

HANGOVER

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Abstract: Even though hangover is a widespread phenomenon in many societies, it has received very scant systematic attention in social sciences. This article is based on publications from different disciplines (medicine, cultural history, social anthropology, sociology, etc.), my own observations, and interviews with fellow social anthropologists. After a general outline of the phenomenon, I will focus on some psychological aspects of hangover: guilt and vulnerability, but also the idea of complicity. These seem to combine in different ways not only in the self-perception of hung-over individuals: they also inform social perceptions of the consequences of excessive alcohol intake. They may be related to specific practices and patterns of drinking (as exemplified by observations from Siberia and the Far North of Russia), though large-scale comparisons are methodologically and ethically problematic. Examining the interrelation of hangover, responsibility, and transgression, the article concludes that the social perception of hangover involves different modes of human non-perfection.

Keywords: alcohol hangover, complicity, guilt, veisalgia, vulnerability

Notwithstanding countless books and articles on alcohol consumption (in Russia and elsewhere), hangover has remained a very enigmatic topic. This article, initially prepared for the Tartu 2013 workshop on the particularities of alcohol consumption in the Far North of Russia, emerged from my interest in the rites and practices of excessive drinking, the idea of transgression, and the question of how people describe, and deal with, the 'day after'. If practices of drinking bear certain cultural specifics¹, can we suppose that experiences of hangover do so, too?

While not claiming to give a definite answer, in this article I shall try to lay some groundwork for a cross-cultural study of hangover (*pohmel'e* in Russian²). With the aim to give a first appraisal of how hangover is defined and explained, the first part of the article draws mainly on medical literature. Later, the focus will be on those aspects that fall into the psychological rather than physiological domain: here I rely on interviews that I conducted with eight fellow social anthropologists and one medical expert in 2013 and 2014, as well as on my own observations.

HANGOVER RESEARCH: A FIRST APPRAISAL

Despite the abundance of scientific contributions on alcohol, alcohol abuse, alcoholism, prevention and ways of dealing with alcoholism, surprisingly few studies have dealt with hangover as a medical phenomenon. Occasional scientific articles on the topic of hangover appeared before 1990. Since then, we can witness a steady stream of publications, including several useful literature reviews (e.g. Swift & Davidson 1998; Wiese et al. 2000; Verster 2008). The most recent contributions include a study on the interrelation of hangover symptoms (Penning et al. 2012) and a special issue on hangover effects on workers' behaviour (i.e. performance at work) in the journal *Current Drug Abuse Review* (editorial by Frone & Verster 2013). Considerable progress in research has been made: now the chemical processes inside the body during and after alcohol intake are understood much better than twenty or thirty years ago. However, authors still differ on just which symptoms to include in hangover assessments and whether or not to include psychological aspects (e.g. Rohsenow et al. 2007: 1315).

Initially, there were attempts to look more closely at the psychological aspects of hangover, notably in Harburg et al. 1981 and 1993, but these have hardly been pursued in later research. Possibly, psychological aspects were considered too complex and insufficiently understood for detailed analysis. Having said that, in the last decade there has been some notable interest in the question as to how hangover impairs cognition, for example visual and spatial impairment of the body (e.g. Stephens et al. 2008), reaction time (McKinney & Coyle 2004) and memory deficits (Ling et al. 2010).

Earlier (and also some contemporary) research has sometimes confused hangover with the symptoms of withdrawal of alcohol from individuals with alcohol addiction. Hangover and withdrawal have occasionally been examined as interdependent (e.g. Span & Earleywine 1999) and certain similarities between the two can be identified (e.g. Swift & Davidson 1998: 57); however, the two are not the same (Penning et al. 2010), and a hangover is not necessarily connected with alcohol addiction (Harburg et al. 1981; Wiese et al. 2000). Rather, hangover is simply the consequence of alcohol consumption, or some certain excessive amount of alcohol consumption.

Symptoms of hangover

Let us look briefly at how hangover is described medically. *Veisalgia*, to introduce the medical term, is commonly seen as a combination of symptoms. As mentioned, opinions vary as to which symptoms to include. The most compre-

hensive list is given by Renske Penning and colleagues (2012: 249, Table 1), who also provide percentages of individuals who indicated suffering from the respective symptoms, from among a sample of students of Utrecht University. The list includes: fatigue (reported by 95.5 per cent of all students); thirst (89.1); drowsiness (88.3); sleepiness (87.7); headache (87.2); dry mouth (83.0); nausea (81.4); weakness (79.9); reduced alertness (78.5); concentration problems (77.6); apathy (lack of interest/concern) (74.0); increased reaction time (74.0); reduced appetite (61.9); clumsiness (51.4); agitation (49.5); vertigo (48.0); memory problems (47.6); gastrointestinal complaints (46.7); dizziness (46.0); stomach pain (44.7); tremor (38.9); balance problems (38.6); restlessness (36.8); shivering (34.4); sweating (33.9); disorientation (33.8); audio-sensitivity (33.3); photo-sensitivity (33.1); blunted affect (29.9); muscle pain (29.4); loss of taste (28.0); regret (27.1); confusion (25.8); guilt (25.2); gastritis (23.4); impulsivity (22.7); hot/cold flashes (21.4); vomiting (20.8); heart pounding (19.4); depression (18.9); palpitations (17.0); tinnitus (16.8); nystagmus (16.1); anger (10.1); respiratory problems (9.7); anxiety (7.4); suicidal thoughts (1.8).

Altogether, one will find this a remarkably motley list. Apart from the fact that certain items cannot be clearly separated from each other ('gastritis', 'stomach pain', and 'gastro-intestinal complaints' may refer to the same condition), we can also observe that some items describe clearly physiological states whereas others, notably 'guilt' and 'regret', indicate exclusively psychological phenomena. The latter will be discussed in the second half of this article.

Alcohol intake and the metabolism of hangover

How has hangover been described in terms of metabolism? To cut a complex and multi-stranded story short, several researchers are convinced that acetaldehyde is one of the key substances involved (evidence for this is discussed by Penning et al. 2010). The human body usually reduces alcohol (ethanol) to other substances: these are acetaldehyde in the first step and acetic acid in a subsequent step. The intermediate stage, the temporary increase of acetaldehyde in the human organism, is held to lead to some of those symptoms described above, notably nausea. Thirst and dry mouth simply stem from dehydration caused by the diuretic properties of alcohol, and dehydration can also cause headache and drowsiness.

Other chemical substances mitigate or aggravate the state of hangover. Different drinks contain different congeners.

Congeners, the byproducts of individual alcohol preparations (which are found primarily in brandy, wine, tequila, whiskey, and other dark liquors),

increase the frequency and severity of hangover [...]. Clear liquors, such as rum, vodka, and gin, tend to cause hangover less frequently. (Wiese et al. 2000: 899; cf. also Chapman 1970; Rohsenow & Howland 2010)

Tiny amounts of methanol are also contained as congeners in some drinks (there is a certain break-even point when the dose of methanol is not just a congener, but rather acts as a highly toxic substance). In addition to the above factors, hormonal changes occur during and after heavy alcohol consumption (Penning et al. 2010).

It has been established that an alcohol intake of 1.5 grams of alcohol per kilogram body weight is very likely to produce a hangover, starting several hours (usually the next morning) after alcohol consumption (Wiese et al. 2000: 900). However, and this is important to note, there is no *straight* connection between quantities of alcohol intake and intensity of hangover (Harburg et al. 1993). Some people (about 20%) drink comparatively high doses of alcohol and get really drunk – and yet they claim that they do not experience any hangover symptoms. Other people (another 20%) drink small to medium amounts and claim that they do not get tipsy (or drunk); and of these, despite their *not* getting tipsy or drunk, some experience *very* severe hangover symptoms the next day (ibid.).

It has been postulated that the same amount of alcohol intake will have more severe effects on women than on men. Moreover, if we believe Ernest Harburg et al. (1981, 1993), hangover is a gendered *and* age-related phenomenon: after consumption of equal amounts of alcohol, young women seem to experience more intense feelings of hangover than older women. Moreover, the hangover experience of young women seems to be less related to the amount of alcohol intake than that of men of the same age. In other words: Harburg claims that a young man's hangover is likely to get worse with a higher intake of alcohol, whereas the same is not true for women.

In the context of analysing drinking patterns in the North of Russia and Siberia, it is apposite to draw attention to the finding that in some individuals “genetic variants of the ALDH enzyme permit acetaldehyde to accumulate. These people routinely flush, sweat, and become ill after consuming small amounts of alcohol” (Swift & Davidson 1998: 58). ALDH stands for aldehyde dehydrogenase; it facilitates the reduction of acetaldehyde to acetic acid, as mentioned above. It is this observation that resounds in numerous lores and casual comments on the assumed incapacity of Siberian indigenous peoples to digest alcohol. Indeed, cases of rapid flushing, sudden excitement and irritation, and several hours of restless ‘wandering’ have been reported by some anthropologists from different parts of Siberia (and I have witnessed them

myself). Yet it has – to the best of my knowledge – never been reliably established whether different ethnic groups or regional populations show particular patterns of said genetic variant.

Hangover Indexes and other ways of measuring

One would expect that each symptom is measured in some way in its own right, and this is what was done in the above-mentioned study by Penning et al. (2012). In earlier publications (again, Harburg et al. 1981 and 1993) researchers seemingly simplistically *combined* the different symptoms to define severity. Here is their Hangover Severity Index (HSI):

No signs: gets drunk, but reports no hangover signs.

Weak: any or all of these three symptoms: headache, diarrhea, or loss of appetite.

Mild: anxiety and/or stomach pains.

Strong: any one of blackout, tremor, or thoughts of suicide.

Very strong: anxiety plus any one of blackout, tremor, thoughts of suicide.

Severe: two or more of blackout, tremor, or suicide thoughts.

(Harburg et al. 1993: 416)

Another study (Newlin & Pretorius 1990, quoted in Earleywine 1993: 417) measures the severity of hangover differently, reporting five hangover symptoms, which include: “got a headache while drinking”, “vomited after drinking”, “regretted my behavior while drinking”, “forgot some things that happened while drinking”, and “woke up too late the morning after drinking”. However, to my mind, the last item of the list is a consequence rather than a symptom in its own right.

It should be emphasised that ‘guilt’ and ‘regret’ are found in many definitions and also many self-descriptions of being hung-over. Not all authors follow this approach, however. Rohsenow et al. (2007) developed an Acute Hangover Scale based on different items: thirst; tiredness; headache; dizziness; loss of appetite; stomach ache; nausea; heart racing; and (for dubious reasons) also the item ‘hangover’ itself. Guilt is explicitly not included as an item – it is considered a cognitive reaction rather than a symptom: “Some [earlier] experiments have used [---] hangover symptoms plus cognitive reactions such as guilt (e.g. Span & Earlywine [sic] 1999).” I shall turn to these aspects in the next section.

PSYCHOLOGICAL ASPECTS OF HANGOVER

The interviews that I conducted with eight fellow social anthropologists in 2013 and 2014 elicited many of the physiological conditions mentioned in the medical studies; they did not elicit any additional ones (unless increased libido is considered a physiological rather than psychological condition). With regard to psychological aspects, my interviewees identified certain moods, which can be summarised as follows:

1. *Guilt/regret/remorse*, sometimes expressed as a rhetorical question of whether last night's fun was really worth the suffering of the present moment. This relates to a sense of silly or irrational behaviour, of not anticipating the consequences of alcohol intake.
2. *Vulnerability*, expressed either as the felt need to retreat to one's bed (or 'den', private space, etc.) and to be left alone, or as the feeling that one has exposed oneself before others, shown his or her 'soft spot', demonstrated imperfection, and thus rendered oneself as vulnerable.
3. Some rather positive emotion for which I use the word *complicity*. It stands for some interviewees' observation that they feel sympathetic with others around them also suffering from hangover, that the party has created a certain intimacy, that the other has also shown imperfection and – as one interviewee expressed it – has also shown to be 'human'.
4. *Slowness* in mental processes, e.g. the felt inability to deal adequately with multiple or quick sensory input. Related to that, one person described the state of observing himself as if from a distance.
5. In two cases, *thoughts about suicide* were mentioned in connection with very severe forms of hangover.

In what follows, I shall limit myself to exploring the first three items – *guilt*, *vulnerability*, *complicity* – and try to interpret them in the light of existing literature, but also present more details from my interviews. I shall argue that these aspects of self-perception reflect public perceptions on alcohol consumption and ideas about individual agency.

Guilt

With regard to the first item, some authors have claimed that a certain interaction exists between the feeling of guilt and hangover severity. Hangover can be a self-fulfilling prophecy: the more you feel guilty about your drinking (or your drinking habits), the greater is the likelihood that you will experience a hang-

over. To quote again Harburg et al. (1981: 1009), they suggest that “drinkers who feel guilt may partly induce hangovers in themselves”.³ Reversely, we may come to formulate the hypothesis: the less you feel guilty about your drinking (or drinking behaviour), the better for you because you are less likely to experience a hangover, or at least your hangover will be more moderate. This statement reflects some of the older publications on the topic, notably one by Chafetz (1976: 49): “When we’re tense and uptight while taking alcohol, we’re more predisposed to hangover.”

Since guilt is a concept highly loaded with cultural connotations, we can start speculating about hangover in societies with different preferences of how and when to drink – and different attitudes toward shame and self-contempt. To draw a connection between sociologist Max Weber’s renowned *Protestant Ethic* (Weber 1958 [1930]), his ideas on asceticism (cf. Treiber 1999) and the element of guilt in hangover may seem somewhat audacious; however, several authors do argue that a connection can be seen between Protestant ethics and social acceptance of alcohol consumption (Levine 1993; Nolte 2007). Harry Levine describes how temperance and abstinence became politically promoted in some societies, notably in northern and north-western Europe. Public concern about alcohol abuse, he says, is more widespread in Nordic and Anglo-American societies than in those of the European South, where Catholicism is dominant, even though people in the latter have a higher per capita intake of alcohol. In his view, public concern with temperance is embedded in the social history of Protestantism. Levine refers to Weber’s findings that rationality, self-control, and self-restraint are characteristic virtues of the Protestant ethic.⁴ In a similar vein, Frank Nolte (2007) argues that addiction is a social construct, the initial basis of which can be found in the Protestant idea to temper the desires of the body, and the fear of losing control over one’s emotions (see also Spode 1993: 64–65, 124ff.).

Public responses to hung-over individuals vary: they may include elements of ignorance, aggression, contempt, condescension, pity, sympathy, and acquiescence. We may suppose that public perceptions and discourses about hangover shape the experience of hangover to some extent. Moreover, these perceptions and discourses tend to be pronounced differently in different societies and historic periods.

With regard to the historic and regional differences in drinking practices, the findings presented by historians Hasso Spode (1993: 16–75) and Wolfgang Schivelbusch (1990: 38; also quoted by Nolte 2007) are particularly revealing. Describing drinking habits in Germany in medieval times, they both assert that if an individual attempted to leave the drinking company before getting completely smashed, others around the table would see this as a sign of disrespect

or cowardliness. This reaction, reported in the German context as a thing of an earlier period, is very present in Russian drinking culture, where individuals prevent each other from severing the bond of complicity with the question: “Do you respect me?” (*Ty menia uvazhaesh’?*). The question is a rhetorical one, as the affirmation of respect will require the continuation of the session. Such cycles of showing respect are then repeated *ad nauseam*. Sometimes they end in aggression, violence, and irrevocable loss, about which more below.

In comparison, then, in the Russian context it is despicable to quit the company of drinkers; whereas in the German context it is rather despicable to miss the point of quitting. Hence my assumption that the aspect of guilt in hangover is stronger in ‘temperance’ societies – perhaps not even *stronger*, but *more strongly individualised* or inward-oriented.

Vulnerability or non-perfection

Vulnerability stands for two phenomena: first, the reported tendency to avoid social contact and to retire to some quiet place; second, the knowledge that one has temporarily failed to be sensible and thus shown one’s imperfection. A colleague that I spoke with made the point that drunk people seem to be more humane; they are no longer those super-efficient beings that they are expected to be by the usual norms. Rather, they show a certain form of non-perfection, and exactly that makes them humane (in Russia: *chelovecheskii*). From this vantage point, the state of being hung-over shows a person’s capability to leave behind the idealised, stiff conventions of proper behaviour and attain a different, more down-to-earth mode of existence.

On the example of the House of Culture – communal arts centres that can be found in numerous communities in Russia – I have elsewhere argued that even in these institutions, the task of which is to promote refined taste and good manners, occasional drinking bouts take place, as if people sought to undo or deny the pervasive call for perfection and self-disciplining that reverberates in the pedagogical and cultural sphere (Habeck 2014: 130–133). With reference to the same setting – the House of Culture – Sántha and Safonova (2011) have demonstrated how the highly idealised, staged performance of cultivation and self-perfection requires active undoing, the destruction of that idealised image, a reassertion that the show is over, a return to ‘real’ life. A period of heavy alcohol consumption provides a simple and straightforward means to achieve this: the hangover marks the beginning of a new cycle – a new start in the game of cultivated self-presentation.

The aspect of cleansing and catharsis also comes to the fore in a quote from a novel *Russland To Go* by Wlada Kolosowa (Kolosowa 2012: 159–160), which is cited in a recent study on the meaning of *tusovka*, by Christian Buchner (2013: 7). Kolosowa writes (my translation from German):

For me, tusovka⁵ is a feeling, in the first place... The expectation that there will be more to eat than anybody could ever devour, and more to drink than is good, and that everybody will go home being tired and in high spirits. [...] The hangover after a good tusovka has a cleaning rather than punishing [effect]. The headache is not just a consequence of the fun, it is a proof of it. It gives reason for joy. If you wake up the next morning in a good mood and without a hangover, you are yet to expect the sobering experience.

Noteworthy is the word ‘cleaning’ in the above quotation. Anna Stammler-Gossmann reported at the 2013 Tartu Conference that drinking permits one to get down to zero, to reset oneself physiologically and psychologically.

Several interviewees remarked that in Russia people seem to show a certain kind of mercy, or at least tolerance, toward drunk individuals. According to that logic, it is more excusable if someone is drunk or even impaired for several days by *zanoi* (i.e. a state of inebriation that lasts several days or weeks). As one colleague stated, to be drunk is not a bad thing, it seems, because it is a means to withdraw from sober and dismal everyday life. If connotations of what everyday life is all about are grim then perhaps there is less reason to feel guilty when you drink, and when you are drunk. From such a vantage point, a hangover simply signifies the tough return trip from having revealed one’s ‘true self’ (cf. Pesmen 2000: 183). However, there can be an alternative motivation for showing patience or mercy towards hung-over persons – the temporary ‘loss of self’ of the drinker rather than the revelation of ‘true self’, as shall be explained below.⁶

Complicity

The notion of complicity⁷ is used here to refer to the *shared* experience of hangover. People were having a party and now, in the phase of hangover, realise that they share the same state. They remember that they collectively participated in the drinking, that they collectively went through a period of euphoria. The collective act of ‘letting go’ has created a certain intimacy, and the shared feeling of hangover adds another aspect to that intimacy. In other words, together they were revealing their ‘true selves’ (see above) and now together experience

the feeling of non-perfection. All this creates a certain bond between them. This shared experience also sets them apart from others, notably from those who are 'in control'. Superiors at work, for example, should exert control over their employees, which requires them to show exemplary (rational) behaviour and induce their employees to do the same, rebuking them for excessive drinking. It is the collective non-compliance with the norms that creates the feeling of complicity.

There are many examples when groups try to turn hierarchical relations into those of equality – at least temporarily – by 'drinking down' the person that has a higher status. The attempt to achieve social inclusion by means of drinking together can be observed not only in workplace settings but also in many other contexts, as described by Koester (2003), to whom I also owe the idiom of 'drinking down'. Drawing on my own experience in various local (including urban) communities in Russia, I was often put to the test, had to sit and drink with the people I intended to live with, so as to acknowledge that I am also 'human'. This exercise is needed to undo – again, temporarily at least – the hierarchical position of *uchenyi* (taught person), and to subvert the norms and expectations that come with the highly loaded status of *nemets* (German). My new acquaintances and I collectively underwent a period of exuberance but also the suffering that followed it. Such episodes provided the basis for complicity and a certain degree of intimacy. While speaking about my own fieldwork, I know of many colleagues who also have experienced rites of drinking as being checked out.

It should be added here that the emphasis on the *temporality* of this intimacy is due to the fact that a switch back to the official, idealised, role-model behaviour can happen easily. In other words, the complicity of today's hangover neither prevents nor contradicts highly formal and restrained interaction on the following day. Such switching between different frames of references is described as somehow typical for Russia (or Russians; see Sántha & Safonova 2011: 86) and stands in some contrast to cases of excessive drinking in England or Germany, where 'losing face' collectively creates a longer-lasting reminiscence and bond of complicity. The loss of face was induced not by some external agent, but by the individual's own decision – or weakness of deciding the point where to stop. The idea of switching back and forth between states of polite distance and drunk affection has its limits, however: if drinking bouts lead to irreversible destruction or even lethal consequences, the return to the frame of polite and restrained interaction becomes unthinkable. Sometimes during my fieldwork I had the impression that collective drinking entails pushing one's luck, moving oneself into a critical state, approaching the limit of disaster and trying to stop right in front of it.

Being in charge – or not

Heavy drinking can lead to a condition when one or several persons get into a rage, 'driven' by something, possessed by some power, and/or seemingly bereft of control over the 'self'. Some external agent is taking over. One might say: this or that person is not fully themselves, and one has to show mercy once the rage has stopped and the hangover has set in. Even though the individual may completely deny responsibility for the deed, he or she can still be held responsible for the consequences. While it may seem hard and provocative, it may make sense to analyse violent episodes that unfold during collective drinking bouts, and many an anthropologist working in Siberia has provided sad and dreadful stories of people being killed in a drunken fight. Such a deed cannot be reversed and the loss is irrevocable. Less tragic but still troubling are cases of drunk individuals destroying tables, lamps, china, or other objects. Precious as they may be, their replacement can be arranged comparatively easily.

When witnessing cases of material destruction, I was often surprised by the levels of tolerance, forgiveness or even ignoring the damage. An explanation can be offered, albeit a highly speculative one: since excessive drinking is pursued with the purpose of losing control and of reaching a state of transgression, the risk of collateral damage is part of the picture. This risk is acknowledged by the drinkers who 'get crazy', and those who have to live with the resulting havoc. The damage can be declared to have been caused by some external agent.⁸ Forgiving the person through whom the negative force has emanated is easier if the damage can be repaired.

A few inconclusive thoughts on the question of personhood and agency shall be added here. Returning to the notion of guilt and that of non-perfection, it may be worth juxtaposing them in terms of individual responsibility. Both the 'guilt' perspective and the 'imperfection' approach have one thing in common: they imply a weak (or impaired) personality. This weakness is seen as personal failure of the hung-over individual in the former perception, but as externally caused in the latter. Since no individual can hope to ever attain complete perfection, non-perfection is ultimately inescapable. Can we assume that non-perfection is less to be blamed on the individual than on some *force majeure*, and that hangover guilt is blamed more on the individual himself or herself, who failed to act responsibly? Can we further say that one form of shortcomings is helplessness, whereas the other is self-induced? Can we say that both are different degrees of control? And if these different degrees of control are individual, or experienced on the individual level, can we say that there are corresponding social ways of dealing with them, namely pity in the one case and contempt in the other?

CONCLUSION

The expectation of how one will be judged by others surely has an influence on self-perception in the state of hangover, and hence the notions of guilt, vulnerability, and complicity. A number of important factors have been left out of the picture: the reason for getting together; the composition of the drinking company; the emotional and physical constitution of the drinkers before getting inebriated; the presence of other people, be they sober or of a different company; etc. Reducing the situatedness of each particular drinking event to some standard situations is a necessary step to arrive at some general characteristics of hangover. Further cross-cultural examination of hangover would have to include a larger range of factors. Having said that, the general thrust of this article was to highlight central aspects of personal non-perfection, and how individual or collective non-perfection is evaluated socially: this evaluation ranges from a perceived failure (of the drinker to behave responsibly) to perceived humanity (of the drinker to be 'just an ordinary' person) and through to perceived helplessness (of the drinker to resist the spirit that takes over).

While it is easy to assume that the above interpretations co-exist in various combinations in different cultural contexts, it is methodologically and ethically problematic to uphold or study this on a large, 'cross-cultural' scale, for three reasons. Firstly, even though alcohol consumption is accompanied with numerous rites and collective expectations, physiological and psychological consequences are nonetheless experienced in individual ways and cannot be easily generalised. Secondly, the stark contrast between the sanitised scientific discourse on alcohol intoxication and the informality that usually surrounds talks about hangover has an impact on the ways in which we can explore the notion of hangover. Thirdly, cross-cultural research on hangover is ethically problematic if it merely leads to reinforcing old stereotypes about the alleged propensity for drinking among certain ethnic groups.

It is fair to conclude, however, that different perceptions of guilt, vulnerability, and complicity do not only inform people's judgements on the person who has drunk too much, but also the drinker's own self-perception. In a cyclical way, these perceptions are likely to shape the actual hangover experience and to provide the psychological experience on the basis of which the next drinking bout occurs.

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I am grateful to Aimar Ventsel for giving me the opportunity to present my thoughts on hangover at the 2013 Tartu Conference, and for many years of creative intellectual exchange. It was easy to conceive the initial idea for this article, but it was hard to write. This text is of exploratory style, meant to be developed and corroborated by further evidence. It will hopefully provide a starting point for discussing the phenomenon of hangover beyond the domain of medical studies wherein it is being examined thus far. The process of interviewing revealed that hangover constitutes a topic not easily spoken about. I would like to express my sincere gratitude to those who were willing to share their thoughts. I am also grateful to Art Leete, Erwin Schweitzer, and others who provided valuable comments on earlier versions of this article.

NOTES

- ¹ It would be impossible to sketch out here the manifold strands of public discourse, official and informal, on alcohol consumption in Russia. Others have worked toward that goal (e.g. Koester 2003, Pesmen 2000, and Nemtsov 2011, to name just a few), and the two conferences in Tartu have added insights from the Far North and Siberia. It is safe to state, however, that there is a particularly widespread concern with alcohol consumption in all parts of Russia, and a vast amount of stories and rites that come and go with drinking.
- ² When being asked how to translate 'hangover' into Russian, most of my interviewees replied "*pokhmel'e*", a noun that has *hmel'* (Eng. 'hop') as its root and from which the reflexive verb *pokhmelit'sia* is derived. *Pokhmelit'sia* means: to cure a hangover by drinking more of the same. Two other nouns for 'hangover' came up in the interviews: *sushniak* (literally: 'a dry one') refers to the symptom of thirst; *bodun* (initially meaning the quality of male ungulates fighting head to head) expresses a severe hangover. Both words are colloquial. *Pokhmel'e* seems more general and more frequently used.
- ³ The process behind that is not quite clear, but, as these authors claim, it is statistically significant. The way guilt is diagnosed is problematic, however. The studies rely on a single yes-or-no question to diagnose guilt in hangover: "Do you ever feel guilty about your drinking?" (Harburg et al. 1981: 1001; 1993: 415). Dissatisfying as it is methodologically, there seems to be a point of departure in Harburg and co-authors' findings about the relevance of guilt in hangover. Later medical studies mention it but do not really pick up on the concept.
- ⁴ Levine (1993) also argues that modern society requires the self to take responsibility, though his reference to Emile Durkheim's work on suicide does not appear fully convincing to me for his argument.

- ⁵ The Russian term *tusovka* has a range of meanings, including ‘party’ and ‘company’.
- ⁶ No chemical substance has yet been shown to *prevent* a hangover once alcohol ingestion has happened. The only way to avoid it is to drink *less* alcohol or *no* alcohol. There are, however, certain methods to mitigate some of the symptoms. These comprise the classical recommendation to drink water in order to restore the amount of water in the dehydrated body. The question of how to deal with a hangover has been discussed in several of the medical and psychological articles quoted (e.g. Swift & Davidson 1998) and also beyond. In a compilation made by the folklorist Frank Paulsen in Detroit and other North American cities in 1957–1961, we find several hundred folklore recipes on how to cure a hangover. They can be arranged into these categories: food, juice, milk and ice cream, liquor and beer, mixed drinks, food combined with liquor, sex, medical treatment, avoidance, hair of the dog (drinking a certain amount of alcohol the next morning), and miscellaneous. Since no other publication mentions sex as a hangover cure and since it is of emotional importance, I find it worth mentioning. Sex is considered a remedy against hangover because it provides relief, as Paulsen (1961) states. Hung-over individuals are more affectionate than sober people, as one of Paulsen’s male informants says: “You may not believe this, but people are more affectionate when they’re hung over. I’ve heard from both men and women that the best way to get over a hangover is have intercourse.” (ibid.: 159) Interestingly, this seems to be in contrast with medical researchers’ finding that apathy – the lack of interest – is a hangover symptom reported by some respondents in clinical studies. The state of being more affectionate does resonate with the idea of *vulnerability* (see below), inasmuch as it denotes impulsivity ‘unshielded’ from politeness and well-controlled behaviour.
- ⁷ I borrow this term from Hans Steinmüller: contradictions between official and vernacular forms of representation “bind people together in intimate spaces of self-knowledge” (2010: 540). “Those who share a sense of the same intimacies form what might be aptly called a ‘community of complicity’.” (ibid.: 541) It should be noted that the regional and thematic context to which I apply the term ‘complicity’ differs from his.
- ⁸ A further analysis of this assumption could build on studies that discuss different styles of causality attribution (Istomin 2012) or multiple, co-existing world interpretations (Oelschlaegel 2014) with regard to indigenous peoples of the Far North and Siberia.

ADDITIONAL SOURCES

- Interview with Stephan Dudeck, Arctic Centre, University of Lapland, Finland, on 10 May 2013.
- Interview with Florian Stammler, Arctic Centre, University of Lapland, Finland, on 18 May 2013.
- Interview with a fellow social anthropologist from Russia (anonymous), on 18 May 2013.
- Interview with Ina Schröder, Max Planck Institute for Social Anthropology, Halle, Germany, on 5 February 2014.
- Interview with Malgorzata Biczuk, Max Planck Institute for Social Anthropology, Halle, Germany, on 6 February 2014.
- Interview with Tatiana Barchunova, Novosibirsk State University, Novosibirsk, Russia, on 12 February 2014.
- Interview with Jan Holthues, medical expert, The Jewish Hospital, Berlin, Germany, on 16 February 2014.
- Interview with Ludek Broz, Charles University, Prague, Czech Republic, on 21 February 2014.
- Interview with Simon Schlegel, Max Planck Institute for Social Anthropology, Halle, Germany, on 28 February 2014.

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