

STORIES AND LESSONS  
FROM SOBRIETY

A SPIRITUAL PATHWAY TO

# RECOVERY FROM ADDICTION



A PHYSICIAN'S JOURNEY OF DISCOVERY

LINVILLE M. MEADOWS, M.D.

## CHAPTER THREE

# Addiction is a Disease

*"I hold a beast, an angel and a madman in me,  
and my enquiry is as to their working,  
and my problem is their subjugation and victory,  
downtrown and upheaval,  
and my effort is their self-expression."  
—Dylan Thomas*

### **The Beast, the Angel, and the Madman**

Cameron was leading the group. She was the favorite among the guys, for she was the youngest staffer by ten years. She was a pretty brunette with a pageboy haircut that only a slim woman can pull off. I was falling in love with her.

"I'm sure most of you are familiar with Dylan Thomas, the Welsh

poet,” she began. “Not only was he famous for his beautiful poems, but he was possibly the worst drunkard ever to pick up a pen. He died of chronic alcoholism at the age of 39.”

“He did have a remarkable insight into his illness and described it as having three parts: the beast, the angel, and the madman. I quote, ‘I hold a beast, an angel and a madman in me, and my enquiry is as to their working, my problem is their subjugation and victory, downthrow and upheaval, and my effort is their self-expression.’ This is a good place to begin our inquiry into the nature of the disease of alcoholism, of addiction. Thomas once told a friend—admittedly while intoxicated—that he drank to reconcile the disorder outside and the order within himself. Sound familiar to anyone?”

A murmur spread through the room.

“The beast: in each of us, Thomas suggests, lives a beast that is capable of anything—absolutely anything—from simply wreaking havoc in the lives of others to committing murder. Like Dr. Jekyll’s Mr. Hyde, the beast is completely without morals of any kind and lives only to destroy. There are those who would deny that such a monster lives within them. ‘Oh, I would never do that,’ they say, referring to the terrors committed by their fellow man, but they simply don’t know what they are truly capable of. The horrible truth is, under the right circumstances, like being stoked up on crack cocaine, our murderous Mr. Hyde will come screaming out.”

I knew about Hyde.

Cameron continued, “The madman: at the core of our addiction lies a peculiar insanity. Certainly, we’ve pickled our brains with all the poisons we used, but most of those effects will fade with time. However, the insanity of our addiction appears to be hard-wired in. No matter how long we have been sober nor how spiritually fit we may appear to be, lurking somewhere in our subconscious is the notion that one day we can drink again like other people. At some weak moment, some stressed out afternoon when we least

expect it, the sudden uncontrollable urge to drink and use will rise again to threaten us. Without some recourse to a power greater than ourselves, we will drink again.”

“The angel: a number of us have considered a life in religion, though usually with little success,” said Cameron. “My sponsor was kicked out of divinity school for playing piano at music bars. My evangelist grandfather kept a still behind the barn. Those of us who didn’t seek a religious life at least thought about it. Strange as it may sound, in us drunks and junkies there exists a strong and unquenchable spiritual thirst. This spirituality underlies our hunger for meaning, and our search for an explanation for existence. This yearning holds the key to our recovery. This is our saving grace, our Angel.”

I wasn’t sure if an angel had ever touched my life. Hunger for meaning? Certainly.

“During your time here, you’ll learn about the nature of your disease and how it can be treated. But most of all, you’ll learn about yourselves.”

The men in the room all applauded.

She also said that we were sicker than we knew, but it would be months before I could understand the truth of that. I only knew one thing, that I was scared shitless, the most frightened I had ever been in my life. For my own Mr. Hyde, a monster of unimaginable horror, had sprung forth from within me and I would do anything—absolutely anything—to keep that creature from ever appearing again.

### **The disease concept**

“May I ask a stupid question?” I asked as we walked to our first session of the day.

“I didn’t know you could ask any other kind,” said Robert, huffing and puffing along the trail.

“Go ahead,” said Mike, trying to smoke and walk at the same time.

“What is addiction, anyway?” I asked. “I mean, I thought I knew, but now I’m not so sure. Nobody here looks like a rummy in the gutter or a wino panhandling on a corner.”

“Ah, the first sign of progress,” said John, sprinting effortlessly up from behind. “The good doctor admits he doesn’t know. There may be hope for you yet, my boy.”

“Don’t be so hard on him,” said Robert. “He’s just a newcomer. Only an egg.”

We paused for breath, the summer morning already muggy and warm.

“Let me help you out here,” said Mike. “Addiction’s an illness, just like diabetes or any other chronic disease.”

“Lots of people think it’s a moral weakness,” said Robert. “The drunkard stumbling on the street has succumbed to the temptations of the Devil and Demon Rum.”

“They can’t understand why I don’t just quit, like they did,” said John. “Those without the disease—we call them Earth People—have little hope of ever understanding it.”

In a few moments we were in the main building and headed for the lounge.

“Which is why we have to stick together,” said Reggie, who joined us at the communal coffeepot. “We’re a fellowship of the most unlikely companions.”

“The disease concept is important,” said Robert, “because if I’m a bad person, there’s no hope for me. I’ll just go on being bad forever. But if I’m a good person with a bad disease, I can treat my illness and find a good life.”

“I’m a good person with a bad disease,” I repeated what John had said earlier.

“You have a chronic, relapsing, and fatal disease,” said Mike.

“But it can be treated, right?” I asked.

“Certainly,” said Robert. “Now let give you the best definition of addiction I’ve ever heard. It came from a young man named Phillip.”

### **A feeling disease**

Robert told this story.

It was a nasty moonless night, shaken by a hellish Georgia lightning storm when the police delivered Phillip to detox, half-naked, barefoot and in handcuffs, out of his mind, drenched. Phillip was a young, well-muscled black man, tall and angry, very angry. He had gone soldiering in the Middle East for his country and returned with a purple heart and a monkey on his back. He lived on the street.

His first day in detox, Phillip covered his head with a blanket and refused to speak. No one dared speak to him. The second day, he pulled the blanket over his shoulders like an Indian brave and glared at everyone in the room. Still, no one would speak to Phillip. The third day, he raised his hand (his medicines were beginning to kick in) and gave the best definition for addiction I’ve ever heard.

“My name is Phillip,” he said gently, “and I have a feeling disease. I will do anything I can to change the way I feel.”

We were standing around the auditorium waiting for a Dr. Taylor to arrive. Taylor, an alcoholic himself, had founded the rehab center specifically for treatment of the impaired physician.

“I didn’t drink for the taste,” said John, “I drank for the effect.”

“I don’t understand,” I said. I seemed to be saying that a lot lately.

“Understanding is highly overrated,” he said, but in my confused state those kind words were not terribly helpful.

“I hated the taste of beer, but it got me drunk and then I didn’t care anymore. Dull, boring John became the life of the party. I could flirt with the

girls. Leap tall buildings at a single bound. I was King of the World.” He held his coffee cup high. “When I got drunk, I no longer felt that horribly uncomfortable feeling most people call life. In time, I switched from beer to vodka. It worked faster.”

“There are a thousand things I can do to change the way I feel,” said Reggie, “and if I can do it more than once, I can become addicted to it. And almost anything can change the way I feel. Reminds me of my roommate freshman year in college. I’m pretty sure he was an alcoholic. He always had a beer in his hand and I never did see him crack a book.”

“Not useful for success at the university,” said Mike.

“His parents were well-to-do,” Reggie said. “He drove a new BMW. Every time he flunked a test and felt bad, he’d go into town and buy new clothes. He was sort of a clothes horse anyway. Always looked real spiffy.”

“Changed the way he felt, I suspect,” said Mike.

“I’m sure,” Reggie said. “I wasn’t surprised when he flunked out after the first semester.”

Mike grinned, “Yeah, but I’ll bet he had a great wardrobe.”

Dr. Taylor arrived and we took our seats.

“Back in the ’60s,” Dr. Taylor began, “I toured the Bowery to see what the most famous drunks in the world were like. There I met another physician who had lost his way. He panhandled on the street to buy wine and lived in an empty tenement with no utilities but no rent. Together, we discussed the nature of our illness. Then, to my surprise, he pulled out a needle and injected himself with a large dose of magnesium sulfate.”

Mike leaned over and whispered, “Epsom salts.” He laughed.

Taylor continued, “Then he went over behind a post and had an enormous bowel movement. I asked him what in the hell he was doing.



He said, ‘Well, it’s the least expensive way to change the way I feel. Cheaper than heroin.’”

“We’re a strange lot,” quipped Mike.

I had to nod, barely able to believe what I was hearing.

### **One disease**

After the necessary coffee and cigarette break on the patio, we headed to Matt’s classroom.

“Welcome to drunk and junkie school,” said Matt, as I took my seat. I saw Vera in the back and waved but said nothing.

“You’ll find that all the seats in this room are the same, regardless of who you think you are,” said Matt. “No matter what you used to believe, today you’ll learn that you all share the same disease, the disease of addiction. In this room, a drunk is the same as a junkie and an alcoholic is the same as an addict. There’s no difference between a judge who tipples too much and is escorted home by a deputy sheriff, and the junkie sleeping in the street who’s arrested by the same deputy. The nurse who steals pain pills from her patients’ medicine drawer is no different than the addicted housewife in the ER, dying of an overdose of fentanyl.”

“The image most of us have of the alcoholic is a wizened old man panhandling for spare change and living under a bridge,” he said. “Our picture of the addict is a skanky prostitute living in an abandoned building who turns just enough tricks to shoot up again. But this isn’t the true face of addiction. Over seventy percent of us lead relatively normal lives. We go to work, pay at least some of our bills, and maintain a semblance of a loving family life. We’re still functional, although our lives are usually far from happy and probably unmanageable. Just because you still have a job making good money doesn’t mean you’re not one of us.”

“It’s not for me or anyone else to say whether you are an addict or an



alcoholic. Only you can decide if your drinking and using have gotten out of control. Hearing that you are a drunk from your wife, your boss, your doctor, or your judge isn't helpful. What you used isn't important either: beer is the same as wine or bourbon and they're the same as pot, or crack, or meth. And it doesn't matter how much you drink or use. All that matters is whether you have crossed over that invisible line that separates heavy using from true addiction."

Sitting in the back of the room, I suddenly realized that my palms were sweaty and I was scared shitless.

### **Quit or die**

Mike and I were sitting in the cafeteria after everyone else had left. I added sugar to the dregs of my coffee and stirred.

"Well," asked Mike, "When did you realize that it was either quit or die?"

I didn't have to think long before I answered. "I was sitting home one evening, wasted as usual, watching the sunset through the picture window of my new and very expensive house, when I realized that I'd never be able to quit using my precious cocaine. I knew with absolute certainty that one day I would die chasing the dope dealer down a dark alleyway."

I looked up into my roommate's face and could feel my tears welling up.

"It was hopeless. I didn't care about anything. Not my career, not my family, nothing. Certainly not myself. I would have committed suicide but I'm too much of a coward. I had reached some dark acceptance that I was going to die, but you know what, I just didn't give a damn. I just wanted it all to be over."

We sat in silence for a while.

"Fortunately, at that point, they intervened on me," I said.

During Matt's session, Ryan, recently arrived in rehab, stood up and read a poem he had written. He was a neurologist and literally tall, dark, and handsome. His poem was about a flower that lived in his hometown in Hawaii. As he spoke, he seemed too sensitive for the manly body he inhabited. His girlfriend was incredibly beautiful and had flown all the way from Honolulu just to be with him. Ryan seemed to have everything going his way—good looks, great job making tons of money, living in paradise and dating a beautiful woman, except for the fact that he was a heroin addict and he couldn't quit.

We spoke afterwards. I was impressed by his gentleness. And he was frighteningly candid.

"I can't do it, Lin," he said. "I can't walk across that bed of coals." He looked down sadly as if a giant pit of fiery orange flames was staring back at him, forbidding him to cross over into recovery. He shook his head and walked away. He left rehab a few days later without saying a word to anyone. He hadn't completed his treatment. He just up and left.

About two weeks later, Mike caught me in the hall.

"You remember, Ryan, the guy who read that sappy poem?" he asked.

"Yeah," I remembered. "The guy who had everything to live for."

"Well," Mike said sadly. "He's dead. Died of a heroin overdose back in Hawaii."

My face fell. Ryan had reached the point of quit or die. But overcoming his addiction was simply beyond his reach. The pain of living was no longer bearable but he couldn't summon the courage to cross his personal bed of coals. Dying was the only answer left. For Ryan, it took the form of a syringe full of heroin.

## **Powerlessness**

Dr. Taylor called a special afternoon session to discuss the concept of

powerlessness. It seems someone had complained that the current crop of clients was having trouble wrapping their heads around this central idea.

“I remember when I first recognized my own powerlessness,” he began. “I was so deep in denial, I couldn’t see that my disease had taken complete control of my life. I began each day with an eye-opener. Lunch was always a two-martini affair. I would leave the office early to be home before the sun was over the yardarm. Wine with dinner became good social graces, and I single-handedly invented the custom of the double nightcap. Yet I didn’t have a drinking problem, not even when I was flagged for three DUIs inside a month, and the judge, my good golfing buddy, took away my driver’s license. They were the ones with the problem, not me!”

“Only when I began to have blackouts did I realize my true powerlessness. One day I awoke from a blackout to find myself in the operating room, standing over the open abdomen of a patient I did not know, doing I knew not what. I asked my assistant to finish the case and ran to the scrub room where I threw up and started to cry. I had to come close to killing somebody before I realized how sick I was. My partner intervened on me later that day and took me to my first AA meeting.”

“I want you to go back to your apartments now for a special A. A. meeting, and I want you to discuss the concept of powerlessness. I want you to preface every sharing with the words...I was so powerless over my drug that I ... and fill in the blank with concrete examples of how your addiction controls your life. Rest assured that you will make no headway in this program until you are absolutely convinced of your powerlessness in the face of drink and drug.”

Back in the apartment we were joined by a few of the fellows from next door.

Jimmy took a very deep breath before speaking.

“I was so powerless over my addiction that I used skunk water to inject

my meth. Near the end of my using, I would stop along the road and shoot up every day on the way to work. One morning I forgot the saline I used to dilute the drug. In a panic, I pulled over near a drainage ditch. I dipped stagnant water out of the ditch and used it to inject my drug. I could have cared less about the germs and poisons I was injecting into my heart, as long as I got high.” Jimmy paused and looked around the room as if in a daze. “My God,” he said. “I can’t believe I did that.”

“Last ditch,” said Robert, suppressing a laugh.

“I’d been up late, shooting cocaine,” I said, taking my turn. “I gathered up all the dirty needles, put them in a garbage bag, then threw the bag outside. The next morning was sunny, it was springtime, and I could hear the birds singing. Life was good. Then I walked past the garbage bag on my way to the car. Suddenly, without thinking, I ripped open the bag, looking for a syringe that had cocaine left in it. I found two syringes partially filled with cocaine and mixed with blood that had turned a rancid brown. I was so powerless over my addiction that I rolled up my sleeves and injected myself with the dirty needles, not once but twice. But the cocaine’s ‘get-highs’ had died in the night. I didn’t even get a buzz, although I got blood all over my tie.”

“Makes sense to me,” said Mike.

We were standing in the smoking pit behind the client lounge, waiting for the next session to start. The smoke was curling around the head of a newcomer named Charles. He seemed lost in reverie. Charles was an orthopedic surgeon who had become addicted to pain pills, which he took avidly. But his real love was cocaine, and he was not shy about sticking a needle in his arm and shooting the drug into his veins.

“It’s faster that way,” he said. “I started out snorting at parties, but pretty soon Lady Cocaine and I were best buddies.” He grinned.

“I’ve done a little cocaine myself,” I admitted.

“Oh, boy,” he began. “I can remember one time. . . . Maybe I shouldn’t tell this” He laughed.

Robert sauntered up. “They say my secrets will destroy me. You’d better fess up.”

My curiosity was killing me. What had the richest orthopod in Sarasota done?

“Okay,” he said. “My wife and I had been doing coke, wine, and pot all evening, and by midnight I was blitzed beyond sanity. We both had to work the next day, so I wasn’t surprised when she said matter-of-factly, ‘That’s all the cocaine you can have tonight.’ She was in charge of hiding the stash and I had no idea where it was. Then something strange happened.”

“Do tell,” said Robert, all ears.

“I can’t remember exactly what happened, but suddenly I was nine feet tall and stood looming over my wife. I picked her up and threw her bodily to the floor. I stood over her, ripped off my wedding ring, and threw it in her face. I cursed her using all the tender words that usually accompanied our lovemaking. I roared and I mean I really roared. The curtains shook from the blast.” He paused and took a drag off his cigarette.

“The next thing I knew,” he said, “I was cowering in the corner while the beast stood over her. I was scared to death that he would come after me next. He was huge, angry, and murderous. When he looked in my direction, I could see he was gloating. If he came at me, I knew I would be dead meat.”

Robert and I both stared unbelievably.

“But you know what,” he said, “all the time I knew the monster was me. I know that hidden inside me was a beast trying to break out of my subconscious. I’ve never been so afraid in all my life. I told Cameron I would do anything rather than have the monster return. Anything. I knew that the next time he could kill somebody, maybe me.”

“That’s the reason you came to rehab?” asked Robert.

“I hate to admit it, but yes,” said Charles. “I really didn’t care that cocaine was ruining my life, but the thought of this beast emerging and overwhelming me—I’m willing to do whatever it takes to prevent that from ever happening again.”

Andrew, a cardiologist from West Virginia, was up next.

“I was so powerless over my disease that I abandoned my professional ethics,” he said, head down. “I got a call at about 3 am. from the hospital. My usual practice was to see each new admission whenever they hit the ER, no matter what time it was. I couldn’t conscience prescribing therapy for someone I hadn’t personally examined. But that night I was blisteringly high on bourbon and meth, and was bedding two nurses at the same time. It was incredible. And I wasn’t about to let anything interfere with my fun. The ER physician was very enabling. No need for you to come in this late, he said. I’ll write a set of holding orders for Mr. Sams until you see him in the morning.”

“I hung up and immediately forgot about Mr. Sams and his heart attack. Just before dawn, my debauchery was interrupted by another phone call. A nurse on the Cardiac Unit was calling with an update. Mr. Sams’ condition was deteriorating. I said as little as possible to hide my slurred speech. The family is here and would like to speak to you, she said. I nodded through the telephone but hung up anyway. ‘Back to bed, whispered my little blonde hussy.’”

“Two hours later the phone rang again. ‘Mr. Sams died a few minutes ago,’ said the nurse. I took a deep breath but said nothing recognizable. ‘He was pretty far gone when he got here,’ she said. ‘There wasn’t much you could have done. The family has already gone home.’

“By the time my head hit the pillow, I had again forgotten all about Mr. Sams and his heart. That morning I called the office. I had a really rough

night at the hospital, I told them. Reschedule all my appointments for today, will ya?”

“I was so powerless over my addiction,” whispered Mike, “that I abandoned my principles.”

### **Crossing the Line**

“Good morning,” said Cameron. “Today, we’re going to talk about crossing the line. Anyone know what that means?”

Mike raised his hand. “The line that separates the men from the boys.”

“Uh, no,” said Cameron, laughing. “I’m talking about the line that separates abuse from addiction. Just using a lot of drugs or booze doesn’t make me an addict. What’s the difference?”

“Someone who uses a lot of drugs can still quit when they want,” said Robert. “But guys like me and Mike have lost that ability. Once we pick up the first drink, we can’t stop until we pass out or run out of booze.”

Vera said, “It seems to me, using is a choice. My cousin can decide if he wants to get drunk or stoned. He has the capacity to choose. But for me, when I crossed that line, I lost the power of choice. Now, I have a disease, the disease of addiction, and when the craving hits me, I’m no longer in control. I can’t be comfortable in my own skin until I have a drink inside me. Then, of course, I can’t stop.”

“The Old Timers says it’s like turning a grape into a raisin,” said Mike. “A raisin can never go back to being a grape again.”

“Or a cucumber into a pickle,” said a voice from the back of the room.

“Our disease has a lot in common with another chronic disease, diabetes,” Cameron said. “A person isn’t born with diabetes, but they can inherit the predisposition from their parents. The disease may never express itself. But at some point, if that invisible line is crossed, a person’s body can no longer handle sugar. For the rest of their lives, they’ll be diabetic. No mat-



ter how long or how well they control their blood sugar, if they stop their medication, the disease will return.”

“Addiction appears to be inherited as well,” she continued. “It may skip generations. It may be expressed as dependence on drugs and alcohol, or as other behaviors like shoplifting or gambling.”

“My parents smoked, but weren’t obviously addicted to anything else,” I said. “But I have cousins on both sides with addictive behavior. One’s already died.”

“I don’t remember crossing any line,” said Mike. “My descent into the bottle was slow and gradual. Looking back, I have no clear idea of when I lost control.”

“But obviously you did,” I said. Mike nodded.

“Once across that line,” said Cameron, “the complications of the disease become apparent. I will no longer be able to drink socially. I become susceptible to every get-high you can name. My behavior will begin to change and negative consequences start to accumulate.”

“Once I cross the line, I can never go back,” said Mike. “I’ve lost all control over my using. Where once I could take it or leave it, now I can only take it. I’ll never again be able to drink like normal people. For the rest of my life, I’ll be an alcoholic.”

Shit, I said to myself. I had secretly been holding on to the idea that one day I would be able to drug and drink like I used to, before the bottom fell out. Maybe they were right, probably they were right, but in the far back of my mind, I could feel the lingering hope still there, just out of reach.

### **The craving and the allergy**

Taylor was lecturing to the assembled drunks and junkies, easily a hundred of us there in the auditorium. He began by reading from a book.

“We believe that the action of alcohol on chronic alcoholics is a man-

ifestation of an allergy; that the phenomenon of craving is limited to this class and never occurs in the average temperate drinker. These allergic types can never safely use alcohol in any form at all; and once having formed the habit and found they cannot break it, once having lost their self-confidence, their reliance upon things human, their problems pile up on them and become astonishingly difficult to solve. Frothy emotional appeal seldom suffices. The message which can interest and hold these alcoholic people must have depth and weight. In nearly all cases, their ideals must be grounded in a power greater than themselves, if they are to recreate their lives.’ That’s a quote from the Big Book of AA.”

“Once we cross over the line into addiction, two changes occur within us. The first is known as craving, the second is the allergy. The changes are permanent and do not occur in Earth people. Craving is a deep emotional and irrational desire for using. It may occur at any time and without warning. It may arise from the worst kind of magical thinking, (like the man in the Big Book who suddenly thought that if he mixed liquor and milk, he wouldn’t get drunk). It can be triggered by the presence of old playmates, old playgrounds, and old playthings. Once the craving begins, we can find no relief until we pick up our drug of choice.”

“Immediately after the first sip or line or toke, the phenomenon of “allergy” begins. AA describes it as an allergy to alcohol, but not in the sense of allergy to ragweed or seasonal allergens. Rather, something about our body chemistry is different. One drink inevitably leads to another in a completely uncontrollable cascade.”

Taylor picked up the Big Book again, and began to read. “I do not hold with those who believe that alcoholism is entirely a problem of mental control. I have had many men who had, for example, worked a period of months on some problem or business deal which was to be settled on a certain date, favorably to them. They took a drink a day or so prior to the

date, and then the phenomenon of craving at once became paramount to all other interests so that the important appointment was not met. These men were not drinking to escape; they were drinking to overcome a craving beyond their mental control. It has never been, by any treatment with which we are familiar, permanently eradicated. The only relief we have to suggest is entire abstinence.” He put the book down.

“Our disease is not due to a lack of will power or poor moral standards. It is part of the insanity of our disease, which tells us that this time, we’ll be able to drink or drug normally and get away with it. The thought of the possible consequences is driven from our mind. This is far more than just Jones-ing. The craving becomes an unstoppable force that no normal person can understand. The craving is beyond our best mental control and it can only be satisfied when our drug of choice finally enters our body. Normal people have no such response to the first drink. They can have two martinis and go home. But for us, the only way to avoid this chain of events is not to take that first drink. This is what they mean when they say, “one drink is too many and a thousand is never enough.”

Sitting in the back of the room, I felt his words around me, like a thin winter coat, small protection from the storm of my cravings. But for the first time, my uncontrollable urges were beginning to make sense.

### **The turd cycle**

Cameron had the afternoon off, so Carl, a psychologist on staff, took her place. Carl was known for pontificating at times, but he knew a lot about living and was good at sharing it.

“Today, we’re going to talk about the turd cycle,” he said. Laughter moved around the room and Carl smiled.

“No, really,” he said. “As a child, my daddy repeatedly called me Little Turd. After hearing forever, I came to believe him and I started to act ac-

cordingly. Those around me said, Carl acts like a little turd, and they began treating me like a little turd. Of course, I felt their disregard and I was sure that my dad's assessment was correct. I was a little turd, it was my place in life, and I kept acting that way. The self-fulfilling prophecy of childhood. So goes the turd cycle."

"To change someone's behavior, intervention usually occurs at the point of their perception of themselves. As long as I believe that I'm a little turd, I'll keep acting like a little turd. Only if my self-image changes will my behavior change. If I'm repeatedly told that I'm not a little turd but actually a fine upstanding young man, eventually I'll become convinced of my self-worth. With a change in the way I perceive myself, my behavior will change, and because if I believe I'm a good person, I'll act accordingly. Those around me will begin to think, Carl acts like a fine and worthy person. We must have been mistaken in our assessment of him. Then they begin treating me with respect. I'll sense this and begin to think, maybe I'm a good person after all. With the change in my self-image, my behavior has changed. The negative cycle that ruled my life has been broken.

"But for the alcoholic and addict, this process doesn't work," he said. "The addict's thinker is broken. His brain has been pickled by drugs and booze. Stuck inside his fixed opinions and hiding behind his denial, he won't listen to new ideas. A change in his life must come at the next step in the cycle, that of behavior. He must first learn to act sober, even if his mind refuses to accept the tenets of recovery. Like a recruit on the parade ground, he must practice his new behavior over and over, because instilling new behavior doesn't occur quickly."

"With time, abstinence will bring a measure of sanity. Their perception of themselves in the world will improve and their new behavior is reinforced, and they will find vindication from others. New thinking will follow, and the cycle will be broken. Because of the depth of his insanity, however,

the cycle must be repeated many, many times before his thinking will clear. That's why the process of recovery takes so long to be successful. Certainly, much longer than twenty-eight days."

Leon leaned over and whispered: "Fake it til you make it."

"Yup," I said, wondering how long my cycling would take.

### **Relapsing disease**

Vera, Mike, and I were at an AA meeting near rehab. Carol was the speaker this night. She was dressed in used clothes, her arms were a patch-work of fading tattoos, but there was a light in her eyes.

"I'm forty-eight now," she began. "When I was eight, I started drinking the leftovers from my parents' parties. By thirteen I was drinking every day. My older sister took me to my first AA meeting when I was fifteen, but it was just a bunch of old geezers smoking cigarettes, so I didn't pay it no mind. By eighteen I was trading sex for cocaine and heroin. I almost died from overdoses twice, so I went over to vodka. I used to keep three maybe four gallons in the freezer all the time. It's better when it's really cold."

We laughed with her. She continued.

"I picked up my first white chip when I was twenty-five. Social Service took away my baby because I was an unfit mother. I was pregnant with my second before I tried to quit for real. I stayed sober for almost eighteen months, but my old man showed up with a bag of dope and I was off and running. It was seven years before I picked up another beginner's chip. My kids were living with my mother and she had a court order out against me so I couldn't see them. I got a job working as a waitress and made pretty good money. I even bought a car. Then my roommate came home with a new drug she called crack and I learned to smoke the crack pipe. Gave my car to the dope man. Spent nine months in Butner for depression and drugs. Stayed sober most of that time but was drinking again as soon as I got out."

She paused and looked up at the ceiling before continuing.

“I was at the end of my rope, ready to kill myself, when somebody steered me to a halfway recovery house. I lived there with a bunch of women who were trying to get sober for themselves. I tried getting sober to get my kids back, but that didn’t work. I tried getting sober to make my mom proud of me, but that didn’t work neither. Now I’m sober for myself, so I can have a real life. Today I have a job, my own place, and I get to see my kids every weekend.”

She grinned, the light shining in her eyes. “Today, and just for today, I’m sober.”

We all clapped and cheered.

### **Cross-addiction**

I was almost a month sober when I first heard someone say he was cross-addicted. He said he was a heroin addict and that now he was cross-addicted to alcohol.

I wondered what he meant by cross-addiction and why he was different from everyone else in the room. But the explanation, it turned out, was that we are all cross-addicted, and not just to one drug, but to all the get-highs you can name. We were in Cameron’s classroom.

“Once we crossed that invisible line that leads to addiction,” she said, “I’m susceptible to all drugs and get-highs, even if I’ve never used them before. That is cross-addiction.”

“Failure to appreciate this has led to more than one relapse. A famous actor, who had been clean and sober for twenty years, was given hydrocodone for low back pain. For most people, this wouldn’t have been a problem. But the hydrocodone rekindled his addiction and he was found dead with a needle in his arm from an overdose of heroin.”

“Just because a narcotic or benzodiazepine is prescribed for an appro-

priate medical reason doesn't protect us. A good friend, a recovering opioid addict undergoing gall bladder surgery, was given intravenous morphine by pump post-operatively. She could use a button to tell the pump when to give an extra dose. Fifteen years of sobriety and a full kit of spiritual tools did not prevent her from relapsing."

"We must become unrelenting advocates for our own sobriety. In preparation for a medical procedure, I told two doctors, three nurses, and one anesthesiologist that I could not take narcs or benzos. A second anesthesiologist showed up carrying two syringes ready to inject me with both. Are you ready for the good stuff? he joked. To me it was not a joke."

"I don't like pain," said John, sitting beside me. "But I like relapse even less. Give me acetaminophen and ibuprofen but let me stay sober."

### **Changeable addictions**

Mike and I were heading across town to a detox facility in north Atlanta. By meeting and counseling the alcoholics and addicts there, we were supposed to see a reflection of ourselves in them. They called it 'mirror imaging.' As we drove, we shared stories of our families and their encounters with addiction.

"My grandfather ran moonshine across the ridges of Harlan County, at least until he got religion," said Mike. "He became a preacher of the Holy Word, even ran for county judge. My father would drive him to four or five tent meetings a day. He preached at revivals, on the radio, and on TV. You hated to see him coming because you knew he was going to preach at you until your ears turned red."

"A real foot-washing, hellfire-and-brimstone kinda guy," I said.

"Truly. I've always believed that he swapped alcoholism for his own personal brand of hyper-religiosity."

"A bunch of guys here have swapped addictions, too," I said. "Like



Bobby, the New Hampshire dentist—a heroin addict who gave up the needle for Kentucky bourbon. Now he gets drunk every night.”

“I met a businessman at a meeting in Buckhead,” Mike said. “Told me he was a real alcoholic. After he quit drinking, he found himself working 10, 12, even 14 hours a day. He asked me if I thought he’d just traded addictions.”

“Probably,” I said. “You know about James, don’t you? A full professor of medicine at the university whose pleasure was self-administered Demerol. When he got to rehab, he gave up the needle and started smoking unfiltered Camels.”

Mike laughed. “There’s a guy named Wimpy, a dentist in my morning group. He’s a fan of Demerol, too. His other addiction is buying VHS tapes! He shops secretly at the video store, hides the tapes under his coat until he gets to the counter then pays for them surreptitiously. When he gets home, he hurries downstairs so no one will know what he’s doing and puts them up on a shelf in his study. He has a whole wall full of them. He never actually watches the movies, only buys them addictively and sneaks them home.”

“We’re a strange group,” I said. “I know of a famous Hollywood actress who was arrested for compulsive shoplifting. She apologized in court, but the judge sentenced her to drug abuse treatment.”

“My buddy Dan is an emergency room doc from Sacramento. He loves the crack pipe. His sister’s addiction is bulimia—another form. There was a guy in morning group who admitted to masturbating fifty times a day. Somehow he managed to hold down a full-time job.”

We pulled into the driveway at detox.

“One last story,” I said. “Big Jed is a bad meth freak. He grinds his teeth all day long.”

“Yep,” said Mike. “He told me he ground down his natural teeth and

two pairs of dentures. Picked up his habit after being discharged from the service with PTSD, a problem for a lot of us.”

“We’re a decidedly unusual group,” I said.

“Decidedly,” he said. “If it changes the way I feel and I can do it twice, I can become addicted to it.”

### **Worldwide prevalence**

At lunch the next day, Mike pointed out the new fish sitting across the cafeteria.

“Johnny Red Hawk. Pediatrician,” said Mike. “He’s a Cherokee Indian.”

“Not only that, he’s a medicine man,” I said. “He’s in my morning group. He told me that almost half of his relatives are alcoholics! That seems like a lot. He said it was because of his Indian blood.”

“He’s right, you know,” said Reggie. “Taylor said that across the board ten percent of the world’s population is addicted, right? The only exception is the American Indian, where it’s forty percent.”

“That old saw about Indians and firewater is true?” I asked.

“I’m not sure I’d go that far,” said Mike, waving at Johnny, who waved back. Mike returned to his dessert.

“Taylor also said that there are three times as many men as women in AA,” I said.

“Yes,” mumbled Mike through his pie, “and you’d better not get caught fraternizing with any of those women.”

### **Family abuse**

After lunch we walked back to rehab for the afternoon session. Mike stubbed out his cigarette and we went inside.

“I used to think that all alcoholics came from abusive homes, but that doesn’t seem to be the case,” I said.

“Taylor says only about a third of us come from bad family backgrounds,” said Mike, “which means almost seventy percent of us come from relatively normal families.”

“My childhood was as much like that TV show ‘The Waltons’ as possible,” I said. “Maybe with a little ‘Ozzie and Harriet’ thrown in. My parents didn’t drink, gamble, run around, or anything like that. I had a perfect childhood.”

Mike shook his head. “That’s not what you said in group this morning.”

“I don’t know what you mean,” I answered.

“You said that when you were fifteen, your younger brother died of leukemia. A year later, your father died of a heart attack at the ripe old age of thirty-eight. I think that might qualify as an abused childhood.”

“I never thought about it that way. I guess I did take a hit, didn’t I?”

“No denying it,” said my friend Mike.

### **Hereditary nature**

Later that day, Mike and I were at Fulton County Detox. We drove there twice a week to lead a class on alcoholism and addiction. Mike was explaining the inherited nature of our disease.

Alicia, who never met a crack pipe she didn’t like, looked puzzled.

“I don’t understand,” she said in a soft Southern drawl. “Both my parents are alcoholics, but us kids are all crack heads. How can that be running in the family, like he said?”

Driving back, Mike said that when he was admitted to rehab, his family was shocked. “None of us ever had this kind of problem, they said.” He laughed. “Last night I was talking with my cousin Louise, who’s living out of her car.”

Mike shared his conversation with Louise.

“I can’t believe you’re living in your car,” I said to her. “Where do you park it?”

“Right now, I’m in my daughter’s driveway,” Louise replied. “She won’t let me in her house, but then neither will my other daughter. At least I still have my cell phone so I can check my email.”

“You know,” I said, “I’m beginning to think addiction runs in our family.”

“Oh, hell yes,” she said. “My dad was a workaholic who drank himself silly. I’m sure our uncle Lyndon was a closet drunk, and I went to rehab for twenty-eight days back in the ’90s for my Xanax problem. And you know about our cousin Tina, she was a terrible drunk, died of cirrhosis before she was thirty-two.”

“Neither of my parents drank or gambled or any of that stuff,” I said. “Maybe it skips generations.”

“Could be,” said his cousin. “Anyway, we sure got it.”

“Amen to that,” I said.

“When I was admitted to detox,” I told Mike, “my family acted surprised that I had a problem with drugs and alcohol. No one in our family has ever had *that* before. But since then, I’ve learned of at least six cousins, on both sides of the family, who have serious problems with addiction. And quite a few are bipolar, too.”

### **Outcomes: death**

Abe B. was a long-time friend of Dr. Taylor and once a year he would come down from Hazelden to give us the benefits of his experience in dealing with drunks and junkies. This morning, he was talking about the possible outcomes of our disease.

“Left untreated, there are only three outcomes of addiction,” he said. “Jails, institutions, and death. Let’s start with death. Obviously, some will

die of an overdose. Others will die of the toxic effects of alcohol on the major organs: the heart, (cardiomyopathy), the liver (cirrhosis), or the pancreas (pancreatitis). Every year some teenager shows off by downing a fifth of Jack Daniels in one gulp and ends up dying in the ER of acute alcoholic poisoning. But death takes other forms as well. Let me tell you about Jeremy.”

“Jeremy was a family practice doc from Baltimore. He was a little guy with mousy brown hair and a quiet personality. He smiled a lot and everybody liked him. His drinking problem led him to rehab with us up in Minnesota. He worked hard at the recovery path laid out in front of him. He shared his problems, went to meetings, worked the steps, and did everything he was asked to do. He was a model recovery person. On the day he left rehab, we held a going away party for him at a local Italian restaurant. We toasted each other with iced tea over plates of spaghetti and laughed and felt good about how recovery was saving all our lives. He left with a smile on his face. A week later one of my counselors pulled me aside and told me that Jeremy was dead. A week after he had walked out of rehab, he walked off the balcony of a ten-story building.”

“Then there was Reuben.” He stopped and sighed visibly. “Reuben was an I.V. drug addict and alcoholic who had been clean and sober for over ten years. For the last five, he had run a recovery house outside Eau Claire. He was in a good place. The promises of AA had all come true for him, and he lived a grateful and happy life. Then, for no apparent reason, he lost his appetite and began losing weight. Unknown to him, more than ten years before, he had contracted Hepatitis C from his drug use. The virus only manifested itself when it triggered the development of liver cancer. He was dead in three months.”

“Eric was a friend of mine from my days at the University of Chicago Med. We attended AA meetings together and he had a successful career

as a radiologist. His son, Greg, was as fond of drugs as his dad had been of his wine. Greg's drug of choice was the speedball, a combination of heroin and cocaine, injected, often with a dirty needle. For some reason, one of the consequences of speedballs is subacute bacterial endocarditis, where bacterial colonies form on the valves of the heart. Once embedded in the valves, they are all but impossible to get rid of. The infected valves shed clumps of bacteria which settle anywhere in the body causing strokes, pneumonia, kidney failure, and more. In Greg's case, the infection settled in his brain causing seizures. His brain literally melted. Eric had to watch his son die a slow and agonizing death. Eric was devastated. Losing a child may be the worst thing that can happen to a human being, but Eric didn't drink over the tragedy."

### **Outcomes: institutions**

Robert, Vera, and I were hanging out in the courtyard after lunch when Wee Willy walked up.

"Hiya, dudes," he said in his deep Irish brogue. "How's it hangin'?" Wee Willy was from Dublin, a podiatrist by trade, in Atlanta looking for sobriety. He was small and impish, and he first time I saw him and heard his delightful accent, I knew he had to be a leprechaun.

"Hello," Vera said. "What's new?"

The Irishman frowned. "Just heard from home. My best uncle died last week. He was in a home for the feeble-minded."

"I'm sorry to hear that," said Robert.

"Uncle Mick was a good drinking buddy," said Wee Willy, "but I ain't seen 'im in years. They say he lost his mind. One day he was taking the trolley home and couldn't remember his stop. They found him in a city park, crying. Wasn't long before they were feeding him through a tube. He was only forty-two."

“Sounds pretty awful,” I said.

“That’s not the worst of it.” He grinned. “Being here, I’m gonna miss his wake. My family throws one helluva party. In honor of the deceased, I mean.”

After Wee Willy wandered off, Vera said, “Wet brain.”

“Huh?” I asked.

“Wet brain. You know, when alcohol rots your brain from the inside out. Booze is toxic to the nerve cells and slowly kills them off. It’s one form of dementia, but around here they just call it wet brain. Starts with memory loss, progresses to global cognitive dysfunction, and you end up in an institution unable to take care of yourself.”

I flashed on a memory of a day in my clinic, when I couldn’t remember the product of 8 times 12. I had downed an excessive amount of wine the night before, even for me. At the time I wondered if my drinking was beginning to affect my memory, but I dismissed the thought as silly. Stuff like that didn’t happen to me, I was a doctor. Now, I’m not so sure.

### **Outcomes: jails and prisons**

We were having dinner and a group AA meeting in Robert’s apartment. He was grilling hamburgers and corn-on-the-cob. Not known for his skill in the kitchen, nonetheless, he did cook a mean burger.

After eating, we gathered to hear Charles tell his story. Dr. Taylor had rescued him from the Federal Penitentiary in Atlanta. The orthopedic surgeon had been self-prescribing pain pills. By the time the DEA hauled him in, he was taking over two hundred pills a day. The DEA was sure he was dealing. They couldn’t remotely imagine that he was taking that many pills himself. Dr. Taylor got wind of his story, pulled a few strings, and had him transferred to rehab. If he could complete the program here, the authorities were willing to cut him some slack. Failure meant going back to jail.



“It all started when I hurt my back,” said Charles. “My family doc gave me hydrocodone. When the pain left, I kept taking the pills because I liked the way they made me feel. When my doc wouldn’t give me any more pills, I went doctor shopping and got prescriptions from six different physicians, but eventually they quit prescribing too. That’s when I began writing prescriptions for myself, filling them at different pharmacies around town so I wouldn’t be noticed. I mean, what’s the problem, eh? I wasn’t hurting anybody. I just needed my pills to keep going. But I musta hit one pharmacy one time too many.”

“You didn’t think you could keep doing that forever, did you?” I asked.

“That was the problem,” Charles said. “I didn’t think.”

“What’re you going to do now?” Robert asked.

“Whatever it takes to stay out of the slammer,” said Charles.

After dinner, Robert and I spoke.

“You know,” Robert said, “staying out of jail isn’t sufficient motivation to get sober. It doesn’t work. You can’t get sober to get your job back, your family, or your pickup truck back. You have to get sober for yourself.”

Charles left rehab eventually with the blessings of the staff but was picked up six months later by the DEA. He had come up with a new scheme to buy his drugs wholesale from overseas, but the law was two steps ahead of him. He was facing eight years of hard time in the Big House.

### **The functional alcoholic**

It was mid-morning and we were assembled in the classroom for a lecture by Dr. Taylor.

“When I was younger and just learning about my own drinking problem, I went to New York and interviewed dozens of drunks on the street and in the burned-out buildings of the Bowery. It was amazing how intelligent these guys were. Turned out, most of them were lawyers.”

Mike leaned over and whispered, “Makes sense to me.”

“Most of us,” said Dr. Taylor, “go to work every day, bring home or squander our paychecks and somehow survive in the world. Only at the very end of our drinking do we end up sleeping under a bridge or waiting in a soup line. It may take twenty or thirty years of hard drinking to put a man on the street.”

“With cocaine it only took me eighteen months,” I whispered to Robert.

“Good work,” said Robert, under his breath. “Very efficient use of time.”

### **Abstinence isn’t enough**

The overcast sky had lifted, and the afternoon sun was warm on my face. Timmy and I were sitting on the cool grass behind the apartments, enjoying a day without drugs.

“With your superior intelligence I’m surprised you weren’t asked to run for King of the Universe,” Timmy said, grinning. “I hear the position may be coming open soon.”

“You’re so cute,” I said. “But you know, they say a dry drunk would make a perfect King of the World.”

“What’s a dry drunk?” said Timmy.

“Well, a dry drunk is an alcoholic who, for whatever reason, quits drinking. He loses the chemical coping that booze provides but hasn’t developed sufficient non-chemical coping skills to deal with life. He’s achingly uncomfortable in his own skin. You remember when we visited Big Jed’s family?”

A few weeks ago, Timmy, Mike and I visited Big Jed’s parents. Big Jed’s mom was the most gracious and genuine of Southern hostesses. She had cooked a huge Southern-style turkey dinner with all the trimmings. George, Big Jed’s dad, was a real honest-to-goodness rocket scientist at MacDon-

nell-Douglas. Big Jed's parents seemed exceptionally normal until after dinner.

"When I was in college," said George, the workaholic aerospace engineer, "I tried drinking beer, but I liked it so much I knew I'd better leave it alone."

As he spoke of his son's problems with meth, his hands gripped the arms of his chair.

"I can't stand spending all that money for Jed's rehab. It really gets me," he said. "I can't believe those people know what they're doing. Don't get me wrong, I love my son, but he sure costs me a lot of money."

"You design experimental planes?" I asked, trying to change the subject.

"Yeah, I'm part of a team of twenty engineers," he replied, "so you might think the big wigs would listen to me. I do all the damn work and those guys take all the credit. Those guys never had an original idea in their whole life. If it weren't for me, nothing would ever get done."

His hands were gripping the arms of his chair so tightly that his knuckles were white.

Back at the apartments, Mike said "I think Big Jed's dad may be a dry drunk. He seems to have all the problems of an alcoholic, just not the drinking. You saw him white-knuckling the arms of his chair?"

"Yup," I said. "He works at least ten hours a day and takes his work home every night. He is addicted to his job just like his son is addicted to crystal meth. Being an aerospace dude is more important to him than anything else. And he knows he could do a better job running the world if only people would listen to him."

"We found relief with better chemistry," said Mike.

"I'm in favor of chemistry, as long as it includes Ritalin," said Timmy.

"But now we have a better way," Mike said.

Timmy just smiled.

It was Eldon's first day in rehab. He was tall, thin, and grayish, with a paunch, a preacher from a small town in the panhandle of Florida. In the cafeteria at lunch, Robert spotted him and grabbed Reggie and me and we sat down next to him.

"Hello, Eldon," said Reggie, reaching for the salt.

"Hi," said Eldon grudgingly. "Sit down."

"We did," said Robert, maintaining a grin. "Would you care to join us?"

"I have," said Eldon, managing the barest of smiles.

"You might try the salmon," said Robert. "It's really terrible here."

"It does make me want to puke," said Eldon, pushing his plate away.

"I do, however, recommend the apple pie," said Robert, staring at the uneaten pie on Eldon's tray. "It's good for the spirit."

Eldon was decidedly unhappy. He looked like he was about to explode.

"You know, Eldon," I said, "when I got here, they told me I had to get rid of my resentments if I wanted to find any semblance of peace."

"I don't have any resentments," he said, glaring at me. "I just hate everybody."

"Isn't that a form of resentment?" I asked.

"Oh, go f— yourself," Eldon cursed. He threw his fork down and bolted from the cafeteria.

"Too bad. He forgot his dessert," said Robert, reaching for the pie.

That evening, Reggie was cooking supper for us, rice and beans with cornbread. Eldon sat on the couch, surrounded by his suitcases, his jaw clenched. He sighed, rubbed his head with one hand, then sighed again.

"Would you like a drink, Eldon?" asked Reggie.

"Boy, would I," said Eldon. "What've you got? I thought we weren't allowed to drink here. I sure could use a shot of bourbon?"

“No bourbon,” Reggie’s smiled. “Just iced tea.”

Eldon’s eyes rolled back in his head and he chuckled. “Should’ve known,” he said. “And I thought you guys were hard drinkers like me.”

“We are, preacher,” I said, “the only difference is, we don’t have to do it anymore.”

“I don’t have to,” he said, “I just want to.”

“Are you angry?” asked Robert. “Sounds like you might be angry.”

“I’m a pastor in the Methodist church,” he said. “How could I possibly be angry?”

“Cause we drunks is always gettin’ angry ‘bout something,” I said.

“Well, I don’t think I feel angry,” said Eldon.

“But you do look just a mite uncomfortable,” Robert said, giggling. “Restless, irritable and discontent is what they call it around here. So....” Robert waved his hands around in the air, looking for the right word, “so, stressed out you could bust. Or get drunk. Right?”

Eldon was silent.

“What brought you here, Reverend?” I asked. “And don’t tell me it was the taxi.”

“Ha, ha, that’s so funny,” said Eldon. “If you must know, the wife of the head deacon made an unfair accusation against me.”

“Which was?” Reggie asked, serving up plates of food.

“She said I was having an affair with her,” Eldon’s anger was rising.

“And were you?” I asked.

“Of course, I was,” shouted Eldon, standing up, “but it was unfair of her to say so.”

Reggie held out a plate for Eldon.

Eldon smashed it with his fist and stomped from the room.

“Uh-oh,” said Timmy. “He forgot his suitcases.”

The next morning Eldon was no better.

“Good morning, Eldon,” said Matt, as we settled down for his session. Eldon just glowered.

“I guess anger is as good a topic as any,” said Matt. “What’s the cause of our anger?”

“I can answer this one,” Timmy said, forgetting himself and standing up. “We’re angry because we’re afraid.”

“Afraid of what?” asked Matt.

“Robert told me that I have three basic fears,” said Timmy. “One, I’m afraid of losing what I have. Two, I’m afraid of not getting what I want. And three, I’m afraid that if you really knew who I was, you wouldn’t like me. Robert said, these fears drive my ego and generate all my character defects. They prevent me from finding any real sense of peace.”

“Very good, Timmy,” said Matt. “You may sit down now. Vera, how does your fear control you?”

“Before I got here, I didn’t think I was scared of anything,” said Vera, “But now I know that’s not exactly true. My fear makes me want to control the world around me. I try to manipulate people, places, and things to get what I want. Somewhere I got the idea that if I can control the outer world, I’ll control the chaos inside my head.”

“How did that work for you?” asked Matt.

“Not very well,” said Vera. “Like Eldon, I ended up here.”

That afternoon, we were sitting on the breezeway watching Mike smoke a cigarette when Eldon walked by.

“Preacher,” said Reggie, “why don’t you pull up a chair and stay awhile. Or maybe a month or two.”

“I can’t possibly stay here for two months,” said Eldon, his eyes like daggers. “I’ve got business to take care of. Two months—no way.”

“I’ve learned that I shouldn’t put limits on my recovery,” said Reggie.

“I can’t make it without my Scotch,” said Eldon. “That’s all there is to

it.” He rolled his eyes at Reggie. “How can you possibly wake up in the morning and realize this is the best you’re going to feel all day?”

“I’m not so sure about that,” said Robert. “You’re capable of much more than you can possibly imagine.”

“You can ask God for help,” said Reggie softly.

“God! What God?” Eldon was boiling now. “He never showed up when I needed him. Never answered my prayers. Couldn’t be bothered with the likes of me.”

“If I limit my Higher Power,” Reggie said, “I only limit myself.”

“I just can’t see it,” said Eldon with unexpected honesty. “I’m gonna keep on drinking no matter what you do or say.”

“What?” I asked.

“I’m trapped,” Eldon repeated. “Stuck. There’s no way I’ll ever be able to quit.”

Matt’s words came back to me: If I feel trapped in the circumstances of my life, it is only my disease talking. Life is always about choices.

Within an hour, Eldon had packed his bags, thrown them in the back of his aging Chevrolet station wagon, and driven off. We never saw or heard from him again.

“Don’t put limits on yourself, your recovery, or your Higher Power,” said Robert as we walked to the center the next morning.