



# THE SINCLAIR METHOD

for Alcohol Addiction

FREQUENTLY ASKED QUESTIONS

[DOCTOR@EXPLOREHEALTHAZ.COM](mailto:DOCTOR@EXPLOREHEALTHAZ.COM)



## WHAT IS THE SINCLAIR METHOD (TSM)?

The Sinclair Method (TSM) is a safe and effective treatment for alcohol use disorder (AUD), but chances are you haven't heard about it. The protocol is simple and easy to follow and has little or no side effects. There are many reasons it is not well known, the foremost is because it goes against the belief that successful AUD treatment and recovery requires 100% abstinence.

TSM not only does not require a person to stop drinking, TSM requires that a person continues to drink, but only after they've taken a prescription drug that blocks the neurochemical effects of alcohol. This concept sounds so foreign and unbelievable that most addiction professionals discount the treatment before taking the time to understand it. Whether a person periodically has a problem with binge drinking

or overindulges daily, this method has a very high success rate in clinical studies (up to 80%) and with the hundreds of patients we have treated in our clinic.

TSM requires a non-addictive and safe drug called naltrexone (Revia) to be consumed one hour before drinking alcohol. Because it blocks the opiate receptors, Naltrexone causes what's known as a "pharmacological extinction" of the learned "reward" a person experiences when drinking. The extinction of the reward predictably allows a person with AUD to decrease their alcohol consumption to the point where they can have one or two drinks with dinner, essentially becoming a responsible drinker often referred to in AA as a "normie."

Most people that struggle with alcohol or have lived with an alcoholic are reluctant to believe that an alcoholic could ever "learn" to drink responsibly. If you are saying this to yourself as you read this, we suggest you suspend your disbelief and read all the information in this FAQ. Your life or the life of your loved one may depend on it.

Our office has seen many incredible successes in people that have:

- 1) Failed or relapsed many times using conventional 12-step and abstinence programs.
- 2) Never pursued treatment because they didn't want or knew they couldn't be alcohol free for the rest of their life.
- 3) Finally realized their drinking was getting out of control but they didn't want to pursue a conventional alcohol addiction program.
- 4) Denied they have AUD in spite of many failed relationships and personal shortcomings that directly resulted from behavior (including driving) while "under the influence."
- 5) Avoided treatment of their AUD because their excessive alcohol intake would require an in-patient detox to treat the delirium tremens (DTs and/or seizures) they would experience if they quit cold-turkey and their job, status, etc would not lend itself to the undeserved negative stigma society places on people in recovery.



## UNDERSTANDING THE SINCLAIR METHOD AND EXTINCTION

TSM was developed by Dr. David Sinclair who believed that AUD is a learned behavior. To create a successful treatment, Dr. Sinclair used the classical conditioning model of Pavlov's famous dogs.

In Pavlov's experiment, he rang a bell immediately before providing food to his dogs. After a period of conditioning, he would ring the bell and the dog would salivate even before the food was given. Eventually, he stopped giving food altogether after ringing the bell and the dog eventually stopped salivating. The process of unlearning a conditioned response has become known as extinction.

Dr. Sinclair believed he could cause an extinction of AUD behavior by blocking the response the person with AUD receives from drinking. Eventually, Sinclair found that taking a drug called Naltrexone before drinking blocked the opioid receptors and the resultant release of the pleasure neurotransmitter dopamine.

Just as Pavlov's dog stopped salivating after taking away the food, AUD patients using the Sinclair Method will predictably decrease their desire and consumption of alcohol. After a person reduces their consumption, approximately 25% choose to become abstinent, others choose to have an occasional drink and can do so without relapsing to their previously self-destructive behaviors.

## IS THE NALTREXONE PRESCRIPTION ADDICTIVE?

Naltrexone is a non-addictive medication that blocks the opiate receptors but does not activate any of the usual euphoria or "high" from addictive drugs. Long term successful TSM patients take the medication before drinking for the rest of their life, however if they choose to stop drinking and stop taking the Naltrexone prescription, they will not have withdrawals but they would inevitably be at risk of a highly predictable relapse if they start to drink again without first taking their Naltrexone.

## IS THERE ANY INTERACTION WITH OTHER DRUGS OR MEDICATIONS?

Naltrexone blocks the effects of all opiate based pain medications (Vicodin, Percocet, Hydrocodone, Oxycodone, Fentanyl, Buprenorphine, etc) and Heroin. Patients currently taking these drugs will need to discontinue them before safely starting on the Sinclair Method. Patients on Naltrexone therapy need to make their physician, surgeon, or dentist aware that they are on Naltrexone therapy, so they can provide alternative non-opiate pain relief for procedures or injuries. Patients utilizing TSM treatment can be put on clinically proven non-opiate pre and post-surgical or dental pain protocols developed by Dr. Nelson

## HOW IS THIS DIFFERENT FROM VIVITROL?

Vivitrol is an injectable form of Naltrexone that reduces cravings for alcohol for up to 28 days. Our experience is that this method does not accomplish any level of extinction that we observed in taking the oral Naltrexone 1 hour before drinking using TSM.

## IF THE SINCLAIR METHOD IS SO EFFECTIVE, WHY HAVEN'T I HEARD OF IT BEFORE?

Studies have shown that only 10% of people with AUD seek treatment and only 10% of those people achieve long term sobriety using 12-Step and abstinence. So, a similar but slightly more appropriate question might be "If abstinence and 12 step programs have such a poor success rate, why are they still

the standard of care in alcohol recovery?" These questions are interesting conversation starters but lack of public awareness or the uninformed opinions of your doctor, friends, or addiction counselor shouldn't be a reason to avoid TSM treatment.

### **WHAT HAPPENS IF I TAKE NALTREXONE IF I'M CURRENTLY TAKING OPIATE PAIN DRUGS OR HEROIN?**

Naltrexone will cause a precipitated withdrawal in patients taking opiate drugs or heroin. Symptoms of opiate withdrawal such as nausea, vomiting, bone and joint pain, chills, fever, etc will be similar but more severe than normally experienced in withdrawal without naltrexone.

### **HOW LONG DO I HAVE TO BE OFF OPIATES OR HEROIN TO USE NALTREXONE?**

Each patient starting on TSM will be given a urine drug screen prior to receiving their naltrexone as this is the only way to be certain the drugs are out of their system. On average, this occurs 5-7 days after stopping opiate pain relievers and heroin, 7-10 days after stopping Suboxone, and 14 days after stopping Methadone.

### **HOW LONG DOES IT TAKE TO REDUCE ALCOHOL CONSUMPTION AFTER STARTING TSM?**

Every patient responds differently. Some people on TSM will notice a significant decrease within a few weeks. People consuming extreme amounts (12+ drinks/day) may take up to 6 months or more to reduce their consumption. It took years to develop AUD and may take many months of oral Naltrexone combined with counseling, lifestyle changes and treatment for Post-Acute Withdrawal Syndrome to get it under control. Dr. Nelson is an expert in creating customized treatment plans for Post-Acute Withdrawal Syndrome.

### **WILL NALTREXONE PREVENT ME FROM GETTING DRUNK?**

No. Naltrexone reduces the desire for drinking and reduces consumption but patients on naltrexone can still get drunk. This is also true for Vivitrol and Naltrexone pellet implant therapy.

### **ARE THERE SIDE EFFECTS CAUSED BY NALTREXONE?**

Naltrexone is safe for the liver (the FDA removed the black box warning). Original studies suggested one would have to take 6 times the normal dose (300 mg) to cause problems with the liver. Even those that experienced liver problems at this level fully recovered after stopping the high dose naltrexone. Compared to the long-term damage excessive alcohol has on the liver, Naltrexone medication using TSM is extremely safe. Approximately 10-20% of our patients experience mild nausea that may last for a few days. This can be prevented by using smaller dosages to start and then slowly increasing to the optimal dose in sensitive patients.

### **CAN I GO TO 12-STEP MEETINGS WHILE I'M UTILIZING TSM?**

There is nothing that would prevent a person utilizing a 12-step recovery program from being treated with TSM, however since 12-step requires and expects abstinence, many of our patients prefer Smart Recovery or Rational Recovery programs.

### **WILL TREATMENT AFFECT MY LIVER ENZYME LEVELS?**

Patients with elevated liver enzymes (AST, ALT, GGT, etc) on a blood test will often see these numbers decrease or return to normal after decreasing their alcohol intake. Dr. Nelson is an expert in Naturopathic Medicine and can provide additional liver support if needed to help in more serious cases involving cirrhosis, esophageal varices, and fatty liver disease, etc.

### **IF I AM BEING TREATED USING TSM, DOES THAT MEAN I DON'T NEED COUNSELING?**

TSM may be all that is required for some patients that have a primarily biochemical based AUD. Studies have shown that for many, TSM is equally effective with or without supportive therapy.

If someone has an underlying mood disorder such as anxiety, bi-polar, depression, or PTSD, they will need to pursue professional counseling in combination with TSM. People pursuing TSM with counseling will tend to receive more benefit from their counseling sessions as their therapy will be directed to the underlying reasons why they drink rather than dealing with the physical addiction to alcohol. Our office can refer you to therapists that are familiar with TSM have experience working with someone not in a 12-step and abstinence treatment model.



### **I'VE BEEN AN ALCOHOLIC FOR MANY YEARS. WILL TSM WORK FOR ME?**

Our office has seen TSM help people that have had problems with alcohol for decades and also people that recently realized they have AUD. In fact, we have also worked with people that are worried about their increased alcohol consumption and want to prevent their consumption from getting worse.

### **I WAS PRESCRIBED NALTREXONE PREVIOUSLY AND IT DIDN'T WORK, OR MY DOCTOR SAID HE'S TRIED ORAL NALTREXONE WITH PATIENTS WITHOUT SUCCESS. HOW IS TSM DIFFERENT?**

Naltrexone was previously prescribed by physicians who told their patients to take it every day and to totally abstain from alcohol. This method is not effective as it does not promote extinction. Extinction only works if the person with AUD takes the pill and continues to drink.

### **WHAT IF I ALREADY QUIT DRINKING? IN ORDER TO UTILIZE TSM, ARE YOU RECOMMENDING I START DRINKING AGAIN?**

Absolutely not. However, people in recovery frequently relapse. For these people, TSM and naltrexone can provide protection against a full-blown relapse. We suggest anyone in active recovery should carry a naltrexone pill with them and take it one hour before they consume any amount of alcohol. This approach will not allow excessive drinking and will prevent a "bender" that often occurs when someone starts drinking after a period of abstinence.



## HOW TO START THE SINCLAIR METHOD

**STEP ONE:** Educate yourself and your friends/family on TSM. Be open and willing to look at alcohol use disorder and your treatment in an entirely new paradigm. Read all the information in this brochure, watch Claudia Christian's Tedx Talk video and her documentary "One Little Pill," and read Roy Askapa's Book "The Cure For Alcoholism."

**STEP TWO:** Take the Alcohol Use Disorders Identification Test (AUDIT). Google search for "Alcohol Use Disorders Identification Test." Print out a copy of the PDF and complete the self-assessment. A score of 8 or more is consistent with hazardous or dangerous alcohol use.

**STEP THREE:** Schedule an appointment with

Dr. Nelson. Please bring the result of your AUDIT test and a copy of your most recent blood work.

**STEP FOUR:** After receiving your prescription, simply take the Naltrexone one hour before drinking alcohol. Keep track of your consumption in a journal.

**STEP FIVE:** Follow-up appointment will be in 2-4 weeks to answer any questions and help with any problems. Continue to take your Naltrexone before you drink. Some patients may choose to stop drinking completely. Patients feeling anxious, depressed, or experiencing other mood challenges are probably suffering from Post-Acute Withdrawal Syndrome [PAWS] and need to work with Dr. Nelson so he can formulate an individualized treatment plan. Dr. Nelson has helped educate thousands of patients over many years to "produce health" instead of waiting for diseases to be diagnosed and then treating them with prescription drugs.

## SINCLAIR METHOD FOR OTHER ADDICTIONS

Although our office has had the most experience utilizing The Sinclair Method for patients with Alcohol Use Disorder, we can modify the program to help patients with other types of addictions. These include: Gambling addiction, Shopping addiction, Sex addiction, Video/online addiction, Sugar or food addiction.

For those patients struggling with opiate and heroin addiction, please refer to [www.addictionaz.com](http://www.addictionaz.com) for information on our naltrexone pellet therapy.

## HOW CAN I LEARN MORE ABOUT TSM?

[www.cthreefoundation.org](http://www.cthreefoundation.org)

**TEDx talk:** search for Claudia Christian Sinclair Method

*Available on Amazon:*

**Documentary film:** "One Little Pill"

**Book:** "The Cure for Alcoholism," by Roy Askapa, PhD

**Dr. Nelson's podcast: "Your Road to Personal Addiction Recovery"**

<https://podcasts.apple.com/us/podcast/your-road-to-personal-addiction-recovery/id1250954268>

Also, on [www.starworldwidenetworks.com](http://www.starworldwidenetworks.com) "Your Road to Personal Addiction Recovery". Episodes specifically dealing with TSM are:

Episode 32: recorded on 1/3/2018 "The Cure for Alcoholism in one little pill." Claudia Christian

Episode 44: recorded on 4/25/2018 "Another successful recovery from alcoholism using the Sinclair Method."

Episode 46: recorded on 5/9/2018 "Sinclair Method changes lives"



### ABOUT DR. NELSON

Dr. William Nelson is a nationally known addiction expert. His success in helping patients overcome their heroin, opiate, and alcohol addiction combined with his keen insights, individualized approach and non-judgemental bedside manner is why many of our patients travel from all over the world to receive his care. He is

the medical director of National Addiction Services, a clinic specializing in the treatment of drug and alcohol, located in Scottsdale, AZ.

Dr. Nelson's unique approach is especially helpful in cases where patients have failed with previous conventional treatment. Dr. Nelson is a licensed Naturopathic Medical Doctor and has 20 years of experience combining the latest advances in medical science with time-honored natural therapies for optimal patient outcomes.

Dr. Nelson hosts "Your Road to Personal Addiction Recovery," one of the most listened to addiction podcast in the world. His podcast reaches thousands of listeners every month and

each episode provides insightful and cutting-edge information for those to beat their addiction (or empower their loved ones without co-dependence).

"Over the last five years, I became extremely frustrated and saddened because I couldn't help a loved one that desperately needed help to overcome her heroin addiction. Because of the benefits of Naltrexone pellet therapy, she is now sober and on the road to recovery. This life-saving therapy is ideal for those who desperately want to become drug-free, but have experienced failures in trying to do so that make that goal seem next to impossible. My personal mission is to help other patients and their families the same way I was able to help my family member."

**For more information or to schedule an appointment, please contact our office at:**

**EXPLORE HEALTH, PLLC**  
**(602) 692-4626**

**DOCTOR@EXPLOREHEALTHAZ.COM**  
**EXPLOREHEALTHAZ.COM**