

Lexicon of alcohol and drug terms



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Introduction

This lexicon aims to provide a set of definitions of terms concerning alcohol, tobacco, and other drugs, which will be useful to clinicians, administrators, researchers, and others interested in this field. Explanatory definitions, often including psychoactive effects, symptomatology, sequelae, and therapeutic indications, are given for each general class of psychoactive drugs and for some related classes. Main diagnostic categories in the field are defined, as are key concepts in scientific and/or popular use. Social as well as health aspects of drug use and problems related to use are covered.

The lexicon does *not* aim to provide comprehensive coverage of every term relating to alcohol and drug use. Among the areas that have been more or less excluded are the production and marketing (licit or illicit) of drugs, slang terms in general use or derived from users' argot, names of specific drugs, and technical terms from particular scientific disciplines. In general, terms from general medicine, psychiatry, or other disciplines which have no specific drug application are excluded but, in many cases, may be found in the companion publication *Lexicon of psychiatric and mental health terms*.¹ In its coverage of treatment modalities and prevention strategies, the lexicon—rather than striving for completeness—has aimed to define what is not self-explanatory. Terms current in languages other than English have been included only if they have found their way into usage in English-language publications.

The historical origins of terms are not generally covered in detail, although indication is often given of the current status of certain terms (favoured, deprecated, etc.) and of their relationship to other older or newer terms. A general indication is given of the historical position of key concepts, particularly those that have been given currency by use in World Health Organization publications.

In general, phrases—as opposed to single words—are placed alphabetically according to the form in which they are most likely to be sought, which means that some will be placed according to an adjective, some according to a noun. Cross-references have been provided where they are deemed to be helpful. If a term is not found, the user is advised to search for it under another component of the phrase. Moreover, it may be worth consulting cognate entries, in which related terms are often defined, explicitly or implicitly. The alphabetization of entries ignores spaces and punctuation; thus, "coca paste" follows "cocaine", and "alcohol, non-beverage" follows "alcoholic".

Wherever appropriate, the relevant diagnostic category codes of ICD-10² have been included, usually at the head of an entry but sometimes in the text of the

¹ *Lexicon of psychiatric and mental health terms*, 2nd ed. Geneva, World Health Organization, 1994.

² *International statistical classification of diseases and related health problems. Tenth revision. Vol. 1: Tabular list*. Geneva, World Health Organization, 1992.

definition. Drug names are spelt in accordance with international nonproprietary names (INN).¹

The use of **bold print** for certain words or phrases in the definitions is an indication that those terms are also defined in the lexicon.

Thomas Babor
Robert Campbell
Robin Room
John Saunders
compilers

¹ *International nonproprietary names (INN) for pharmaceutical substances. No. 8.* Geneva, World Health Organization, 1992.

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Definitions of terms

absolute alcohol Ethanol containing not more than 1% by mass of water.
See also: alcohol.

abstinence Refraining from drug use or (particularly) from drinking **alcoholic beverages**, whether as a matter of principle or for other reasons.

Those who practise abstinence from alcohol are termed “abstainers”, “total abstainers”, or—in a more old-fashioned formulation—“teetotallers”. The term “current abstainer”, often used in population surveys, is usually defined as a person who has not drunk an alcoholic beverage in the preceding 12 months; this definition does not necessarily coincide with a respondent’s self-description as an abstainer.

The term “abstinence” should not be confused with “abstinence syndrome,” an older term for **withdrawal syndrome**.

See also: sobriety; temperance

abstinence, conditioned *See* withdrawal, conditioned.

abuse (drug, alcohol, chemical, substance, or psychoactive substance) A group of terms in wide use but of varying meaning. In DSM-III-R¹, “psychoactive substance abuse” is defined as “a maladaptive pattern of use indicated by . . . continued use despite knowledge of having a persistent or recurrent social, occupational, psychological or physical problem that is caused or exacerbated by the use [or by] recurrent use in situations in which it is physically hazardous”. It is a residual category, with **dependence** taking precedence when applicable. The term “abuse” is sometimes used disapprovingly to refer to any use at all, particularly of **illicit drugs**. Because of its ambiguity, the term is not used in ICD-10 (except in the case of non-dependence-producing substances—see below); **harmful use** and **hazardous use** are the equivalent terms in WHO usage, although they usually relate only to effects on health and not to social consequences. “Abuse” is also discouraged by the Office of Substance Abuse Prevention in the USA, although terms such as “substance abuse” remain in wide use in North America to refer generally to problems of psychoactive substance use.

In other contexts, abuse has referred to non-medical or unsanctioned patterns of use, irrespective of consequences. Thus the definition published in 1969 by the WHO Expert Committee on Drug Dependence was “persistent or

¹ *Diagnostic and statistical manual of mental disorders*, 3rd ed. (revised). Washington, DC, American Psychiatric Association, 1987.

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