

NalPlan
online



INFORMATION eBOOK

Moving Beyond Dependence

THE SINCLAIR METHOD

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DRINK YOURSELF SOBER

- A fresh approach combining the use of NHS NICE-approved medication, Cognitive Behavioural Therapy (CBT) and a strong compliance program
- Scientifically proven – 78% success rate
- Individual plans to help patients diminish cravings and reduce drinking without immediately giving up
- Medication reduces cravings for alcohol
- CBT therapy helps our patients to address the psychological reasons for dependence
- 12-week online programs to reduce drinking or ultimately achieve complete abstinence
- One fee, £2,950

MOVING BEYOND DEPENDENCE



Why Abstinence Does Not Work

NalPlan does not ask you to never, ever drink alcohol again. Wouldn't that be a relief? Research on the brains of humans and animals addicted to alcohol tells us the same thing about abstinence: It makes the brain more preoccupied with drinking and increases cravings. This is known as the Alcohol Deprivation Effect.

Abstinence does not work because the alcohol-dependent brain will not rest until it has a drink. This is the reason members of AA have to go to meetings for the rest of their lives. Even though they have not had a drink in ten years, the brain that has become addicted to alcohol remains addicted to alcohol.

This is why AA is correct when they state that even if you have not had a drink for 20 years, if you slip, you begin drinking right where you left off. It reveals to us that abstinence does not change the fundamental neurobiology of addiction, no matter how long you have gone without taking a drink.



Alcohol Deprivation Effect

Most alcohol-dependent drinkers are unable to fend off the urge to drink, no matter what they try. When people do drink after sustained abstinence, it is often a self-destructive binge characterised by larger quantities of use than before they stopped. This is the Alcohol Deprivation Effect.

Pharmacological Extinction

The un-learning or pharmacological extinction occurs every time you drink with the NalPlan medication, because your brain gradually no longer associates alcohol with pleasure. Eventually, your brain will lose interest in alcohol, and you will find that you can take it or leave it.

Abstinence does not teach your brain this lesson, because as far as your brain is concerned, the last time you drank alcohol, it received a fix of endorphins. This is true even if you have not had a drink in over a decade.



Introduction to the NalPlan method

NalPlan programs, based on neuroscience and mental health research from the US, wean the body off dependence on alcohol over several weeks

- Based on The Sinclair Method (TSM), by psychiatrist Dr David Sinclair
- Documented in a successful practice in Finland, **achieves 78% success**
- Compares well with rehab treatments with around a 5% success rate

NalPlan does not require immediate abstinence or residential detox

- Pursued discreetly over 12 weeks, patients continue their lives as normal
- Our self-empowering approach builds on our patients' strengths
- Costs, at £2,950, are a fraction of those of conventional residential detox-and-rehab which often cost £10K+ per 4-week course with low success



Alcohol Dependence

In Alcohol Use Disorder (AUD), the reward system of the brain has been affected

- We restore the reward system with both medication and CBT
- Therapeutic effects of the medication and CBT may be synergistic
- Both have similar curative properties, and together they are unsurpassed
- We assess our patients' situations and the degrees of alcohol addiction in our initial online consultation



Program Components



Medication

- NalPlan medication is used in the treatment of Alcohol Use Disorder
- The medication helps our patients to reduce their cravings, thus helping them to drink less in their own quest to stop altogether
- Taken as a single pill, the medication is a first line aftercare approach licensed in the UK for dependence treatment. Recommended by the NHS National Institute for Clinical Excellence (NICE)



Cognitive Behaviour Therapy (CBT)

- Cognitive Behavioural Therapy – CBT – works by helping our patients to understand that their thoughts and actions can affect the way they feel
- CBT teaches our patients to observe the way their behaviour and thoughts can affect their mindset, then works to build new habits that help them to change behaviours
- CBT has long been recognised as best practice in treating addictions

Effects of NalPlan Medication on the Brain

When we drink:

- Endorphins bind to opioid receptors in the “reward centre” of the brain
- They release dopamine, a brain chemical responsible for the pleasurable effects of alcohol
- NalPlan medication prevents endorphins from taking effect by blocking off opioid receptors before any alcohol is consumed
- So each time a person drinks on the medication, they experience a reduced craving for alcohol
- Gradually the biology and neurology driving the addiction kept permanently intact in the brain system are weakened - and the mind is restored, more-or-less, to its condition prior to learning the addiction



Our CBT Approach

Cognitive Behavioural Therapy (CBT) was developed as an approach to treating cognitive disorders like alcohol addiction, so it has long been shown to be successful in helping those with AUD. The behaviours leading to drinking situations are mapped out.

- The combined medication and CBT approach quickly diminish cravings, producing dramatic drops in alcohol consumption and harmful behaviours
- CBT works to control risk situations and manage triggers
- Our practitioners explore with our patients the factors that support drinking
- Patients' motivations to change are supported
- Different homework assignments are provided to help our patient better understand the journey to their preferred outcome

Some Observations in the UK and Ireland

- Prior to Covid-19, there were **1 million problem drinkers in the UK** [*Public Health England*]
 - Post Covid-19, there may be **8 million problem drinkers in England** alone, 18% of the adult population, estimated by Public Health England and the Royal College of Psychiatrists
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- Alcohol is responsible for 88 deaths every month **in Ireland**
 - That's over 1,000 deaths per year. One in four deaths of young men aged 15-39 in **Ireland** is due to alcohol
 - Alcohol is a factor in half of all suicides in Ireland
- All from *Overview of alcohol related harm - Alcohol Action Ireland*

Importance of Compliance

“We know that taking medication regularly on time may pose difficulty for our patients in our online outpatient setting.

With our commitments to safety, quality and success, we remind each patient via regular contact of the positive impact of compliance and taking medication correctly and on time.

Our CBT team reinforce the numerous benefits of good practice during each therapy session and patients are encouraged to discuss any difficulties they encounter.”

*Dr Matthew Tranter, Medical Director, The NalPlan Clinic
- GMC Reg No: 7600958*



Your Journey as our NalPlan Patient

REFERRAL

Patients will have been referred to Nalplan online by their GP, their therapist, by the NHS, by their local authority or will call us directly.

We will have an initial discussion by phone and arrange an assessment with our specialist Doctor.

DIAGNOSIS

The medical assessment at NalPlan is with our specialist Doctor. The patient is registered, assessed, diagnosed, and if the patient is accepted as suitable, a treatment plan is agreed.

The plan will normally include a prescription for the medication and a CBT counselling program.

PROGRAM

Our patient is then referred by our specialist Doctor, on the day, to our online CBT practitioner for their CBT assessment and first session. Our CBT practitioner will discuss what the patient can expect from the combined therapeutic effects of the medication and the CBT.

ROADMAP

The patient leaves their first online CBT session with a defined roadmap laying out exactly what they can expect in terms of further CBT appointments, 8 in total held online, over the following 12 weeks.

We encourage patients to involve a family member or close friend for support.

FINAL CONSULTATION

Once the 12 week program is completed, our patient will have a final online consultation with our specialist Doctor to discuss their treatment program, to explore any additional therapies that they may require and a discharge, back to their GP where appropriate.

NalPlan may not be for everyone

- Not suitable for very heavy drinkers who may need residential treatment
- Patients need to be completely free from any opiate-based substances
- Treatment cannot start in mid-binge
- Not suitable for patients with acute liver diseases, or pregnant women

The medications are generally well tolerated with no severe side effects, but a minority of patients may experience passing nausea, headache, irritability.

Because a change of lifestyle is required, medication alone is not sufficient.

Our CBT therapists provides a channel to observe aspects and feelings related to drinking from various points of view and to help our patients to plan new lives leading eventually to pharmacological extinction.

CBT is important for educating patients on how dependency extinction works and how to accentuate the benefits.



Testimonials

Claudia Christian, actress, interviewed on Isle of Man TV, on YouTube [here](#)

Claudia Christian on her TSM experience on Ted Talks, on YouTube [here](#)

Experiences of recent TSM patients in Finland [here](#)

"I have to travel around the world due to my work. Often I had nothing else to do in the evenings than to drink. However, travelling takes its toll and my health started to weaken. So I decided to start the Sinclair Method treatment programme. The combination of the drug and the counselling helped me get my drinking under control. I was happy to be able to take some of the counselling sessions online as well. I feel a lot better now, thanks to the decreased drinking." Jeffrey T, 56 yrs, London

"My alcohol use gradually increased over the years. Eventually I had to drink at least one bottle of wine every evening. I faced stress both at the office as well at home. When my family started to make remarks, I finally realised that everything was not OK. I took the Sinclair Method treatment programme, and already halfway through the programme my alcohol use had halved. Now I only use alcohol occasionally." Liisa K, 38 yrs, Helsinki

The NaIPlan Clinical Team



Dr Matthew Tranter

Dr Matthew, our Medical Director, is also a Police Forensic Medical Examiner. He was a Doctor at a large NHS Hospitals Trust in the UK specialising in mental health with experience in addiction.

Dr Matthew has a PhD in Pharmacology from Imperial College and a degree in Medicine from the University of Oxford. He is an Honorary Post-Doctoral researcher at Imperial College London specialising in Cardiac Pharmacology.



Niki Trenchard

Niki is our Director of CBT, and CEO of CBT 24/7 Ltd, our dedicated CBT provider. She leads our team of therapists, is a BABCP accredited Cognitive Behaviour Psychotherapist, supervisor and trainer offering high quality and individualised therapy to patients looking for help with difficulties.

Over the last 23 years she has worked with the UK NHS and in independent practice.



Conclusions

NalPlan online provides affordable, evidence based treatment programs for problem drinking. NalPlan uses a combination of medication with professional counselling. This medication blocks the brain's receptors to reduce the feeling of reward when drinking. When used together with a compliance program, our medication diminishes the cravings without causing unpleasant side effects. When your brain learns that drinking no longer results in a pleasurable reward, pharmacological extinction has occurred. The treatment program is pursued discreetly while you continue your normal life.

Studies in Finland, the US and Canada have achieved [a 78% success rate](#). Immediate abstinence is not required as gradual pharmacological extinction of cravings occurs. Patient compliance through their treatment is an important part of the CBT approach, and we encourage involvement from a family member or close friend to provide continuous support. The patient is under the supervision of Dr Matthew and our team in NalPlan throughout and then discharged, back to their GP where appropriate.

If you feel NalPlan can help you or a loved one, call us today for an informal discussion. We can provide more insight and detail, and help you to decide what path may be in your best interest.



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