HEALTH BASICS

# Binge drinking

Binge drinking means consuming enough alcohol in one session to raise blood alcohol quickly.

**WHAT IT IS**
Drinking enough alcohol in one session to become significantly impaired

**WHERE IT COMES UP**
Alcohol screening, health advice, and conversations about drinking

**WHY IT MATTERS**
Raises the immediate risk of poisoning, injury, and poor decisions

**WHAT IT IS NOT**
Not a disease or diagnosis

**WHO TO ASK**
A primary care clinician or alcohol support service

**HOW IT IS CHECKED**
Drink count, timing, and sometimes blood alcohol concentration

## Overview

Binge drinking describes a pattern of alcohol use. It is not a disease or a diagnosis.

The term usually means drinking enough alcohol over a short period to raise the concentration of alcohol in your blood to 0.08%, also written as 0.08 grams per decilitre. In the United States, this typically happens after about four or more standard drinks for a woman, or five or more for a man, within roughly two hours.

These numbers are screening thresholds, not personal safety limits. Alcohol may cause impairment before you reach them. Age, body size, body composition, medications, food, drinking speed, and health conditions can all affect the result.

Definitions also differ between countries. A "standard drink" is not the same size everywhere, so drink counts from one country may not match guidance in another.

One episode does not by itself mean that someone has alcohol use disorder. Alcohol use disorder is a medical condition involving difficulty controlling alcohol use despite harmful effects. Repeated binge drinking can increase the chance of developing it, but the two terms are not interchangeable.

## How it works

Alcohol, also called ethanol, passes from your stomach and small intestine into your bloodstream. Your blood carries it to your brain and other organs.

As the blood alcohol concentration rises, alcohol affects brain areas involved in judgment, coordination, memory, breathing, and alertness. Early effects may include lowered inhibitions and slower reactions. Higher levels can cause marked confusion, poor coordination, vomiting, memory gaps, loss of consciousness, or dangerously slowed breathing.

Blood alcohol can continue rising after the last drink. This is because alcohol still in the stomach and intestine may continue entering the bloodstream.

The liver breaks down most alcohol, but it cannot clear a large amount immediately. Coffee, cold showers, exercise, and vomiting do not make the liver process alcohol faster. Only time lowers the alcohol level.

Food may slow how quickly alcohol enters the blood, but it does not prevent intoxication. Carbonated drinks and drinking quickly may lead to a faster rise.

A US standard drink contains about 14 grams of pure alcohol. This is roughly the amount in 12 fluid ounces of 5% beer, 5 fluid ounces of 12% wine, or 1.5 fluid ounces of 40% spirits. Many cans, large wine glasses, cocktails, and shared containers contain more than one standard drink.

## Why it matters for your health

Binge drinking increases short-term impairment. This can affect driving, swimming, balance, sexual decision-making, and the ability to notice danger.

Combining alcohol with opioids like oxycodone or morphine , sleeping medicines, anti-anxiety medicines, or other sedating drugs can suppress breathing. The combination may be dangerous even when each substance was taken in an amount that would not usually cause severe effects on its own.

Alcohol can also interact with medicines used for diabetes, pain, allergies, epilepsy, mental health conditions, and other health problems. The type of interaction differs by medicine. A pharmacist or prescribing clinician can check a specific combination.

During pregnancy, alcohol reaches the developing fetus. No amount or timing of alcohol exposure has been established as safe during pregnancy. If you drank before knowing you were pregnant, you can discuss the exposure without judgment with a maternity or primary care clinician.

Repeated binge-drinking episodes add to total alcohol exposure. Over time, this pattern can contribute to high blood pressure, liver disease, digestive problems, several cancers, and alcohol use disorder. Risk is shaped by how much and how often you drink, as well as your wider health.

## What can go wrong

Alcohol poisoning, also called alcohol overdose, happens when alcohol interferes with basic functions such as breathing, heart rate, temperature control, and the gag reflex. It is a medical emergency.

Call emergency services if someone who has been drinking:

Do not assume an unconscious person can "sleep it off." Stay with them, place them on their side if you can do so safely, and follow the emergency call handler's instructions. Do not force them to vomit or give them coffee, food, or a cold shower.

Other situations linked with binge drinking include falls, burns, drowning, road crashes, violence, unsafe sex, and aspiration. Aspiration means vomit or another substance enters the lungs. Alcohol-related memory gaps, often called blackouts, can occur while a person is still awake and interacting with others.

Heavy drinking can trigger inflammation of the pancreas, called acute pancreatitis, or an abnormal heart rhythm. Severe upper abdominal pain, chest pain, fainting, or significant breathing trouble needs urgent medical assessment.

Alcohol withdrawal is a separate concern. It can occur when someone whose body has become dependent on alcohol suddenly stops or sharply reduces drinking. Seizures, hallucinations, or severe confusion during withdrawal require emergency care.

- Cannot be woken or cannot stay conscious
- Has slow, irregular, or stopped breathing
- Has a seizure
- Is repeatedly vomiting while very drowsy or unconscious
- Has pale, bluish, grey, cold, or clammy skin
- Is severely confused or unable to protect themselves
- May have fallen, hit their head, or taken other drugs

## What you can do

If you want to understand a drinking episode, record what you drank, the container size, alcohol percentage, and the time period. Count standard drinks rather than counting glasses or cans. Product labels, online standard-drink calculators from public health services, and measured servings can help.

A personal breathalyser may estimate breath alcohol, but consumer devices have limitations. A low reading does not guarantee that you are safe to drive or do another safety-sensitive task. Blood alcohol concentration can also rise after the reading.

There is no home test that can show whether a drinking pattern is harmless. A clinician can ask structured screening questions, such as those in the AUDIT-C questionnaire. Blood tests may identify some effects of alcohol on the body, but no single blood test proves or rules out binge drinking or alcohol use disorder.

Routine follow-up is reasonable if binge drinking is recurring, causing memory gaps or injuries, affecting medicines or health conditions, or becoming difficult to control. You can ask a primary care clinician or alcohol support service:

If you drink heavily most days, have previously had withdrawal, or need alcohol to avoid shaking or feeling unwell, seek medical advice before stopping suddenly. Withdrawal sometimes needs supervised care.

After an isolated episode with no injury or ongoing concern, there may be nothing specific to test. Emergency warning signs still need immediate help.

- How many standard drinks are in my usual servings?
- Could alcohol interact with my medicines or health conditions?
- Would an alcohol screening questionnaire or blood test be useful?
- What support is available if I want to reduce or stop drinking?

## Common questions

Is binge drinking the same as being drunk?

No. "Drunk" is an informal description of impairment. Binge drinking is defined by the amount and timing of alcohol use, or by the resulting blood alcohol concentration. A person may be impaired below the binge threshold.

Does the type of alcohol matter?

The amount of pure alcohol matters most. Beer, wine, spirits, and cocktails can provide similar

amounts of alcohol when served as standard drinks. Strength and serving size can differ greatly.

Can drinking water prevent binge drinking?

Water can help with hydration, but it does not remove alcohol from the blood or prevent alcohol poisoning. Alternating with non-alcoholic drinks may slow consumption, but the total alcohol amount still matters.

Is a blackout the same as passing out?

No. During an alcohol-related blackout, a person is awake but the brain is not forming complete memories. Passing out means losing consciousness. Either can signal high-risk alcohol exposure, and an unconscious person needs close attention for emergency signs.

Does one binge-drinking episode mean I have alcohol use disorder?

No. Alcohol use disorder is diagnosed from a wider pattern of impaired control, continued use despite harm, and related features. A clinician can assess concerns without assuming a diagnosis.

## Sources

- National Institute on Alcohol Abuse and Alcoholism - Understanding Binge Drinking
- National Institute on Alcohol Abuse and Alcoholism - Understanding the Dangers of Alcohol Overdose
- Centers for Disease Control and Prevention - About Alcohol Use
- US Preventive Services Task Force - Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions
- NHS - Alcohol Poisoning