

Are you addicted to alcohol?

Here is a short questionnaire to evaluate your use of alcohol. The Alcohol Use Disorders Identification Test or AUDIT has been developed by the World Health Organisation and is used by doctors to assess the extent to which a patient is likely to need to make some changes in their drinking to avoid health problems.

The AUDIT Questionnaire

1. How often do you have a drink containing alcohol?

1. Never (0)
2. Monthly or Less (1)
3. 2-4 times a month (2)
4. 2-3 times a week (3)
5. 4 or more times a week (4)

2. How many drinks containing alcohol do you have on a typical day when you are drinking?

1. 1 or 2 (0)
2. 3 or 4 (1)
3. 5 or 6 (2)
4. 7-9 (3)
5. 10 or more (4)

3. How often do you have 6 or more drinks on an occasion when you are drinking?

1. Never (0)
2. Less than monthly (1)
3. Monthly (2)
4. Weekly (3)
5. Daily or almost daily (4)

4. How often during the past year have you found that you were not able to stop drinking once you had started?

1. Never (0)
2. Less than monthly (1)
3. Monthly (2)
4. Weekly (3)
5. Daily or almost daily (4)

5. How often during the past year have you failed to do what was normally expected of you because of drinking?

1. Never (0)
2. Less than monthly (1)
3. Monthly (2)
4. Weekly (3)
5. Daily or almost daily (4)

6. How often during the past year have you needed a first drink in the morning to get yourself going after a heavy drinking session?

1. Never (0)
2. Less than monthly (1)
3. Monthly (2)
4. Weekly (3)
5. Daily or almost daily (4)

7. How often during the past year have you had a feeling of guilt or remorse after drinking?

1. Never (0)
2. Less than monthly (1)
3. Monthly (2)
4. Weekly (3)
5. Daily or almost daily (4)

8. How often during the past year have you been unable to remember what happened the night before because you had been drinking?

1. Never (0)
2. Less than monthly (1)
3. Monthly (2)
4. Weekly (3)
5. Daily or almost daily (4)

9. Have you or has someone else been injured as a result of your drinking?

1. No (0)
2. Yes, but not in the past year (2)
3. Yes, during the past year (4)

10. Has a relative, friend, or a doctor or other health care worker been concerned about your drinking or suggested you cut down?

1. No (0)
2. Yes, but not in the past year (2)
3. Yes, during the past year (4)

How did you do?

If you scored below 8, you can quit on your own, above 8, it may be worth consulting your doctor or an alcohol advice and information service to talk about your drinking.