

SOBRIETY

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 er field when there weren't many women. She felt isolated and experienced "blatant discrimination." Her drinking increased.
 "It was normal to drink a couple of bottles of wine a night or a couple of pints," she said. "I thought I could handle it, that I could drink like the guys. I'm not a shy person."
 But sobriety doesn't like a drunk woman as much as a drunk man, said Mary.
 The aggressive traits that make so many men successful in sales or management—the same traits that often carry over to drinking—are more acceptable in men rather than women.
 Mary learned to pace her drinking in public.
 "Women are different. Most professional women who drink hid it. They hid the extent of their drinking," she said. "We might go out drinking with the guys, but then I'd go home and finish it off."
 Beth has quit drinking before.

"It's like lifting weights. I quit for awhile. I've done three months before, then I'd go back. I'd say I'd drink just on weekends or just one drink a week. I finally realized I needed help. A friend once said to me if I didn't have a drinking problem, I could leave some wine in my glass. I could never do that."
 "It's now been four months since Beth's last drink. It could be forever."
 "It's great," she said about Mary's 13 years of sobriety. "But I don't think that far in advance."
 Renee and her husband have put their lives back together, and Renee is proud of her involvement with WFS. She has become more assertive and more confident. She'd like to recruit more women to join her WFS group.
 Mary now has a healthy lifestyle. She takes vitamins (strongly suggested by WFS) and avoids junk food, a pitfall when she drank because it was fast and easy. And she's living in her community and has better friends.
 "When you get sober, you

start to value yourself more and you seek more nurturing relationships," she said.
 Like Renee and Beth, Mary practices WFS's "New Life" acceptance program, 13 affirmations that promote personal growth.
 "It's simple," said Mary about WFS's key to successful sobriety. "But it requires effort. I could drink right now, but I chose not to. Alcoholism is an isolating disease."
 "People tend to stick with a smaller group, their drinking buddies. I had to find out what interests were."
 Beth hopes WFS will help her plant permanent roots of sobriety. Others have done it.
 "What can I expect as I go along?" she asked. "People who have gone before me can give me support."
 The Women for Sobriety support group meets 6:30-8 p.m. every Wednesday in Conference Room A, basement level, Providence Hospital, 1600 West Nine Mile, Southfield. For more information, contact Renee Palmer at (248) 763-6092. rstoklund@home.com.net | (734) 953-7028

ALCOHOLICS

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 Hormones may play a role in quicker intoxication in women. Although research findings are inconsistent, studies have implied that fluctuating hormone levels during a woman's menstrual cycle may affect her rate of metabolizing alcohol.
 "The bad news for women drinkers continues. Liver damage, such as alcoholic cirrhosis and hepatitis, is more severe in women than men and manifests itself after a shorter period of time. Lastly, and most indicting, the NIAAA reports that female alcoholics have death rates 50 to 100 percent higher than those of male alcoholics."
 "Addiction is usually described as a dependence on a chemical, and abuse is using the chemical but not forming a dependence," said O'Dwyer.
 He lists the following signs of addiction:
 ■ Increased tolerance. "You require more and more to get the same effect."
 ■ Loss of control. "There's the inability to predict when you are going to stop (drinking) when you start. There's no

way of predicting if it will be two or 12 beers."
 ■ Withdrawal symptoms.
 ■ Social disruption. Despite chaos at home, at work or with the law, a person continues to drink.
 Regarding loss of control, O'Dwyer said many alcoholics, both men and women, operate under the "Lent" syndrome. "They assume because they stopped for 40 days during Lent, they don't have a problem." They do.
 Also, don't think because you drink less than other alcoholics that you don't have a problem, he said. "There are the heavy drinkers. Then there is the type who maintains a minimal blood alcohol level. They are seldom intoxicated but always have a nice glow. They can live a lot longer without being identified."
 Usually such alcoholics are discovered during a medical examination when an astute doctor asks, "Just how much do you drink?" said O'Dwyer.

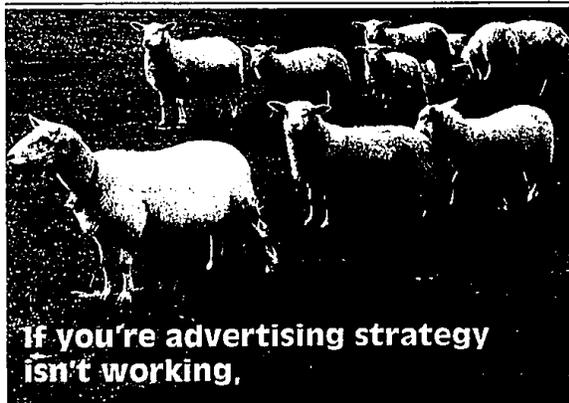
happy relationships) may reduce a woman's risk for abusing alcohol.
 In addition, women who have multiple roles — married women who work outside the home, for example — have fewer alcohol-related problems. Conversely, role deprivation for a woman — loss of role as wife, mother or worker — may increase her risk for abusing alcohol.
 O'Dwyer said some studies have indicated that Attention Deficit Disorder or anxiety disorders in childhood may be a predictor of alcohol abuse in adulthood.
 But environmental and cultural influences cannot be ignored, he said. "You can grow up learning that alcohol is the solution to every problem."
 For women alcoholics, those problems most often have deep roots, and treatment must focus on the cause of problems as well as the addiction, said O'Dwyer.
 "Because if they (women alcoholics) are to be able to stay sober, they have to be more assertive and able to relate to society."
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End pain of corns, calluses

With summer fading fast and school back in session, people are getting back into their regular routines. For most people, that means a lot of running around. All this activity can take a toll on your feet, especially if you already have foot, ankle or heel problems.
 Corns, calluses and pinched nerves in the foot and ankle can cause extreme pain and discomfort.
 "These conditions can intensify when people are more active. This type of foot problem can really slow you down," said Steven Watson, a doctor of podiatric medicine, of Canton Foot Specialists. "Twenty percent of our patients seek treatment for these conditions."
 A procedure known as neurolysis is now in its second year of use by Canton Foot Specialists to treat corns, calluses and neuromas. Podiatrists at the office first must identify the nerve responsible for the condition. Then, a special solution is administered to deactivate the nerve. The procedure is done over a period of several weeks to prevent damage to the soft tissue surrounding the area of treatment.
 "Neurolysis is the first treatment of choice because it is non-invasive and offers a high rate of success, even over surgery," said Dr. Watson. "It is safe for patients of all ages, especially for those who cannot have surgery due to circulation and nerve conditions, including diabetes."

Raymond Youvon, who has diabetes, was among the first to have the treatment done for a callus that had caused severe pain for several years. The 72-year-old Westland patient was pleased with the results. "I can't believe it's gone," he said. "I thought I would have to suffer with this callus forever."
 The procedure offers a complete cure for 80 percent of patients and many others experience significant relief. "I don't have the longer recovery period that is common with foot surgery."
 For more information, call Canton Foot Specialists at (734) 953-7028 or visit the Web site at www.cdfswatson.com. Offices are located in Canton, Garden City and Plymouth.

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