

Booze—It Ain't Macho, Cool or Funny

By Ken Testorff,
Naval Safety Center

If the preceding incident were an isolated case, Navy and Marine Corps brass wouldn't be working so hard to get a handle on drinking problems. Here are a couple more reasons why the situation can't be ignored:

An alcohol-impaired, 28-year-old E-5 arrived at a barracks one October night and was visiting with two shipmates when they all decided to go outside onto a third-floor balcony to smoke. The shipmates repeatedly had to stop the E-5 from jumping over the handrail.

Finally, one shipmate went inside, and the other turned his back to light a cigarette. The E-5 seized that opportunity to leap over the handrail. He plunged 20 feet, breaking both heels and four vertebrae in his lower back. Besides spending 21 days in a hospital and losing 28 workdays, the victim learned he will be permanently partly disabled. His BAC at the time of the mishap was 0.249.

This incident occurred about three weeks before the E-5 was scheduled to visit a Family Services Center for an alcohol-dependency evaluation. That appointment was the earliest one available. Seven months earlier, the E-5 had had a DUI, and he had delayed the evaluation and possible treatment in favor of going on deployment. In the interim, he signed a page-13 entry, stating he would not consume alcohol while deployed—a promise that he kept.

Elsewhere, one evening in December, a Mississippi sheriff's office received several 911 emergency calls from interstate motorists about a reckless driver [turned out to be a Navy O-2] who had been speeding down the highway when she crashed. Deputies arrived at the scene to find the O-2's car totaled after side-swiping an SUV (still drivable) and another car (also totaled).

Upon arriving at the O-2's car, the one deputy was "overwhelmed" by the smell of alcohol. He said she



Navy photo by JO3 Adam R. Cole

A drug and alcohol prevention advisor (DAPA) aboard USS *Juneau* (LPD-10) leads a special focus group with second class petty officers as part of the ship's Right Spirit campaign.

also was exhibiting erratic behavior—not surprising, when you consider her preliminary BAC level (taken at a local hospital) was 0.286.

The deputy tried to continue interviewing the O-2 at the hospital but reported she was incoherent. She couldn't even provide basic information (e.g., name, address and phone number). She still was exhibiting behavior of a "severely intoxicated" person later in the evening when the deputy finally released her into the custody of her husband.

As it turns out, this incident wasn't the O-2's first one involving alcohol. She had attended the level-3

During Red Ribbon Week (Oct. 23-29, 2004), at MCAS Miramar, various organizations like the Substance Abuse Control Center promoted messages to get Marines and Sailors to stomp out drug and alcohol abuse in their own lives.

substance abuse and rehabilitation program (SARP) a little earlier, following a series of alcohol-related problems.

The Navy and Marine Corps are filled with “bulletproof” young men and women, who have competitive natures that drive them to succeed and, in some cases, exceed. Unfortunately, the same competitive nature sometimes leads to risk-taking, and, for some Sailors and Marines, those risks may include excessive alcohol consumption.

“At some point, alcohol abuse is going to show its effect on the body,” said the Marine Corps non-commissioned OinC at a naval hospital’s substance-abuse council center. “Alcohol is toxic to the human body, so, in any amount, it’s poison.”

Sometimes, the results of binge drinking (having five or more drinks at one time) can be even more serious. As explained by the drug-demand reduction coordinator at the same naval hospital, “Alcohol is a drug, and, when you’re drunk, it’s a drug overdose. Most people never think about it that way, but they can die from alcohol poisoning. If you’re playing drinking games and pounding 14 or 15 drinks a night, you can die.”

For example, an E-8 was drinking rum and coke with beer while playing cards at his residence. Suddenly, he collapsed and fell off a chair onto the floor. Thinking he just had passed out from the booze, his wife let him lie on the floor for a half-hour before she called 911. Emergency-medical technicians and police responded. Resuscitation efforts continued all the way to a local hospital, where doctors pronounced the E-8 dead from alcohol poisoning. His BAC was 0.234.

Another alcohol fatality was a young Marine E-2. In fewer than five hours, the E-2 drank 16 12-ounce beers, 32 ounces of Japanese sake, seven shots of 80-proof brandy-and-coke mix, and 200 milliliters of 80-proof tequila. His BAC was 0.57.

Alcohol poisoning or overdose is a serious topic that touches the civilian sector, as well as the military.



Marine Corps photo by LCpl. Skye Jones

Symptoms include mental confusion; vomiting while sleeping; seizures; slow or irregular breathing; and a cold, clammy, pale, bluish-colored skin. Victims often cannot be aroused.

If you suspect alcohol poisoning, don’t waste time. Call 911 immediately. Stay with the victims and turn them on their side to prevent choking on vomit. Quick action on your part can save lives. Sleeping it off, taking a cold shower, or drinking coffee will not reverse the effects of alcohol; time is the only thing that can sober a drunk.

Commands must take an aggressive stance on alcohol abuse and educate Sailors and Marines on the negative effects of drinking too much. It also is essential to stress that Sailors and Marines call for medical attention. Potential embarrassment is hardly a concern when the choice is sending a friend on a simple trip to an emergency room or to the morgue. Take your pick, and choose wisely; it’s a decision you’ll have to live with the rest of your life.

If you drink, don’t exceed your limits. Moderation is key. Take it slow—no more than one drink per hour. Don’t drink on an empty stomach, use the buddy system, and leave driving to the designated driver. Never leave friends alone to “sleep it off” if you suspect they’ve had too much to drink; they may not wake up. Drinking to the point where you pass out, choke on your own vomit, or fall from a balcony is not macho, cool or funny. ■

For more info, go to: <http://www.collegedrinkingprevention.gov/OtherAlcoholInformation/factsAboutAlcoholPoisoning.aspx> or <http://www.nhtsa.dot.gov/PEOPLE/outreach/SafeSobr/15qp/web/idalc.html>.