



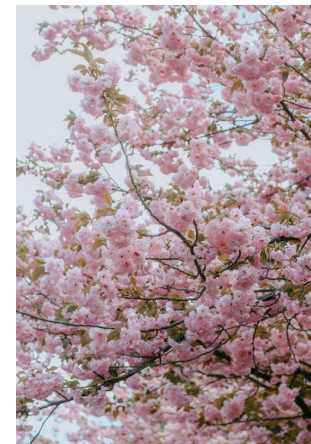
## From the Executive Director

Summer is upon us, with kids out of school, swimming pools open, and family vacations, typically a busy time of the year. I hope everyone has stayed safe from the springtime storms and has not suffered any physical loss,

or property damage. I hope the weather cooperates this summer and doesn't get too hot. If you are or know a pharmacist, student pharmacist, or pharmacy technician suffering from substance abuse disorder (SUD) or mental health issues alone or co-occurring with SUD, call OPHP for assistance now, since left alone the problem will not go away and will get progressively worse. I challenge everyone to be aware of some struggles during this time of the year either due to loneliness or mental health issues and I hope you are willing to reach out and offer support during this difficult time for those struggling. If you are missing a loved one or someone close to you, please know that Oklahoma Pharmacists Helping Pharmacists (OPHP) extends our heartfelt condolences. As those of us in the medical profession are considered essential and suit up and show up remaining on the front lines during the recent cough, cold and flu season, to take care of our patient's medical needs. As pharmacists, we played and continue to play a vital role in the battle against the flu and other respiratory issues. I am very proud of my chosen profession and our contribution to this fight. We are all in this together.

April is Alcohol Awareness Month, and, in this issue, Enterhealth a Dallas-based treatment center has provided an article "Alcohol Awareness Month & The Challenge of Cravings" Alcohol is legal and readily available.

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## From the Executive Director continued

The advantage OPHP participants have is additional support and monitoring in case there is a relapse with alcohol. This article details cravings, how to manage cravings, and long-term strategies for staying sober. I hope you enjoy this article.

When a pharmacist, student pharmacist, or pharmacy technician enters the OPHP program and begins their road to personal recovery from a substance use disorder (SUD) and/or co-occurring issue often the family, friends, or colleagues may not understand the vital role they may play in the OPHP participant's recovery. They may even verbalize that they knew something was wrong but couldn't identify it and were shocked to find that their loved one, friend, or colleague suffered from a SUD or co-occurring issue. In this issue, OPHP will include an article "Identifying the Problem" in hopes of helping loved ones identify the issues in those suffering and what they can do to support their loved ones. Also, it is important for friends, family members, or colleagues to get assistance since they are also impacted by this insidious disease.

OPHP has a free-standing website at [www.ophp.us](http://www.ophp.us) Please visit our website to learn more about the services OPHP provides the pharmacy profession regarding assistance with a personal substance use disorder and/or mental health issues. Contact OPHP if you have any questions or need assistance.

Don't forget, take time for self-care, and if you are struggling with SUD or other mental health issues, or you know another pharmacist or student pharmacist who you think may be suffering call the (OPHP) Helpline immediately. There are those who struggle or have a hard time dealing with life on life's terms daily. Can I challenge everyone to recognize these struggles either in themselves or others and reach out for help or be willing to help if needed? If you find yourself struggling don't hesitate to reach out to (OPHP) for help that is readily available if needed. If you know someone struggling during this time, I hope you will be willing to be available for them if needed. If you are a pharmacist or student pharmacist and you are struggling personally with a substance use disorder or other mental health issues, I would encourage you to call OPHP today and self-report your issues now. The advantages of self-reporting your own issues of substance use disorder or mental health issues are that you can get well or get in recovery, and if there are no legal issues or complaints the Oklahoma State Board of Pharmacy does not get involved. This is a tremendous opportunity, so don't let it slip away if you are suffering from substance use disorder or other mental health issues call OPHP before it is too late, resulting in disciplinary action on your intern/pharmacy license or other legal consequences.

I encourage any pharmacist or student pharmacist who may be struggling with substance use disorder or any other mental health issue, or if you know a pharmacist or student pharmacist you think may be struggling, to call the OPHP Help Line now.



**WHAT DO YOU DO IF YOU SUSPECT A COLLEAGUE  
HAS A PROBLEM WITH SUBSTANCE USE DISORDER**

**Trust your instincts!!**

**Call Oklahoma Pharmacists Helping Pharmacists (OPHP) immediately  
at the OPHP Help Line 1-800-260-7574 statewide or  
405-557-5773 locally  
Do not confront alone  
Left alone the problem will not go away.**

**If you or a pharmacist, student pharmacist, or pharmacy technician you  
care about is suffering from substance use disorder.**

## *Identifying the Problem*

Substance Use Disorder is a cunning, baffling, miserable disease. Denial is a major factor involved stopping those with this disease from seeking help for themselves. So often concerned family members, friends and colleagues, express knowledge that a problem exists, but are unable to identify it. The following *Impaired Pharmacist Symptom Inventory* may help to identify the problem, and get them the help that is so readily available before it is too late.

### *Impaired Pharmacist Symptom Inventory*

- Overwork\*\*
  - Disorganized schedule
  - Spasmodic work pace\*\*
  - Unreasonable behavior
  - Inaccessible to patients and employer
  - Prescription errors\*\*
  - Patient complaints
  - Frequent absences
  - Decreasing workload and tolerance
  - Frequent days off for vague reasons
  - Taking sexual advantage of coworkers or customers
  - Filling illegal prescriptions
  - Taking and/or using drugs from pharmacy without follow-up by physician\*\*
  - Taking/selling drugs to others or giving them to family or friends
  - Often late, absent or ill
  - Decreasing work performance
  - "Pharmacy Gossip"
  - Incommunicative/unavailable
  - Alcohol on breath while in pharmacy
- \*\*early signs

*What do you do if you suspect a colleague has a problem with substance use disorder?*

**Trust your instincts!!**

**Call Oklahoma Pharmacists Helping Pharmacists (OPHP)**

**immediately OPHP Helpline 800-260-7574**

**Do not confront alone**

**Left alone the problem will not go away.**

*If you or a pharmacist you care about is suffering from substance use disorder*

*There is a solution*

*Oklahoma Pharmacists Helping Pharmacists (OPHP)*

*Is readily available for help*

*Call the OPHP Helpline 800-260-7574*

*All calls are confidential.*

## **AMERICAN PHARMACISTS ASSOCIATION (APhA) INSTITUTE ON SUBSTANCE USE DISORDER SCHEDULED 2025**

APhA dates for the annual APhA Institute on Substance Use Disorder (SUD) at the University of Utah, Salt Lake City, UT. I encourage any pharmacist, student pharmacist or pharmacy technician to attend this meeting. Substance Use Disorder is such a scourge and impacts so many more than just the individual consuming the chemical and this institute offers support to all those impacted, friends, colleagues and family members. This institute offers four (4) days of education on the impact of SUD and solutions through counseling, 12-step meetings including alanon, etc. I assure everyone that attends this institute will have their life changed in a positive way forever.

OPHP is sponsored four (4) student pharmacists from OU and four (4) student pharmacists from SWOSU based on an essay contest where the student pharmacists indicate why they are interested in attending this institute and what they plan to bring back to each of their perspective colleges of pharmacy in order to make a difference. Also, OPHP is sponsoring OPHP participants that want to attend as well as OPHP Board of Director members.

In an upcoming OPHP Newsletter in September 2025 watch for these student pharmacists and OPHP participants share their experiences at this institute often referred to as their "Utah Experience"

If you are interested in attending this Institute you can visit the following link:

<https://aphainstitute.pharmacist.com/>

## Alcohol Awareness Month & the Challenge of Cravings

April 10, 2025

Every April, Alcohol Awareness Month highlights the widespread impact of alcohol use and the importance of support in recovery. For those working to quit drinking or maintain sobriety, managing cravings can be one of the most persistent challenges.

Cravings can be intense and uncomfortable—but they're also completely normal. They don't mean failure. They're simply a sign that your brain is still adjusting to life without alcohol.

Relapse is common. In fact, research shows that roughly two-thirds of people treated for alcohol use disorder relapse within six months. The good news? Cravings are temporary. With the right strategies, you can manage them without giving in.

### Understanding Alcohol Cravings

Alcohol cravings aren't random—they're often the result of deeper imbalances in the brain and body. At Enterhealth, we take a functional psychiatry approach, which means we look beyond the behavior and into the root causes driving it.

Cravings may stem from:

- **Biological imbalances** like disrupted dopamine pathways or low serotonin levels
- **Nutritional deficiencies** that impact brain function and mood regulation
- **Unaddressed mental health issues** such as anxiety, depression, or trauma
- **Environmental and emotional triggers** tied to past alcohol use

By identifying and treating these underlying factors—rather than just managing symptoms—patients have a stronger, more sustainable path forward. That's why our clinical team evaluates things like neurotransmitter levels, gut health, and vitamin/mineral deficiencies as part of each personalized treatment plan.

### Practical Tips for Managing Cravings

When you're in recovery, cravings can feel like they come out of nowhere—and they can hit hard. But while the feeling might be intense, it's also temporary. And it *can* be managed. The more you understand what's happening in the moment and have tools ready to use, the more control you'll have.

Let's break down some practical, effective ways to handle cravings when they show up.

## Change the Channel

Cravings thrive on attention. If you sit and stare them down, they tend to grow. But if you redirect your focus—quickly and deliberately—you can interrupt the urge before it gains momentum.

This doesn't mean just *thinking* about something else. It means *doing* something else. The more physically or mentally engaging, the better. You could:

- Go outside and take a walk, even if it's just around the block
- Put on loud music and clean your kitchen
- Text or call someone who supports your recovery
- Pick up a crossword, game, or project that keeps your hands busy
- Watch a show that makes you laugh or grabs your attention
- Eat a snack, a piece of fruit, anything (some cravings are made worse by low blood sugar)

You're not running away from the craving—you're choosing not to feed it.

## Ride the Wave (Urge Surfing)

Cravings come in waves. They rise, peak, and fall. The idea behind urge surfing is to ride the wave rather than fight or suppress it.

The next time you feel a craving coming on, try this:

- **Pause** – Acknowledge that you're having a craving. Name it. "I'm feeling the urge to drink."
- **Breathe** – Focus on your breath. Slow, deep inhales and exhales can calm your nervous system.
- **Observe** – Notice where you feel the craving in your body. Is your chest tight? Stomach fluttering? Mind racing?
- **Remind yourself** – Cravings don't last forever. Most fade within 15–30 minutes.

This practice helps you stay present and prevents you from reacting automatically. You're learning to respond, not just react.

## Play the Tape Forward

When cravings hit, your brain tries to sell you on the *first sip*. It paints a rosy picture—relief, relaxation, escape. It doesn't show you the consequences. So hit rewind. Then fast forward.

Ask yourself:

- What really happens after I drink?
- How will I feel tomorrow morning—physically, emotionally?
- Who will I disappoint, including myself?
- What have I worked so hard to build in recovery?

### Then ask the flip side:

- How will I feel if I get through this craving without drinking?  
What does that say about my strength, my progress?

This mental exercise helps you push past the short-term fantasy and reconnect with your long-term goals.

### Control Your Environment

You can't always control cravings, but you *can* control your surroundings. The fewer cues you're exposed to, the less your brain is triggered into old patterns.

- Remove alcohol from your home—completely, if possible
- Avoid bars or restaurants that are closely tied to past drinking habits
- Limit exposure to certain people who pressure you or dismiss your recovery
- Build new routines around your sober lifestyle, different routes, new social circles, fresh activities

Even small environmental changes can make a big difference in how often cravings pop up—and how strong they feel.

## Long-Term Strategies for Staying Sober

Managing cravings in the moment is essential—but long-term sobriety requires more than just quick fixes. It's about building a foundation that supports your mental, emotional, and physical health over time.

The more structure and intention you put into your recovery, the more resilient you become when cravings or stress creep back in.

### Address the Root Cause with Functional Psychiatry

Cravings don't just happen in a vacuum. At Enterhealth, our functional psychiatry model identifies the *why* behind alcohol use and relapse risk. This includes evaluating each person's unique brain health, biology, lifestyle, and mental wellness to develop a customized recovery plan.

This can include:

- **Targeted therapy & counseling** for emotional and psychological support
- **Medication strategies** tailored to the patient's unique biology
- **Nutritional and dietary interventions** to correct deficiencies and reduce inflammation
- **Personalized supplement protocols** to support brain function, energy, and overall health
- **Lifestyle modifications** to reduce relapse triggers and stress

**Mindfulness, movement, and other holistic techniques** to support emotional and physical wellness

By addressing these root causes, we help reduce the frequency and intensity of alcohol cravings—and prevent relapse before it happens.

## Create Consistency Through Routine

Cravings often show up in moments of boredom, restlessness, or unpredictability. Establishing a daily routine can help fill those gaps and reduce vulnerability.

- Set regular times for meals, sleep, exercise, and downtime
- Make time for activities that bring meaning or joy—reading, creating, volunteering
- Include recovery-oriented actions in your day: journaling, attending meetings, meditating, or checking in with a sponsor

It doesn't have to be rigid. The goal is stability. When your day has structure, there's less room for old habits to sneak in.

## Consider Medication-Assisted Treatment

For some people, medication can play a meaningful role in reducing alcohol cravings and supporting long-term recovery, especially when combined with therapy, lifestyle changes, and medical oversight. The following medications have been clinically shown to lower the risk of relapse by targeting different aspects of alcohol addiction:

- **Naltrexone** works by blocking the euphoric effects of alcohol, helping reduce the reward response.
- **Acamprosate** helps stabilize chemical signaling in the brain, which can ease symptoms of post-acute withdrawal and reduce the urge to drink.
- **Disulfiram** creates a strong aversive reaction when alcohol is consumed, serving as a behavioral deterrent.

Our medical team evaluates each person's history, brain chemistry, and recovery goals to determine whether medication could be a helpful part of their overall care plan. These medications aren't shortcuts or substitutes for therapy—but they can serve as valuable tools, particularly in early recovery or during high-risk periods when cravings are most intense.

## Learn from Close Calls

Not every craving leads to a relapse—but every craving is a learning opportunity.

When the moment passes, reflect on it:

- What triggered the craving?
- How did you respond?
- What helped? What didn't?
- 

Use that information to update your plan. You might discover you need to avoid certain situations, reach out sooner, or try a new coping strategy. Over time, you get better at recognizing the signs early and responding in healthier ways.



**OPHP Helpline:  
1-800-260-7574 (statewide)  
405-557-5773 (local)**

*All calls are confidential and OPHP is readily available for help.*

I assure you it is the best thing you could do for a family member, friend, colleague or yourself. If there is no legal action, the pharmacist or student pharmacist can get the help and treatment they need for their disease and remain anonymous to the Oklahoma State Board of Pharmacy as long as they comply with the recovery recommendations of OPHP.

If you haven't already contributed to OPHP this year, please consider making a tax-deductible contribution. These contributions help OPHP continue to assist pharmacists/pharmacy students with the recovery process. To donate, please use the form below or click here to donate online. For those who have contributed this year, please accept our sincere thanks.

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**[DONATE](#)**

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