

Disulfiram

Antabuse — former US brand name

An option for supporting your decision not to drink. The plan should be informed, voluntary and backed by practical help.

From Jeffrey Panko, PMHNP-BC's education collection ·

Draft for review · Clinical content has not been revalidated for this website.

AVOID ALL ALCOHOL

REACTIONS CAN OCCUR FOR 14 DAYS AFTER STOPPING

ALDH helps break down alcohol. Blocking it can cause a dangerous reaction; this is not protection from alcohol poisoning.

What it is used for

Helps some people with alcohol use disorder maintain abstinence. It works as a deterrent, not by directly lowering craving.

Use it alongside a treatment and support plan. It does not treat alcohol withdrawal and must never be given without your knowledge.

How it works

Blocks a step in alcohol breakdown. A toxic byproduct can build up if alcohol enters your body, causing a potentially serious reaction.

You do not need to experience a reaction for treatment to help. Never drink alcohol to test whether the medicine is working.

What to expect over time

BEFORE STARTING

No alcohol for at least 12 hours, and follow your team's withdrawal-safety plan.

EARLY WEEKS

Take it consistently. Expect an early liver blood-test check, usually at 10–14 days.

ONGOING

Review goals, craving and side effects. There is no universal date when everyone should stop.

Taking your medication

Take once daily as prescribed. If it makes you sleepy, ask whether bedtime dosing or a lower dose would help.

Choose a reliable routine. If you want, a trusted person can support your daily dose; the arrangement should be respectful and agreed on.

After drinking or a longer break from treatment, ask before restarting. Do not take it while intoxicated or use extra doses to compensate.

When to get help

Call 911: chest pain, fainting, breathing trouble, seizure or severe confusion after alcohol exposure. Do not drive yourself.

Stop and seek urgent advice: yellow skin/eyes, dark urine, unusual weakness, loss of appetite or persistent vomiting.

Contact your team promptly: new numbness, burning or weakness in your limbs, vision changes, unusual thoughts or seeing/hearing things others do not.

Early side effects

Tiredness, drowsiness, headache, a metallic or garlic-like taste, stomach upset or skin rash can occur. Do not drive while drowsy. Ask for help if effects persist or disrupt daily life.

Other effects to discuss

Liver injury and nerve problems can occur even without alcohol. New nausea or unusual fatigue is not always a minor side effect. Keep blood-test appointments and report new symptoms promptly.

What to keep track of

Liver tests are checked before treatment, around 10–14 days and periodically afterward. Discuss cravings, alcohol exposure, missed doses and how support is working. Feeling better does not erase alcohol-reaction risk.

Before you start

Discuss heart, liver or kidney disease; seizures; psychosis; nerve or vision problems; diabetes; thyroid disease; allergies and every medicine. Tell your team about pregnancy or pregnancy plans. Disulfiram is generally avoided in pregnancy and should not be used while breastfeeding under its US label.

Medicines & interactions

Hidden alcohol

Check cough/cold liquids, mouthwash, flavor extracts, sauces and foods made with wine, beer or spirits. Cooking does not guarantee all alcohol is gone.

Medicines that need review

Metronidazole must not be combined. Warfarin, phenytoin, isoniazid, some sedatives and antidepressants need a pharmacist/prescriber check or extra monitoring.

Skin products and fumes

Choose alcohol-free products when possible. Ask about aftershave, cologne, rubbing alcohol, sanitizers and workplace solvents. Do not deliberately test your tolerance.

Everyday tips

Carry a medication card or wear an alert bracelet saying you take disulfiram, with an emergency contact.

Tell doctors, dentists and pharmacists before procedures or new medicines. Keep an updated medicine list.

Make a craving plan that includes people to contact, useful activities and other treatment options when needed.

If the daily routine or support arrangement is not working, say so. The plan can change without blame.

Your questions, answered

What if I miss a dose?

Take it when remembered unless the next dose is near; then skip it. Do not double. A missed dose does not make alcohol safe.

What if I drink alcohol?

Stop drinking and contact your care team or Poison Control promptly. Call 911 for severe symptoms. Do not try to treat a significant reaction at home.

Can I stop without tapering?

Usually yes, but agree on the next treatment plan. Avoid alcohol for at least 14 days after the last tablet, even if you feel well.

What if I still crave alcohol?

Tell your team. Disulfiram is not an anti-craving medicine. Additional support or a different medicine may fit your needs better.

Storage & safety

Keep tightly closed at room temperature, away from heat, moisture, children and pets. Never share or secretly give it to anyone. Ask about a take-back service. For too much medicine or accidental ingestion, call Poison Control: 1-800-222-1222; call 911 for collapse, seizure or breathing trouble.

About this information

For general information only; not a substitute for individualized medical advice. This sheet does not cover every risk or interaction. Ask your prescriber or pharmacist before changing how you take this medication.

Sources

1. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=bd09ba63-7eef-4740-b5e9-383887024f1f>
 2. <https://medlineplus.gov/druginfo/meds/a682602.html>
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Educational inclusion does not mean this medication or its indications are treated at this practice. Review the guide for your exact product with your prescriber or pharmacist.

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