

THE DESIRABLE EFFECTS OF ALCOHOL IN REAL-LIFE SOCIAL INTERACTIONS

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Abstract

Alcohol can induce both positive and negative effects in the same person at different times. However, how a person reacts depends on many different aspects. The key word when drinking alcohol is “moderate”. When consumed moderated, alcohol in his many forms: beer, wine, etc, can offer up some notable health and social benefits.

Key words: alcohol, health, social interactions, life

INTRODUCTION

George Bernard Shaw once said that “alcohol is the anaesthesia by which we endure the operation of life.” Although some might find this an overly pessimistic sentiment, alcohol is certainly the drug of choice in most parts of the world where it is used as a stimulant, relaxant or an anaesthetic. Can be a stimulant for someone who wants to feel “brave”, a relaxant after a full day at work or an anaesthetic for a “broken heart”.

When we discuss the alcohol’s effects on the body, everybody tends to focus on the harmful outcomes, like injury and disease. It can be easy to overlook that a primary motivation for drinking alcohol is pleasure. It perhaps goes without saying that people don’t drink alcohol with the intention of getting sick or experience an injury; they drink because it makes them feel good. So why is consuming alcohol pleasurable? There is no denying that some of us like the acidic sweetness of a good Pinot Gris, whereas others favour the gritty richness of dark ales. The alcohol industry knows this, and markets its products accordingly. However, alcohol can make us feel pretty nice after it’s gone down too.

Alcohol use in social settings can have both desirable and undesirable effects. Those effects can be a better mood and less anxiety or physical or verbal aggression. Alcohol can induce both positive and negative effects in the same person at different times. However, how a person reacts depends on many different aspects.

MATERIAL AND METHOD

Social drinking

Social interaction is viewed as a strengthening self-esteem and coping strategies as well as facilitating a greater degree of empowerment and accountability. Such enhancements have been shown to be positively associated with better mental health. Similarly, support from friends, family and health professionals improves health by encouraging healthy behaviours and discouraging health damaging behaviours.

While alcohol is essentially a depressant substance, after a drink or two we can feel energised, more self-confident and sociable, even joyous. A recent study by the Ernest Gallo Clinic and Research Center at the University of California might explain why. The study found that drinking alcohol leads to the release of endorphins in areas of the brain that produce feelings of pleasure and reward (Mitchell, O'Neil, Janabi, Marks, Jagust, & Fields, 2012). Using positron emission tomography (PET) imagery, the researchers observed the immediate effects of alcohol in the brains of 13 subjects who were heavy drinkers and 12 'control' subjects who were not heavy drinkers. Alcohol consumption led to a release of endorphins in *all* subjects. Jennifer Mitchell, Clinical Project Director at the Gallo Center, argues that the study "provides the first direct evidence of how alcohol makes people feel good" (O'Brien, 2012).

Feeling good is, however, dependent on how much alcohol is in one's bloodstream (Blood Alcohol Content or BAC). A BAC between 0.03% and 0.059% has been described as "the pleasure zone" and can be achieved and maintained by consuming about one standard drink per hour. A higher BAC and the drinker will begin to feel the depressive, less pleasurable effects of alcohol.

But, the pleasure of drinking goes beyond psychoactive and bodily sensations. Our experiences of pride, relief, excitement and other feelings such as sexual attraction are bound up with the consumption of alcohol. We celebrate or just catch up with friends with alcohol. We reward ourselves with alcohol. We employ alcohol to facilitate social bonds that might otherwise be hard to initiate. Some studies show that drinking alcohol leads to release of endorphins in areas of the brain that produce feelings of pleasure and reward.

Young people recount that alcohol makes them feel 'giddy', 'silly', 'happy', and 'fuzzy', as well as 'courageous' and 'affectionate'. For this population, the experience of 'fun' can, however, go beyond a few drinks.

RESULTS AND DISCUSSION

Health benefits of drinking alcohol

Some of the most common health benefits of using alcohol can be reducing the risk of developing and dying from heart disease, possibly reducing the risk of diabetes or reducing the risk of ischemic stroke. Red wine has long been considered the elixir of heart health. The key word when drinking alcohol is “moderate”. How does this risk reducing method work? Much of alcohol’s benefit to heart health has to do with its ability to raise good cholesterol, lower bad cholesterol, and reduce blood problems that can lead to clogged arteries (and the heart attacks they cause). Pinot Noir wine contains more disease-fighting antioxidants than any other alcoholic beverage.

A 2010 study published in “The Archives of Internal Medicine”, found that women who had one or two drinks a day were less likely to gain weight than those who didn’t, this means alcohol can actually help fight fat. Researchers believe that the bodies of long-term moderate drinkers somehow adapt to metabolize alcohol differently than those who concentrate their cocktails into the occasional big night out. Plus, women who drink moderate amounts of alcohol tend to eat less food, particularly carbohydrates.

In 2005 there has been a report published in the “Diabetes Care Journal” that found that moderate amounts of alcohol – one drink a day for women and up to two drinks a day for men – reduces risk of type 2 diabetes by up to 30 percent. How it works? Alcohol increases levels of a hormone that improves insulin sensitivity. In other words, it makes it easier for your body to process glucose and use it as energy. This helps reduce the amount of sugar in the bloodstream and ultimately reduces risk for developing diabetes.

Researchers from “Loyola University” found that moderate drinkers were 23% less likely to develop cognitive impairment, Alzheimer’s disease, and other forms of dementia compared to non-drinkers. Researchers hypothesize that since moderate drinking raises good cholesterol, it can improve blood flow to the brain. Alcohol could also “toughen” brain cells by stressing them a little, preparing them to cope with major stresses later in life that could cause dementia.

Gallstones—hard, pebble-like deposits that form inside the gallbladder and are generally made up of hardened cholesterol—might cause pain or cramping in the pit of your stomach. To avoid that unfortunate feeling, add a little alcohol to your daily diet. Research shows that regular moderate alcohol consumption (5-7 days per week) reduces risk of

gallstones. In contrast, infrequent alcohol intake (1-2 days per week) showed no significant association with risk.

CONCLUSIONS

The key word when drinking alcohol is “moderate”. When consumed moderated, alcohol in his many forms: beer, wine, etc, can offer up some notable health and social benefits.

REFERENCES

1. Ameratunga, S., Waayer, D., Robinson, E., Clark, T.C., Crengle, S., Denny, S. ... Teevale, T., 2011, Youth'07: The health and wellbeing of secondary school students in New Zealand. Young people and alcohol. Auckland, New Zealand: The University of Auckland.
2. Brain, K. J. 2000, Youth, alcohol, and the emergence of the post- modern alcohol order. Occasional paper No. 1. London: Institute of Alcohol Studies.
3. Cooper, H., Arber, S., Fee, L., & Ginn, J., 1999, The influence of social support and social capital on health: A review analysis of British data. Health Education Authority.
4. Fry, 2011, Harrison, Kelly, Lindsay, Advocat & Hickey, 2011; Measham & Brain, 2005
5. Harrison, L., Kelly, P., Lindsay, J., Advocat, J., & Hickey, C., 2011, I don't know anyone that has two drinks a day: Young people, alcohol and the government of pleasure. *Health, Risk & Society*, 13(5).
6. Hubbard, P., 2005, The geographies of 'going out': Emotions and embodiment in the evening economy. In J. Davidson, L. Bondi, & M. Smith (Eds.). *Emotional geographies* (pp. 117-134), Aldershot, England: Ashgate.
7. Kuntsche, E., Knibbe, R., Gmel, G., & Engels, R., 2005, Why do young people drink? A review of drinking motives. *Clinical Psychological Review*, 25, 841-861.
8. Nyqvist F, Pape B, Pellfolk T, Forsman A, Wahlbeck K. Structural and Cognitive Aspects of Social Capital and All-Cause Mortality: A Meta-Analysis of Cohort Studies. *Soc Indic Res.* 2014;116(2):545–66. doi: 10.1007/s11205-013-0288-9.
9. Mitchell, J. M., O'Neil, J. P., Janabi, M., Marks, S. M., Jagust, W. J., & Fields, H. L., 2012, Alcohol consumption induces endogenous opioid release in the human orbitofrontal cortex and nucleus accumbens. *Science Translational Medicine*, 4(116), 116ra6.
10. Zakhari, S., 2006, Overview: How is alcohol metabolized by the body? *Alcohol Research & Health*, 29(4), 245-254.