happening fast enough. Or others are not doing what they should or what you want them to. Impatience involves having a hard time tolerating frustration and delayed gratification; wanting everything "yesterday." Give yourself the time you need for you to get well and for things in your life to change as a result.
- 4. ARGUMENTATIVENESS:** Arguing small and ridiculous points of view ("argumentativeness") indicates a need to always be right. "Why don't you be reasonable and agree with me?" Are you looking for an excuse, a reason, or permission to take a drink or a drug? Rather than arguing with others, try considering others' differing points of view. Consider the importance of learning an attitude of acceptance of your addiction and of the value of tools of recovery.
- 5. DEPRESSION:** Unreasonable and unaccountable melancholy and despair may occur from time to time as a *natural part of getting well* from a chemical dependency. Periods of depression are times when risk of relapse is very high. Deal with your negative feelings by talking about them. There are different kinds of depression. Some are part of the recovery process. All need to be talked out. Lingering and severe depression may need to be checked out by a professional familiar both with depression and the recovery process.
- 6. FRUSTRATION:** You may feel frustration with people as well, because things may not be going your way. Remember everything is not going to be just the way you want it. You must develop new coping skills and outlets to cope with frustration.
- 7. SELF-PITY:** the chemically dependent person talks and acts as if no one has it as bad as they do. "Why do these things happen to me?" "Why must I be an addict?" "Nobody appreciates all that I am doing." In other words, "Poor me, poor me, pour me a drink!" Self-pity is a breeding ground for negative and low self-esteem. Everyone has their issues and problems, some more, some less - but focusing on feeling sorry for yourself is not going to improve your life.

8. **COCKINESS/OVERCONFIDENCE:** This dangerous attitude of "I've got this problem licked. I no longer fear addiction!" may lead to entering drinking/drugging situations to prove to others that you don't have a problem. Do this often enough and it will wear down your defenses against relapse. Don't *test* your recovery. You may lose!

9. **COMPLACENCY:** when things begin to improve - the chemically dependent person believes that they no longer need to focus on their recovery effort; they are convinced they will never use again. One may become complacent and have thoughts of "Drinking was the farthest thing from my mind." Not drinking was no longer a conscious thought either! It is dangerous to let up on discipline because everything is going well. **A little fear and constant awareness of one's thoughts, feelings, and vulnerabilities are good things to develop.** *More relapses occur when things are going well than when things are going badly.*

10. **EXPECTING TOO MUCH FROM OTHERS:** "I've changed; why hasn't everyone else" It's a plus if others do change, but change or not, the business of recovery is your business. They may not trust you yet or may be looking for more evidence of your improved physical and mental health. Be prepared to deal with disappointment in your expectations of others. Expecting others to change their lifestyle just because you have will set you up for a lot of frustration & other negative feelings.

11. **BLAMING:** others instead of taking personal responsibility for one's own thoughts, feelings or behavior. Attempting to control one's recovery through **manipulation** and **blaming** of others for their problems is not being accountable. When that's happening, these are early relapse signs

12. **LETTING UP ON DISCIPLINES/DICOUNTING A RECOVERY PROGRAM:** Don't let up on the daily structure within your day/week. Keep things balanced. Whether it includes prayer, meditation, daily inventory, utilizing your sponsor, exercise, surfing and/or AA/NA attendance, keep with it! Letting up on these things can stem from complacency or boredom with your program of recovery. You cannot afford to be bored with your recovery. Continue to allow others to help.

13. **USE OF MOOD ALTERING CHEMICALS:** You may feel the need to ease things by taking a prescription or over-the-counter drug prescribed by your doctor. You may never have had a problem with other chemicals, but be careful as taking medication can be a subtle way to have a relapse. The reverse of this is true for drug dependent persons who start to drink. Remember, once addicted to one substance the potential to become quickly addicted to another definitely exists. So, if you and your doctor decide together that perhaps trying a medication may help with your mood, that's fine, but be careful and choose wisely. Stay in good communication with your physician regarding the effects of the medication and by all means, stay away from using addictive or commonly abused medications (i.e.: Vicoden®, Klonopin®, Xanax®, Percocet®, Valium®).

14. **WANTING TOO MUCH TOO QUICKLY/SETTING UNREALISTIC GOALS:** Do not set goals you cannot reach with normal effort. Do not expect too much. It's always great when good things happen that you were not expecting. You will get what you are entitled to, as long as you do your best, but maybe not as soon as you think you should. "Happiness is not having what you want, but wanting what you have."

15. **FORGETTING GRATITUDE:** You may be looking negatively on your life, concentrating on problems that still are not totally corrected. It is important to remember where you started from, what you have achieved in the recovery process and how much better life is now.
16. **HOPELESSNESS:** Thinking that it will never get any better; that there's no point in trying to stay clean and sober because nothing gets better anyway. Talk to someone about your feelings.
17. **Unreasonable Resentments:** Getting mad unreasonably can make you pick up your drug of choice. Also, you can forget that *you* get hurt if you use alcohol or other drugs and you can mistakenly think, "Boy, will *he* be sorry when I get drunk. It will be his fault."
18. **ISOLATION:** Isolation and attempting to solve problems on their own; not sharing what is going on with others in the support group. Not wanting to see anyone or to discuss your sobriety. This may mean that you are setting yourself up for a fall & don't want anyone close enough to confront you on it.
19. **"IT CAN'T HAPPEN TO ME":** This kind of thinking is very dangerous. Almost anything can happen to you and is all the more likely to happen if you become careless with your recovery. Remember that alcoholism is a progressive disease and you will be in even worse shape if you relapse.
20. **RELIANCE ON RELATIONSHIPS FOR SOBRIETY:** Saying, "I have a new friend, and she'll keep me sober, no matter what." No one can guarantee your sobriety but you. Take stock in life. For many in recovery, their lives have been an endless cycle of searching for the next thing to make them feel *okay*. Why would love be different? There are risks to starting new relationships in the early part of the recovery process. Folks start to focus on other people and take their attentions off themselves.. This is not useful to recovery and becomes an attractive alternative to looking at their own pain.<sup>1</sup> Uncomfortable feelings need to be explored and felt, not buffered by sex. And remember, "*Don't shit where you eat.*" (*Don't date in AA/NA*)
21. **OMNISCIENCE:** This is an attitude that results from a combination of many of the above: you now have all the answers for yourself and others.\* No one can tell you anything. You ignore suggestions or are unable to accept advice or feedback from others. If such is the case, relapse is imminent unless drastic changes take place. ("Omniscience" is derived from two Latin words: "Omnia Scit," meaning: "He knows it all.")

*In addition to the above, ask yourself:*



- *Do I have a recovery Plan?*
- *Am I carefully following that plan?*
- *Have I let up on any part of that plan?*

*Take a Weekly Inventory to See If Symptoms Are Present*

<sup>1</sup> Tracy Helton Mitchell, [The Big Fix: Hope After Heroin](#), Seal Press, (2016).

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