The Next Step Room

Alcohol + cocaine: support for urges and safer choices

Recovery is more than willpower. Build a plan for the next urge, the next safe ride, and the next person you can call.

1 Pause and change the scene

If safe, move away from substances and purchasing opportunities. Keep your phone with you. Do not drive after using.

2 Delay and connect

Try a short delay, such as ten minutes, while contacting support. Say: I am having an urge and need company while it passes. Repeat or seek more help.

3 Notice the chain

Trigger leads to a thought, then an urge, then an action. Which places, people, emotions, or drinking situations lead toward cocaine use? Plan an exit before arriving.

4 Replace one link

Instead of I need a drink to cope, try: I need relief and support. I can call someone and leave this situation. Plan food, rest, support, and substance-free alternatives.

TRY IT IN REAL LIFE

After a stressful argument, an urge appears. Leave the setting if safe, call your support person, and use your prearranged sober ride. Later, review the trigger with your clinician without shaming yourself.

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Your practice page / Write, speak, or reflect privately

Treatment that fits

Tell your clinician about both substances, timing, amounts, cravings, and what happens when you stop. Ask about CBT, motivational approaches, contingency management, and alcohol treatment options. Peer support can add connection; it does not replace medical assessment.

01 My main trigger / warning cue

02 My first alternative action

03 My support person and number

04 My sober ride and backup

05 My clinician / next visit / what to discuss

One thing I learned / One adjustment I will try

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Keep-close cards / Support, sources, and a next step

PAUSE

Move away safely. Do not drive after using.

CONNECT

I am having an urge. Can you stay with me or help me leave?

PLAN

Name the trigger. Choose an exit and sober ride in advance.

RESTART

Review what happened. Contact support. Adjust the next step.

CARE & SAFETY

Alcohol plus cocaine adds heart and overdose risk; cocaine does not make driving safe. Heavy regular drinking can make sudden withdrawal dangerous: seek medical guidance before stopping. Call 911 for chest pain, seizure, collapse, severe overheating, trouble breathing, or inability to wake. Cocaine may contain fentanyl; if overdose is suspected, give naloxone if available, call 911, and follow dispatcher instructions. Naloxone does not treat cocaine or alcohol toxicity.

SOURCES & SCOPE

NIAAA: alcohol treatment and cravings (niaaa.nih.gov); ASAM/AAAP Clinical Practice Guideline on Stimulant Use Disorder (2024); CDC: naloxone (cdc.gov).

Original educational guide. Not therapy, a diagnosis, a detox plan, or a substitute for individualized care. Adapt practice with a qualified clinician. Reviewed for this collection: November 2026.