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AIM Subscription Levels:

Individual: GBP £ 900-

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Gold: GBP £3,000-

USD \$5,000-

Euro 4,500-

Platinum: available on request.

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Estonia

Estonian Beer Association members will limit the alcohol content of cider produced and marketed for consumption in Estonia to 4.5% and that of long drinks to 5.5% from July 2013.

This initiative conforms with the objectives set out in the national alcohol policy Green Book, to reduce the consumption of absolute alcohol by the Estonian population. The change will be stipulated in the Estonian Beer Producers code of ethics.

In recent years, Association members pledged to not produce or market or advertise beer with an alcohol content of more than 7%.

Holland

The Dutch Junior health minister Martin van Rijn has told parliament that new bans on the sale of alcohol and tobacco products to the under-18s should both be introduced at the beginning of 2014. He argues that by implementing both bans at the same time, the message will be clearer and officials can launch a joint information campaign targeting local councils, bars and cafes and sports clubs.

Some MPs wanted to bring in the new alcohol purchasing age - an increase from 16 to 18 for the sale of wine and beer - this summer, but Dutch newspapers suggest that health and safety inspectors do not currently have enough staff to monitor the 8,000 bars plus supermarkets and retail outlets in 408 local authority areas.

Turkey

A Turkish court has overturned a prohibition on alcohol consumption in public places, on the grounds that it bans an activity not prohibited by law. Governor Irfan Balkanlıoğlu instituted the ban on drinking in public in April 2012, which also extended to vehicles in these spaces, with the stated intention of reducing road traffic crashes and antisocial behaviour.

Australia

In Cairns, Australia police are using forensic mapping, which plots correlations between entertainment venue locations and previous police presence to predict routes likely to be taken by drink drivers seeking to avoid detection. The so-called "spider-webbing" approach has proved more effective than the district's former practice of staffing highly visible checkpoints.

UK

Alcohol limits have been halved for sailors and submariners and sailors in the Royal Navy are to face new drink checks under new Ministry of Defence rules.

In the 24 hours before reporting for duty they are to have consumed no more than five units of alcohol (the previous limit was 10 units) and no alcohol in the 10 hours before reporting for duty.

Little effect on child's mental functioning associated with mother's light, occasional drinking in early pregnancy

Sayal K, Draper ES, Fraser R, Barrow M, Davey Smith G, Gray R. Light drinking in pregnancy and mid-childhood mental health and learning outcomes. *Arch Dis Child* 2013;98:107–111. doi:10.1136/archdischild-2012-302436.

Authors' Abstract

Objective To investigate whether light drinking in pregnancy is associated with adverse child mental health and academic outcomes.

Design Using data from the prospective, population-based Avon Longitudinal Study of Parents and Children (ALSPAC), we investigated the associations between light drinking in pregnancy (<1 glass per week in the first trimester) and child mental health (using both parent and teacher rated Strengths and Difficulties Questionnaires (SDQs)) and academic outcomes based on Key Stage 2 examination results at age 11 years.

Participants 11-year-old children from ALSPAC with parent (n=6,587) and teacher (n=6,393) completed SDQs and data from Key Stage 2 examination results (n=10,558).

Results 39% of women had consumed <1 glass per week and 16% ≥1 glass per week of alcohol during the first trimester (45% abstaining). After adjustment, relative to abstainers, there was no effect of light drinking on teacher-rated SDQ scores or examination results. In girls, although there was a suggestion of worse outcomes (adjusted regression coefficient=0.38; 95% CI 0.01 to 0.74) on the parent-rated total SDQ score in those exposed to light drinking compared to abstainers, no dose–response relationship was evident.

Conclusions Although the pattern of findings involving parent ratings for girls exposed to light drinking is consistent with earlier findings from this cohort, the overall lack of any adverse effects of light drinking is similar to findings from other recent cohort studies. Light drinking in pregnancy does not appear to be associated with clinically important adverse effects for mental health and academic outcomes at the age of 11 years.

Forum Comments

While any alcohol consumption during pregnancy is not encouraged, and heavy drinking is associated with an increase in risk of a number of adverse health outcomes in the fetus, there is controversy as to whether the occasional drink by the mother during pregnancy has any detectable effect on the child. The present study is based on cognitive and behavioral assessments in a large cohort of children at age 11 in relation to the mother's reporting of alcohol intake during the first trimester.

Specific comments on study: Information on the frequency of the mother's alcohol consumption during the first trimester was obtained by questionnaire completed at 18 weeks gestation. Categories of intake were "never," "less than 1 glass per week," "at least 1 glass per week," "1–2 glasses a day," "3–9 glasses a day," or "more than 10 glasses a day." Examples were given to specify that one glass was equivalent to one UK unit (8 g) of alcohol. For the analyses, the groups consuming ≥1 glasses per week were combined and compared with groups not consuming alcohol and those reporting < 1 drink/week. Forum reviewer Waterhouse commented: "It is unfortunate that these investigators had data on subjects with daily consumption but chose to combine it into a group consuming alcohol at least weekly. By combining these groups their report only says that consuming more than one drink per week is OK, but does not comment specifically on more frequent consumption."

Child mental health outcomes were assessed using both the parent- and teacher-completed Strengths and Difficulties Questionnaire (SDQ) at the age of 11 years. This instrument includes four sub-scales relating to emotional problems, conduct problems, hyperactivity / inattention, and peer relationships; higher scores indicate greater levels of severity. The analyses focus on the two behavioral problem sub-scales (conduct problems and hyperactivity/inattention) as well as the total problems score. Academic outcomes were assessed using standardized, age-adjusted total scores from results on the Key Stage 2 (KS2) examinations taken during the final year at primary (elementary) school, at ages 10–11 years. The authors state that these scores

provide an objective real world measure of academic performance.

Forum reviewers considered this to be a well-done analysis, with adjustments for key maternal variables (age, maternal education, parity, use of cannabis and other illicit drugs in the first trimester, housing, marriage status, maternal smoking, maternal mental health) and child factors, that included gestational age, birth weight, and gender. There were adequate numbers of subjects for comparison who consumed no alcohol during the first trimester (n=5,547) and those who reported some alcohol intake but < 1 drink/week (n=4, 776).

A total of 1,973 women reported that they consumed ≥ 1 drink/week. Unfortunately, despite having almost 2,000 subjects in this group, there are no analyses separating the effects among these women according to sub-groups of intake. States reviewer Skovenborg: "The reason for the arbitrary separation of alcohol consumption (<1 drink per week versus ≥ 1 drink per week) among a group of pregnant women with a very heterogenous alcohol intake is not explained by the authors. Current guidance about alcohol consumption in pregnancy from the Department of Health in England (2009) allows for pregnant women to drink up to 1–2 units of alcohol once or twice a week. Thus, a better choice of response categories in the present study would have included one for this amount of alcohol." A total of 238 women in this study reported drinking daily, but separate results are not given even for these subjects.

The authors state that the key results of the paper are that "Light drinking in pregnancy does not appear to be associated with adverse mental health or academic consequences at the age of 11 years." This same research group had previously reported adverse effects up to age 8 among girls in this cohort, but state that the current analyses do not support adverse academic or behavioral effects at age 11 in either girls or boys. Reviewer Finkel stated: "I remember well the series of previous reports from this group. Some were alarming, raising doubts about what had seemed a sensible position that small, spaced quantities of an alcoholic beverage were unlikely to harm the fetus. This new study seems reliably done, and the conclusions appear sensible."

Should any alcohol intake during pregnancy be discouraged? Forum Co-Director Conibear provided

some interesting insight: "The most important thing from the public's point of view is that The Food Doctor and the UK charity 'New Life,' which helps research related to sick and disabled babies, found that 25% of babies in the UK are unplanned, and 17% of mothers didn't know they were pregnant until eight weeks or more. Therefore balanced advice concerning the effect of alcohol use in pregnancy is crucial to prevent unnecessary concern amongst this group of mothers to be. Although the best advice is to avoid alcohol if you are pregnant, the present research can reassure mothers who drank occasionally without realising that they were pregnant that they had not done long-term harm to their baby."

Forum member Lanzmann added: "The French traditional attitude toward wine consumption during meals can also play a role, as food slows down the increase of blood alcohol level after drinking; this will benefit both the mother and the fetus." She adds: "The French National Nutrition & Health Program's 2nd specific objective is an adequate folate status for every woman during the age of procreation, because folic acid deficiency is very common. In such a case, if a diagnosis of an unplanned pregnancy is not made until after 8 weeks, the mother will still have adequate folate on board during the critical time when the embryo's neural tube closure is occurring (as this is by the 29th day of gestation)."

Reviewer Skovenborg comments: "The question of alcohol consumption during pregnancy is a toxic subject that is not ruled by evidence-based discussion: evidence is outdone by emotions, case reports, and pseudo-scientific arguments like 'no safe threshold for drinking during pregnancy has been documented.' Irrespective of the amount of evidence, the advice of total abstinence will always be the largest trump."

Forum reviewer Van Velden states: "In my country (South Africa), with probably the highest reported incidence in the world of fetal alcohol syndrome, alcohol consumption during pregnancy will always be 'criminalised!'" Reviewer Orgogozo adds: "While wine consumption throughout pregnancy was the usual practice in France in the past, now any drinking during pregnancy is looked upon with much suspicion – mainly on an emotional basis. But, facts are facts, and the present paper is well documented and argued, and I agree with the comments of other reviewers. Deciding on zero intake during pregnancy

is based primarily on beliefs – it has become a moral attitude. This should not take precedence over scientific and factual evidence.”

Reviewer Stockley adds another point: “I think that another important message that should get out is that if a woman decides to consume a small amount of alcohol during pregnancy, she should never binge drink or get drunk. This we know with relative certainty can have adverse effects on the developing fetus, especially in the first trimester, but interestingly, also in the third trimester.”

Forum Summary

A new report from the prospective, population-based Avon Longitudinal Study of Parents and Children (ALSPAC) in the UK is based on investigation of the association between light drinking in pregnancy (<1 glass per week in the first trimester) and child mental health. Mental health was assessed in more than 6,000 children using both parent- and teacher-rated Strengths and Difficulties Questionnaires (SDQs) at age 11 years. Academic outcomes based on Key Stage 2 examination results were measured in more than 10,000 children.

Approximately 40% of women consumed some alcohol but less than 1 glass/week, while 16% reported consuming ≥ 1 glass per week during the first trimester. The authors report that after adjustment, relative to abstainers, there was no effect of light drinking on teacher-rated scores or examination results. In girls, although there was a suggestion of worse outcomes on the parent-rated total score in those exposed to light drinking compared to abstainers, no dose–response relationship was evident. The authors conclude: “Light drinking in pregnancy does not appear to be associated with clinically important adverse effects for mental health and academic outcomes at the age of 11 years.”

Forum reviewers considered this to be a well-done study, with a balanced assessment of results by the authors. Reviewers were surprised at the somewhat arbitrary separation of alcohol consumption: <1 drink per week versus ≥ 1 drink per week. Current guidance about alcohol consumption in pregnancy from the Department of Health in England (2009) allows for pregnant women to drink up to 1–2 units of alcohol once or twice a week, and it would have been preferable to have data presented for drinkers at this level.

Comments on this critique were provided by the following members of the International Scientific Forum on Alcohol Research:

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A clinical trial shows that glucose metabolism is improved more by red wine than by gin

Chiva-Blanch G, Urpi-Sarda M, Ros E, Valderas-Martinez P, Casas R, Arranz S, Guillén M, Lamuela-Raventós RM, Llorach R, Andres-Lacueva C, Estruch R. Effects of red wine polyphenols and alcohol on glucose metabolism and the lipid profile: A randomized clinical trial. *Clinical Nutrition* 2013. Pre-publication. [dx.doi.org/10.1016/j.clnu.2012.08.022](https://doi.org/10.1016/j.clnu.2012.08.022).

Authors' Abstract

Background & aims: Epidemiological data suggest that moderate red wine consumption reduces cardiovascular mortality and the incidence of diabetes. However, whether these effects are due to ethanol or to non-alcoholic components of red wine still remains unknown. The aim of the present study was to compare the effects of moderate consumption of red wine, dealcoholised red wine, and gin on glucose metabolism and the lipid profile.

Methods: Sixty-seven men at high cardiovascular risk were randomized in a crossover trial. After a run-in period, all received each of red wine (30 g alcohol/d), the equivalent amount of dealcoholised red wine, and gin (30 g alcohol/d) for 4 week periods, in a randomized order. Fasting plasma glucose and insulin, homeostasis model assessment of insulin resistance (HOMA-IR), plasma lipoproteins, apolipoproteins and adipokines were determined at baseline and after each intervention.

Results: Fasting glucose remained constant throughout the study, while mean adjusted plasma insulin and HOMA-IR decreased after red wine and dealcoholised red wine. HDL cholesterol, Apolipoprotein A-I and A-II increased after red wine and gin. Lipoprotein(a) decreased after the red wine intervention.

Conclusions: These results support a beneficial effect of the non-alcoholic fraction of red wine (mainly polyphenols) on insulin resistance, conferring greater protective effects on cardiovascular disease to red wine than other alcoholic beverages.

Forum Comments

For many decades, epidemiologic studies have shown a strong inverse association between moderate alcohol intake and both cardiovascular disease and diabetes. In earlier meta-analyses of the association between alcohol intake and diabetes, Howard et al

(1) and Koppes et al (2) showed a 30% or greater reduction in risk of diabetes among moderate drinkers, in comparison with non-drinkers.

Forum member Lanzmann-Petithory pointed out the results of a large international European case-cohort study with 12,403 incident cases of diabetes, where an inverse association between alcohol and diabetes was found.(3) Those investigators concluded: "The inverse association between alcohol consumption and diabetes was more pronounced amongst overweight than normal-weight men and women; wine consumption for men and fortified wine consumption for women were most strongly associated with a reduced risk of diabetes."(3) Further, in a meta-analysis of prospective cohort studies, Koppes et al have shown that, among diabetics, the development of coronary artery disease and death are much lower among moderate drinkers than among abstainers.(4)

Results from previous randomized clinical trials: There have been a limited number of randomized clinical trials comparing the effects of alcohol alone and the effects of the polyphenols (that are especially present in red wine) on glucose metabolism and lipids. The present paper is from an excellent Spanish research group that has been working for many years on the comparison of the effects of red wine and alcohol on health. Their first contributions on this topic derived from a project on Wine and Health supported by the European Commission in the 1990s;(5) Forum member De Gaetano contributed to that paper, which concluded: "After either gin or wine consumption, plasma fibrinogen decreased by 5 and 9%, respectively, and cytokine IL-1alpha by 23 and 21%. The expression of LFA-1 (-27%), Mac-1 (-27%), VLA-4 (-32%) and MCP-1 (-46%) decreased significantly after wine, but not after gin. Wine reduced the serum concentrations of hs-CRP (-21%), VCAM-1 (-17%) and ICAM-1 (-9%)." Subsequent studies by Badia et al have shown other differences between the effects of wine and alcohol, as the authors reported: "TNF-alpha-induced adhesion of monocytes to endothelial cells was virtually abolished after red wine consumption but was only partially reduced after gin consumption."(6)

Shai et al randomly assigned 109 patients (41–74 years old) with established type 2 diabetes who had

previously abstained from alcohol to receive 150 ml wine (13 g alcohol) or nonalcoholic diet beer (control) each day during a 3-month multicenter trial.(7) They reported that the **“initiation of moderate daily alcohol consumption reduced fasting plasma glucose but not postprandial glucose, with more favorable benefits among patients with higher A1C levels.”** Joosten et al carried out a clinical trial comparing white wine and grape juice and found that **“moderate alcohol consumption for 6 weeks improves insulin sensitivity, adiponectin levels, and lipid profile in postmenopausal women.”**(8) More recently, another study by Estruch and colleagues comparing the effects of different beverages on health reported: **“Compared to gin, red wine intake has greater antioxidant effects, probably due to its high polyphenolic content.”**(9)

Chiva-Blanch et al recently reported on an earlier trial among 67 high-risk, male volunteers, where wine versus gin were compared for effects on other mechanisms of cardiovascular disease.(10) They concluded from that study: **“The results suggest that the phenolic content of red wine may modulate leukocyte adhesion molecules, whereas both ethanol and polyphenols of red wine may modulate soluble inflammatory mediators in high-risk patients.”**

Specific comments on the present study: The present trial was carried out among subjects at high risk of cardiovascular disease (from family history, diabetes, hypertension, dyslipidemia, or obesity) and involved cross-over interventions with red wine (RW), largely de-alcoholised RW (DRW), and gin. The RW and gin were given in a dosage that was the equivalent of approximately 30 grams/alcohol per day; the DRW contained almost exactly the same polyphenol content as the RW. Each intervention was administered for 4 weeks, with the order of administration assigned randomly.

Forum members were unanimous in agreeing that this appeared to be a very well-conducted randomized trial. Of necessity, the beverages being consumed were not blinded. However, dietary records, blood tests, and repeated 24-hour urine collections confirmed excellent compliance with the beverages administered.

The key findings are that both RW and gin raised HDL-cholesterol and apolipoprotein A levels, indicating that the alcohol contained in the beverages is the main determinant of the changes in these lipids. However, the decrease in insulin levels and HOMA-

insulin resistance related most strongly to RW, with less effect from DRW and even less of an effect from gin. This suggests that while there is some effect from alcohol, polyphenols may be even more important in improving glucose metabolism. None of the interventions affected fasting glucose levels. In addition, the RW intervention was associated with improved levels of lipoprotein(a).

Reviewer Van Velden commented: **“This is a very interesting study, and there are similarities in it to our own study on the comparison of red wine vs brandy consumption in relation to genetic risk factors for cardiovascular disease correlated with the lipoprotein profile, oxidative stress and inflammation. Both the wine and brandy interventions resulted in a significant increase in HDL-cholesterol. These levels increased with alcohol intake in both the presence and absence of the E4 allele of the Apolipoprotein E polymorphism. An increase of triglyceride levels with alcohol intake was only seen in HFE mutation-positive individuals. The level of total glutathione as an indicator of redox status was significantly decreased only after the brandy intervention when compared to the baseline. It was concluded that alcohol has a protective effect against cardiovascular risk factors, while red wine has an additional benefit that may be ascribed to the presence of polyphenolic antioxidants in red wine.”**

Forum member Waterhouse agreed that this was a very well done clinical trial on disease markers for both cardiovascular disease and diabetes. **“The only comment I have is that these are markers and not endpoints of disease or mortality. This is done because it is so difficult to undertake such a study with chronic disease due to the very long time such a trial would need to be conducted. However, these results and Estruch’s success with the Mediterranean diet (11) suggest that a controlled trial of wine and alcohol for disease outcomes should be attempted.”**

Reviewer Klatsky agreed that this was an interesting study, especially because of the insulin resistance data. **“It joins the substantial number of reports presenting data suggesting that drinkers of red wine have more favorable levels of various markers of potential risk of atherothrombotic disease, compared with drinkers of other alcoholic beverages. However, without clinical endpoints, these reports indicate only hypothetical or potential benefit for disease.”**

Klatsky added: "It would have been more interesting yet if the study had white wine and beer arms. There are epidemiologic data indicating lower risk of events in drinkers of both of these, with quite compelling data in several beer-drinking populations. It seems likely that most of the subjects who are described as 'moderate consumers' were wine drinkers before the study. (I wonder whether they drank the dealcoholised wine and gin slowly with dinner, as wine is usually ingested.) In any case, the data in this report do support possible benefit from alcohol, with possible additional benefit from red wine phenolics. The relative magnitude of these two areas of benefit remains unclear, but the preponderance of evidence favors the idea that alcohol has the major role."

Forum reviewer Ursini stated: "Obviously I must rate this study as well conducted and convincing. The issue of what is good or bad for your health can best be addressed by intervention studies with carefully done statistics." **He added:** "What is needed now is more understanding of the biological and nutritional nature of non-essential phytochemicals."

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Forum Summary

To compare the effects of moderate consumption of red wine, dealcoholised red wine, and gin on glucose metabolism and the lipid profile, a group of Spanish investigators carried out a randomized control trial among 67 men at high cardiovascular risk. All received each of red wine (30 g alcohol/d), the equivalent amount of dealcoholised red wine, and gin (30 g alcohol/d) for 4 week periods, in a randomized order. While fasting glucose levels were not affected, mean adjusted plasma insulin and HOMA-IR decreased after red wine and dealcoholised red wine, but not after gin. HDL cholesterol, Apolipoprotein A-I and A-II increased after red wine and gin. Lipoprotein(a) decreased after the red wine intervention. The authors conclude that their results support a beneficial effect of the non-alcoholic fraction of red wine (mainly polyphenols) on insulin resistance, thus greater protective effects on cardiovascular disease from red wine than from other alcoholic beverages.

Forum members were unanimous in considering this to be a very well-done and important trial. It supports a huge amount of observational data from epidemiologic cohort studies that have shown that subjects who consume moderate amounts of alcohol tend to have much lower risk of developing diabetes. Further, patients with diabetes who drink moderately have much lower risk of subsequent cardiovascular disease and lower mortality. Studies such as this one help scientists understand the mechanisms by which moderate drinking, especially of wine, can reduce the risk of metabolic and vascular diseases.

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Alcohol intake and triglycerides/ high-density lipoprotein cholesterol ratio in men with hypertension

A study by Ichiro Wakabayashi published in the American Journal of Hypertension states that the triglycerides/high-density lipoprotein cholesterol (TG/HDL-C) ratio has been proposed to be a good predictor of cardiovascular disease. The relationship between alcohol consumption and TG/HDL-C ratio in patients with hypertension is unknown.

The study identified normotensive and hypertensive men aged 35–60 years who were divided by daily ethanol intake into non-, light (<22g/day), heavy (≥22 but <44g/day), and very heavy (≥44g/day) drinkers.

The TG/HDL-C ratio was significantly higher in the hypertensive group than in the normotensive group. Both in the normotensive and hypertensive groups, TG/HDL-C ratio was significantly lower in light, heavy, and very heavy drinkers than in nondrinkers and was lowest in light drinkers.

In the hypertensive group, odds ratios (ORs) for high TG/HDL-C ratio (≥3.75) in light, heavy, and very heavy drinkers vs. nondrinkers were significantly lower ($P < 0.01$) than a reference level of 1.00 (light drinkers: OR = 0.49, 95% confidence interval (CI) = 0.40–0.59; heavy drinkers: OR = 0.59, 95% CI = 0.52–0.67; very heavy drinkers: OR = 0.70, 95% CI = 0.61–0.80) and were significantly lower than the corresponding ORs in the normotensive group.

The ORs for hypertension in subjects with vs. subjects without high TG/HDL-C ratio were significantly higher than the reference level in all the alcohol groups and were significantly lower in light, heavy, and very heavy drinkers than in nondrinkers.

The study results suggest that there is an inverted J-shaped relationship between alcohol and TG/HDL-C ratio in individuals with hypertension and that alcohol weakens the positive association between TG/HDL-C ratio and hypertension.

Source: Alcohol Intake and Triglycerides/High-Density Lipoprotein Cholesterol Ratio in Men with Hypertension. Ichiro Wakabayashi. Am J Hypertens first published online March 21, 2013.

Dose- and gender-dependent interactions between coffee consumption and serum GGT activity in alcohol consumers

Coffee consumption has been recently linked with decreased blood gamma-glutamyltransferase (GGT) activities and protection from alcoholic liver disease.

To explore the relationship and dose response, researchers assessed the impacts of coffee and alcohol intake on serum GGT activity in apparently healthy men and women with varying levels of coffee and alcohol consumption. Data on coffee, alcohol consumption and serum GGT activities were collected from 18,899 individuals (8,807 men and 10,092 women), mean age 48 years, range 25–74 years, who participated in a large national cross-sectional health survey. Body mass index, smoking index and age were used as covariates in all analyses.

Among the study population, 89.8% reported varying levels of coffee consumption; 6.9% were abstainers from alcohol, 86.1% moderate drinkers, 3.7% heavy

drinkers and 3.3% former drinkers.

In men, the elevation of GGT induced by heavy drinking (>280 g/week) was found to be significantly reduced by coffee consumption exceeding 4 cups per day. A similar trend was also observed among women, which however, did not reach statistical significance.

The authors hypothesise that coffee modulates the effect of ethanol on serum GGT activities in a dose- and gender-dependent manner. They state that these observations should be implicated in studies on the possible hepatoprotective effects of coffee in alcohol consumers.

Source: Dose- and Gender-dependent Interactions between Coffee Consumption and Serum GGT Activity in Alcohol Consumers Danielsson J, Kangastupa P, Laatikainen T, Aalto M, Niemelä O. *Alcohol* 2013 Mar 14.

Diets of drinkers on drinking and non-drinking days: NHANES 2003–2008

Authors of a US study state that alcohol may affect dietary intake. However, little is known about diets on drinking days in the US population. The study objective was to determine whether the diets of drinkers differ on drinking compared with non-drinking days.

Data were drawn from the 2003–2008 NHANES Mobile Examination Center interview. 1,864 current drinkers (1126 men and 738 women) completed two 24-h dietary recalls, one of which was on a drinking day and the other of which was on a non-drinking day. Sex-specific repeated-measures analyses that were adjusted for dietary recall order and recall day of the week were used to compare within-individual differences in energy, nutrient, and food-group intakes. Analyses were weighted to produce representative estimates.

The study found that, on their drinking (compared with non-drinking) days, men consumed an excess 168 non-alcohol kcal, which was reflected in higher

intakes of nutrients including total protein, total fat, saturated fat, monounsaturated fat, potassium, and sodium.

Men also had higher intakes of food groups including meat, white potatoes, and discretionary oil and solid fat and lower intakes of total fruit and milk. Women did not consume excess non-alcohol kilocalories but had higher intakes of total fat, monounsaturated fat, polyunsaturated fat, potassium, and discretionary oil and solid fat and lower intakes of milk and milk products.

The authors conclude that these mostly moderate drinkers had poorer diets on drinking days. Same-day associations between alcohol and diet could be useful targets for public health efforts to improve dietary intake.

Source: Diets of drinkers on drinking and nondrinking days: NHANES 2003–2008. Rosalind A Breslow, Chung M Chen, Barry I Graubard, Tova Jacobovits, and Ashima K Kant *Am J Clin Nutr* May 2013.

Study suggests that alcohol consumption has no impact on breast cancer survival

A study has identified that breast cancer survivors who consume alcohol in moderation may have a reduced risk of dying from heart disease.

Although previous research has linked alcohol consumption to an increased risk of developing breast cancer, a new study has found that drinking before and after diagnosis does not impact survival from the disease. In fact, a modest survival benefit was found in women who were moderate drinkers before and after diagnosis due to a reduced risk of dying from cardiovascular disease, a major cause of mortality among breast cancer survivors.

The study was based on data from almost 23,000 women who participated in the Collaborative Breast Cancer Study, a National Cancer Institute-sponsored, multi-site, population-based study of risk factors for breast cancer. The study began in 1988 and was conducted in New Hampshire, Massachusetts and Wisconsin. In a smaller follow-up study between 1998 and 2001, about 5,000 participants were sent a follow-up questionnaire about their alcohol consumption habits after diagnosis.

Among study participants with a history of breast cancer, the authors found that the amount and type of alcohol a woman reported consuming in the years before her diagnosis was not associated with her likelihood from dying from breast cancer. However, the authors also found that those who consumed a moderate level of alcohol (three to

six drinks per week) in the years before their cancer diagnosis were 15 percent less likely to die from cardiovascular disease than non-drinkers. Moderate wine consumption in particular was associated with a lower risk of cardiovascular disease mortality, while no such benefit was evident for consumption of beer or spirits, or for heavier levels of alcohol consumption.

Similar patterns were evident when considering reported alcohol consumption after breast cancer diagnosis. The amount and type of alcohol a woman consumed after diagnosis did not appear to be associated with survival of breast cancer, but those who consumed alcohol in moderation experienced a 39 - 50% lower mortality rate from cardiovascular disease.

Polly Newcomb, PhD, a member of the Public Health Sciences Division and head of the Cancer Prevention Program at Fred Hutchinson Cancer Research Center, led the study. *"Our findings should be reassuring to women who have breast cancer because their past experience consuming alcohol will not impact their survival after diagnosis,"* said Newcomb. *"This study also provides additional support for the beneficial effect of moderate alcohol consumption with respect to cardiovascular disease."*

Source: Alcohol Consumption Before and After Breast Cancer Diagnosis: Associations with Survival From Breast Cancer; Cardiovascular Disease and Other Causes. *Journal of Clinical Oncology*, published online on April 8, 2013.

Moderate alcohol consumption may confer a cardioprotective effect through an AKT/NRF2-dependent mechanism

A review published in *Alcoholism, Clinical and Experimental Research* examines the sequelae of alcohol consumption on the heart, specifically on myocardial contractility, calcium channel signaling, and intracellular signaling pathways.

With the incidence of alcohol-induced cardiac abnormalities being higher than previously thought, it is of increasing importance to elucidate the mechanisms behind them. Here, the cardiac effects of alcohol were not discussed in isolation but in conjunction with other important factors, such as high- and low-density lipoprotein levels and vascular dilatory influences. The researchers explored these mechanisms, in particular, the oxidative stress as

the major contributor, as well as pathways that may prove to be cardioprotective.

The study results demonstrate the involvement of nuclear factor (erythroid-derived 2)-like 2 (NFE2L2/NRF2) as well as AKT that act as regulators of oxidative balance during oxidative stress responses. The authors conclude therefore that alcohol consumption may confer a cardioprotective effect when used in moderation through an AKT/NRF2-dependent mechanism.

Source: The Good, the Bad, and the Ugly with Alcohol Use and Abuse on the Heart. Walker RK, Cousins VM, Umoh NA, Jeffress MA, Taghipour D, Al-Rubaiee M, Haddad GE. *Alcohol Clin Exp Res*. 2013 Mar 25.

The Southern European Atlantic diet is associated with lower coronary risk

The Southern European Atlantic Diet (SEAD) is the traditional diet of Northern Portugal and Galicia, a region in northwest Spain. The SEAD has been associated with a lower risk of non-fatal acute myocardial infarction, but the mechanisms of this association have not yet been investigated. A study examined the association between the SEAD and numerous biomarkers of coronary risk, blood pressure and anthropometrics.

A cross-sectional study was conducted in 2008-2010 among 10,231 individuals representative of the population aged 18 years and older in Spain. Diet was assessed with a validated computerized diet history. SEAD adherence was measured with an index including 9 food components (fresh fish, cod, red meat and pork products, dairy products, legumes and vegetables, vegetable soup, potatoes, whole-grain bread, and wine), which ranges from 0 (lowest adherence) to 9 (highest adherence).

C-reactive protein, uric acid, total cholesterol, LDL-cholesterol, HDL-cholesterol, triglycerides, glucose, glycated hemoglobin, insulin, leptin, fibrinogen, were determined in 12-h fasting blood samples, while creatinine and urine albumin were determined in urine.

Mean SEAD score was 2.9 points. Higher SEAD adherence was associated with a lower level of plasma C-reactive protein, plasma triglycerides, insulin, HOMA-IR, urine albumin, urine albumin-creatinine ratio and systolic blood pressure.

This study identifies possible mediators of the effect of SEAD on myocardial infarction, because SEAD is associated with a lower concentration of markers of inflammation and with reduced triglycerides, insulin, insulin resistance, and systolic blood pressure.

Source: *The Southern European Atlantic Diet is associated with lower concentrations of markers of coronary risk.* Guallar-Castillón P, Oliveira A, Lopes C, López-García E, Rodríguez-Artalejo F. *Atherosclerosis*. 2013 Feb.

Phenolic acid intake from moderate Champagne consumption improves spatial working memory in rodents

Although evidence exists for the effects of flavonoid-rich foods on spatial memory in rodents, there are no such data for foods/beverages predominantly containing hydroxycinnamates and phenolic acids. To address this, researchers investigated the effects of moderate Champagne wine intake, which is rich in these components, on spatial memory and related mechanisms relative to the alcohol- and energy-matched controls.

In contrast to the isocaloric and alcohol-matched controls, supplementation with Champagne wine (1.78 ml/kg BW, alcohol 12.5% vol.) for 6 weeks led to an improvement in spatial working memory in aged rodents. Targeted protein arrays indicated that these behavioral effects were paralleled by the differential expression of a number of hippocampal and cortical proteins (relative to the isocaloric control group), including those involved in signal transduction, neuroplasticity, apoptosis, and cell cycle regulation.

The study data suggest that smaller phenolics such as gallic acid, protocatechuic acid, tyrosol, caffeic acid, and caffeic acid, in addition to flavonoids, are capable of exerting improvements in spatial memory via the modulation in hippocampal signaling and protein expression.

The research conclusion is that changes in spatial working memory induced by the Champagne supplementation are linked to the effects of absorbed phenolics on cytoskeletal proteins, neurotrophin expression, and the effects of alcohol on the regulation of apoptotic events in the hippocampus and cortex.

Source: *Phenolic Acid Intake, Delivered Via Moderate Champagne Wine Consumption, Improves Spatial Working Memory Via the Modulation of Hippocampal and Cortical Protein Expression/Activation.* Corona G, Vauzour D, Herculín J, Williams CM, Spencer JP. *Antioxid Redox Signal*. 2013 Apr 3.

A meta-analysis of alcohol consumption and the risk of brain tumours

Authors of an Italian analysis state that alcohol is capable of traversing the blood-brain barrier and is thus a possible risk factor for brain cancer. Several epidemiological studies have been published on the issue, but with inconsistent findings.

Researchers identified a total of 19 studies providing risk estimates for total alcohol or specific alcoholic beverages. Pooled estimates of the relative risks (RR) and 95% confidence intervals (CI) were calculated using random-effects models.

The pooled RR of brain cancer for alcohol drinkers versus non-drinkers was 0.97 (95% CI 0.82-1.15; based on 12 studies). Moderate (<2 drinks/day) and heavy alcohol drinkers had RRs of 1.01 (95% CI 0.81-1.25) and

1.35 (95% CI 0.85-2.15), respectively. With reference to specific alcoholic beverages, the RRs were 1.01 (95% CI 0.70-1.48) for wine, 0.96 (95% CI 0.82-1.12) for beer, and 1.20 (95% CI 1.01-1.42) for spirit consumption. The RRs for drinkers versus non-drinkers were 0.93 (95% CI 0.81-1.07) for glioma and 0.71 (95% CI 0.45-1.12) for meningioma.

The authors conclude that alcohol drinking does not appear to be associated with adult brain cancer, though a potential effect of high doses deserves further study.

Source: A meta-analysis of alcohol consumption and the risk of brain tumours. Galeone C, Malerba S, Rota M, Bagnardi V, Negri E, Scotti L, Bellocco R, Corrao G, Boffetta P, La Vecchia C, Pelucchi C. Ann Oncol. 2013 Feb;24(2):514-23.

Depression may prevent the cardiovascular benefits of alcohol in men

According to researchers at Duke Medicine, depression may inhibit the anti-inflammatory effects typically associated with physical activity and light-to-moderate alcohol consumption.

C-reactive protein (CRP) is a biomarker that predicts future risk of heart disease and other chronic inflammatory conditions. Physical activity and drinking in moderation have each been shown to lower the risk of cardiovascular disease and type 2 diabetes. These behaviours also reduce inflammation, which is demonstrated through lower levels of CRP. In contrast, depression is associated with elevated CRP and increased risk of heart disease and type 2 diabetes.

Researchers gathered information from 222 nonsmoking, healthy adults with no history or diagnosis of psychiatric conditions. They recorded the amount of alcohol the participants consumed, defining light-to-moderate drinking as about half a drink per day for women and one daily drink for men. Participants reported how many hours of physical activity they did in the past week in activities such

as walking, playing tennis, and exercise classes. Researchers also measured CRP levels through blood samples and evaluated the participants' depressive symptoms.

Results suggest that untreated depression hindered the anti-inflammatory effects of drinking in moderation and exercise. Participants who were physically active generally had lower CRP levels, with the exception of those who were depressed, who saw no beneficial effect on CRP levels. Light-to-moderate alcohol consumption was associated with lower CRP, but only in men who were not depressed. Men with symptoms of depression did not see the benefits of light-to-moderate alcohol consumption.

Depression did not make a statistically significant difference among women who consumed light to moderate amounts of alcohol, nor those who did not drink or only drank infrequently.

Source: Depression inhibits the anti-inflammatory effects of leisure time physical activity and light to moderate alcohol consumption. Suarez EC, Schramm-Sapyta NL, Vann Hawkins T, Erkanli A. Brain Behav Immun. 2013 Mar 26.

Alcohol, fibromyalgia, and quality of life

A study in the journal *Arthritis Research & Therapy* found that low and moderate drinkers of alcohol reported lower severity of symptoms of fibromyalgia than teetotalers, but too much alcohol reversed this effect.

The chronic pain of fibromyalgia is thought to affect one in 20 people worldwide but there is no known cause or cure. It often goes hand in hand with fatigue and sleep problems, headaches, depression and irritable bowel and bladder problems. Treatment is based around pain management and lifestyle changes.

Researchers from the Mayo clinic in the US and the University of Michigan surveyed patients with fibromyalgia to examine the association between alcohol and their severity of symptoms and quality of life.

Low and moderate drinkers had better scores for physical function, ability to work, the number of work days missed, fatigue and pain, than people who abstained. Moderate drinkers who had between

three and seven standard drinks (14g in the US) a week seemed to have less pain than low or heavy drinkers. Similar results were seen for the quality of life scale including social functioning, vitality and general health.

Dr Terry Oh, who led this study said, "Gamma-Aminobutyric Acid (GABA), an inhibitory neurotransmitter, is low in the brain in fibromyalgia, which may go some way to explain why the nervous system reaction to pain is amplified. Alcohol binds to the GABA receptor in the central nervous system, which in turn may turn down pain transmission. However the effects of alcohol may also be due to improved mood, socialisation and tension, and while moderate drinkers have fewer symptoms there are still many questions about how this happens."

Source: Association between alcohol consumption and symptom severity and quality of life in patients with fibromyalgia. Chul H Kim, Ann Vincent, Daniel J Clauw, Connie A Luedtke, Jeffrey M Thompson, Terry D Schneekloth and Terry H Oh. *Arthritis Research & Therapy* 2013, 15:R42 doi:10.1186/ar4200

Alcoholic beverage consumption by adults compared to dietary guidelines

The 2010 Dietary Guidelines for Americans (DGA) state that if alcohol is consumed, it should be consumed in moderation, which is defined as up to two drinks in a single day for men and one drink for women. (1 drink=14 g of ethanol).

A study by Eric Rimm, Associate Professor of Epidemiology and Nutrition at the Harvard School of Public Health and colleagues estimated the percentages of adults who, on a given day, drank more than these limits and the percentages who drank too heavily; that is, more than four drinks for men and more than three for women.

The study analysed dietary intake data from the National Health and Nutrition Examination Survey, 2009-2010. 24-hour dietary recalls were collected from 2,740 men and 2,941 women, age 21 years and older. Results were weighted to be nationally representative. Estimated mean daily intake was 1.2 drinks for men and 0.4 for women.

Results of the analysis indicated that on a given day, 36% of men and 21% of women consumed alcohol. 82% of men and 89% of women did not exceed the DGA's limits, 7% of men had more than four drinks, and 3% of women had more than three, amounts defined as heavy. The percentages who drank more than the DGA's limits varied by age group and were highest among men age 31 to 50 years and women age 51 to 70 years.

The authors state that excessive drinking is an important health problem and is not limited to college-age individuals. Registered dietitians and other health professionals should be aware of excessive drinking by the adult US population.

Source: Alcoholic beverage consumption by adults compared to dietary guidelines: results of the National Health and Nutrition Examination Survey, 2009-2010 Guenther PM; Ding EL; Rimm EB *Journal of the Academy of Nutrition and Dietetics*. Early online 13 Feb 2013.

The Alcohol Research UK annual conference - Alcohol and British Society

The Alcohol Research UK annual conference recently took place at the Wellcome Conference Centre in London on 12th March, exploring Alcohol and British Society.

Health and Inequalities

Professor Mark Bellis's presentation explained how the poorest 20% of people in Britain suffered twice the levels of alcohol related harm as the most affluent 20% – despite reporting similar levels of alcohol consumption. Researchers call this the "alcohol harm paradox". Professor Bellis from Liverpool John Moores University, examined some of the ways this can happen. He showed how the same weekly consumption of alcohol can result in different levels of injury and disease depending on whether the alcohol is consumed a little each night or in just one or two heavier drinking sessions. He also examined how the equivalent of 360 million shots of spirits a week were unaccounted for in national surveys of what people reported drinking and why these "hidden drinks" may be part of the explanation for the alcohol harm paradox.

Drinking Patterns and Cardio-protective Effects?

The impact of occasional Heavy Sessions

Mon	Tue	Wed	Thurs	Fri	Sat	Sun
						

Lighter drinking with irregular heavy drinking occasions

45% ↑ Risk of Ischemic Heart Disease

Regular drinking

						
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Any cardio-protective effects of moderate drinking disappear when mixed with irregular heavy drinking occasions

Professor Bellis said, "There are a number of possible explanations for why similar amounts of alcohol appear to cause much greater harm in poorer communities. These include differences in drinking patterns, hidden alcohol consumption and a cumulative health impact from poor diet, housing and other health challenges that leave people more vulnerable to the damages alcohol causes."

Developmental Epidemiology and Prevention

Professor David Foxcroft, Oxford Brookes University, discussed programmes that have a demonstrable impact on social development in young people, in particular The Strengthening Families Programme and The Good Behaviour Game.

Professor Foxcroft suggested that community-oriented developmental prevention can have a significant impact on risk factors associated with drinking, but that we need a better understanding of how prevention effects are moderated by other factors.

A Tale of Two Cities

Professor Jonathan Chick and Dr Jan Gill, Queen Margaret University, Edinburgh, presented new research which suggested that the heaviest drinkers and those with the greatest alcohol problems were most likely to be consuming drinks like white cider and cheap vodka. These were the sorts of drinks that delivered the largest amount of alcohol for the lowest price per unit. This implied that minimum unit pricing would have the greatest effect upon these drinks and thus upon problem drinking.

Digital Approaches to Alcohol Problems

Professor Paul Wallace (National Institute of Health Research and UCL) and Mr Stuart Linke (Camden Primary Care Trust and UCL) shared ten years of experience of the Down your Drink programme.

The conference also heard presentations from:

- Professor Robin Davidson, Chair of Alcohol Research UK
- Professor Sir Ian Gilmore, Chair of the Alcohol Health Alliance
- Professor the Baroness Finlay of Llandaff and Velindre NHS Trust

www.alcoholresearchuk.org

Pre-college talk between parents and teens likely to lessen college drinking

A study From Penn State University illustrated that teenage college students are significantly more likely to abstain from drinking or to drink only minimally when their parents talk to them before they start college, (using suggestions in a parent handbook). The 22-page handbook developed by Robert Turrisi, professor of biobehavioral health, Penn State included an overview of college student drinking, strategies and techniques for communicating effectively, ways to help teens develop assertiveness and resist peer pressure and in-depth information on how alcohol affects the body. (<http://ase.tufts.edu/healthed/documents/parentHandbook.pdf>).

“Over 90% of teens try alcohol outside the home before they graduate from high school,” said Turrisi. “It is well known that fewer problems develop for every year that heavy drinking is delayed. Our research over the past decade shows that parents can play a powerful role in minimising their teens’ drinking during college when they talk to their teens about alcohol before they enter college”.

The study aimed to determine the best timing and dosage for delivering the parent intervention. Turrisi said, “For timing, we compared pre-college matriculation to after-college matriculation. For dosage, we compared one conversation about alcohol to two conversations about alcohol.”

The researchers recruited 1,900 study participants by randomly selecting incoming freshmen to a large, public northeastern university. Each of the individuals was identified as belonging to one of four groups: nondrinkers, weekend light drinkers, weekend heavy drinkers and heavy drinkers.

Participants completed Web assessments during the summer before college (baseline) and two follow-ups (fall of first and second years). Students were randomized to one of four conditions (pre-college

matriculation [PCM], pre-college matriculation plus boosters [PCM+B], after college matriculation [ACM], and control conditions). Seven indicators of drinking (drink in past month, been drunk in past month, weekday [Sunday to Wednesday] drinking, Thursday drinking, weekend [Friday, Saturday] drinking, heavy episodic drinking in past 2 weeks, and peak blood alcohol concentration <.08) were used to examine a stage-sequential model of drinking and the effects of the intervention conditions on changes in drinking patterns.

Results indicated that the PCM condition was most effective at influencing baseline heavy drinkers’ transition out of this pattern to lower risk patterns at first follow-up, whereas the ACM condition was not effective at preventing drinking escalation for baseline nondrinkers at first follow-up. No decay of effects was observed at long-term follow-up for the PCM condition. Increased dosage of the parental intervention was not significantly associated with either reduction or escalation of use.

The study results underscore the value of pre-college parental interventions and targeted efforts to reduce high-risk drinking among college students. “We know that without an intervention there is movement from each drinking level into higher drinking levels,” Turrisi said. “Our results show that if parents follow the recommendations suggested in the handbook and talk to their teens before they enter college, their teens are more likely to remain in the non-drinking or light-drinking groups or to transition out of a heavy-drinking group if they were already heavy drinkers.”

Source: Evaluation of Timing and Dosage of a Parent-Based Intervention to Minimize College Students’ Alcohol Consumption. Rob Turrisi, Kimberly A. Mallett, Michael J. Cleveland, Lindsey Varvil-Weld, Caitlin Abar, Nichole Scaglione, Brittney Hultgren. *Journal of Studies on Alcohol and Drugs* Volume 74, 2013 > Issue 1: January 2013.

A review of the 2011 General Lifestyle survey

In the UK, the General Household Survey (GHS) and the General Lifestyle Survey (GLF) have, between them, been measuring drinking behaviour for over 30 years. A chapter released by the Office of National Statistics presents information on recent trends over time in drinking behaviour and detailed data for the 2011 survey year.

On the 2011 GLF, respondents were asked two sets of questions about their drinking behaviour resulting in the following two measures of alcohol consumption:

- maximum amount drunk on any one day in the previous seven days;
- average weekly alcohol consumption
- Frequency of drinking during the last week.

Overall, 59% of adults reported that they had consumed alcohol in the seven days prior to interview. 66% of men and 54% of women had consumed a drink on at least one day during the previous week. Men also drank on more days of the week than women: 16% of men and 9% of women had drunk on at least five of the preceding seven days. Also men were much more likely than women to have drunk alcohol every day during the previous week (9% compared with 5%).

The proportions of adults drinking during the last week also varied between age groups. Those in the youngest and oldest age groups (16 to 24 and 65 and over) were less likely than those in the other age groups to report drinking alcohol during the previous week. The proportion who had consumed alcohol in the previous week was lowest among women aged 65 and over (42%), compared with 63% of men in that age group and 60% of women aged 45 to 64.

The age group with the highest proportion of people not drinking at all in the last week was the 16 to 24 group (50%). The proportion of adults who drink every day increased with each age group; just 1% of the 16 to 24 age group had drunk every day during the previous week. This increased to 4% in the 25 to 44 group and then to 9% in the 45 to 64 age group and 13% in the 65 and over age group.

The proportion of adults who exceeded 4/3 units of alcohol on at least one day during the previous week was higher for men (34%) than it was for women (28%). Similarly, the proportion drinking heavily was also greater for men (18%) than for women (12%) as was the proportion drinking very heavily (9% of men and 6% of women).

Among both men and women, those aged 65 and over were significantly less likely than respondents in other age groups to have exceeded 4/3 units of alcohol on at least one day.

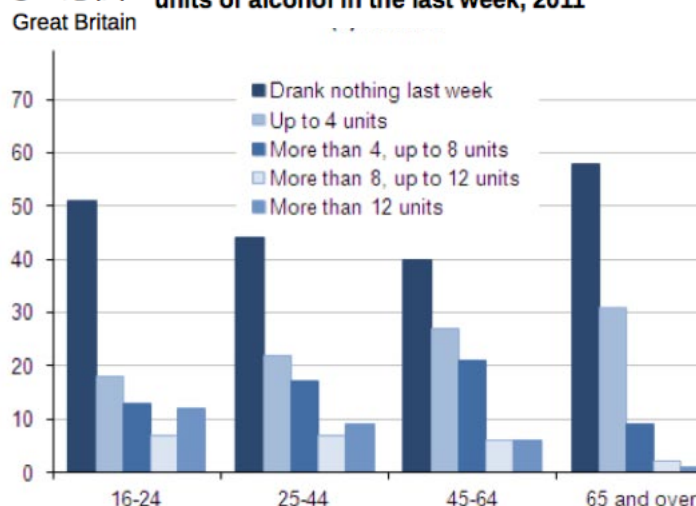
For men, 20% of those over 65 exceeded four units on at least one day during the previous week compared to the younger three age groups (16 to 24 (32%), 25 to 44 (39%) and 45 to 64 (38%)). Among women, 12% of those aged 65 and over exceeded three units on at least one day, significantly less than the younger three age groups (16 to 24 (31%), 25 to 44 (34%) and 45 to 64 respectively (33%)).

Similar patterns were evident for drinking more than twice the guidelines (exceeding 8/6 units) which included 6% of men aged 65 and over, 19% of men aged 45 to 64, 24% of men aged 25 to 44 and 22% of men aged 16 to 24. Among women the estimates for the corresponding age groups were 2%, 12%, 16% and 18%.

Heavy drinking (exceeding 12/9 units) was most prevalent in the 16 to 24 and 25 to 44 age groups. In the 16 to 24 age group, 13% of men and 12% of women drank more than 12/9 units, and 13% of men and 9% of women did so in the 25 to 44 group. In the 45 to 64 and 65 and over groups the estimates were 9% of men and 6% of women and 2% of men and 1% of women respectively. Overall, around half the people who drank heavily on at least one day in the week before interview (exceeding twice the daily drinking benchmarks) drank very heavily on that day (exceeding 3 times the benchmarks).

http://www.ons.gov.uk/ons/dcp171776_302636.pdf

Figure 2.2b: Percentage of women who drank 5, 6 or 7 units of alcohol in the last week, 2011



The UK PSHE consultation review

The UK Department for Education published a summary report of its consultation on PSHE education. Of those contributing to the review, 20% thought that alcohol education should form a compulsory part of the PSHE curriculum and (25%) said PSHE “should play a vital role in tackling a range of public health issues in the area of substance misuse” and were the opinion that “pupils must have knowledge and awareness of the risks involved in taking drugs for social use and of misusing alcohol and tobacco. They believed that pupils must be aware of how these substances could affect their health; and what the impact of the misuse of these substances would be on their lives and those of their families and friends”.

(22%) believed that the primary responsibility for teaching pupils about PSHE matters should be with parents, as they were the best judges to decide at what stages and in which manner such information was passed on to their children. Respondents said parents were ‘teachers’ of their children in the areas of nutrition and physical activity, drugs, alcohol

and tobacco, sex and relationships, emotional well-being, safety and personal finance.

Parliamentary Under Secretary of State for Education (Elizabeth Truss) gave a written statement, which included specific actions for alcohol education. “For drug and alcohol education, we are launching a new evidence-based information service in April 2013 for those working with young people, including schools and teachers. The new service will provide practical advice and tools based on the best international evidence.

In addition, we are asking Ofsted to publish a guide for schools covering effective practice in PSHE, to provide teachers with a range of examples to inform their teaching”.

education.gov.uk/schools/teachingandlearning/curriculum/b00223087/pshe

www.parliament.uk/documents/commons-vote-office/March-2013/21-3-13/3.EDUCATION-Review-personal-social-health-and-economic-education.pdf

Scottish Government to press ahead with lowering drink driving limit

The Scottish Government has announced that following a consultation process, it will now press ahead with plans to lower the Drink Drive Limit.

Almost 75% of respondents to Reducing the Drink Driving Limit in Scotland believed that drink drive limits should be reduced. It was estimated that there are 30 drink-drive related fatalities on Scottish roads each year, with a further 900 injury related accidents caused by drink drivers.

The Scottish Government believes that by reducing the drink driving limit, this will help to reduce these numbers. At present, the legal limit in Scotland is set out 80mg of alcohol per 100ml of blood, as it is across the rest of the UK. The proposal is to reduce this down to 50mg of alcohol in 100ml of blood. This would bring Scotland in line with a number of other European countries

Once this law is implemented, it will mean that England and Scotland will have different drink drive legal limits and there will be a number of practical

issues, which the Scottish Government has to give consideration to:

1. It will have to consult the police to ensure enforcement procedures are robust. Whilst the reduction in the legal limit in blood has been specified, most drivers are arrested and then charged because their breath alcohol level is too high. The correct breath alcohol level (to mirror the blood alcohol level) will have to be determined. It will also mean the police will have to recalibrate all breath test devices which display a “pass” or “fail” (there are some which display a digital reading).
2. The Scottish Government also recognises that drivers passing over the border from England into Scotland may be under the legal limit in England but would be committing an offence in Scotland. This will require driver education schemes.

Once these practical issues have been considered, the plan will go back to the Scottish Parliament to be voted on.

Reduction in street drinking and anti-social behaviour following withdrawal of cheap super-strength drinks

An initiative to crackdown on cheap, super-strength alcoholic drinks has led to a 50% reduction in reports of street drinking and related anti-social behaviour. The campaign, launched in Ipswich, Suffolk, six months ago, has proved so successful it is expected to form a blueprint for cities fighting to crack down on street drinking and alcohol related crime across the country. Two thirds of the town's 122 licensed retailers, including the Co-op, Tesco, Debenhams, Marks & Spencer, BHS, Waitrose, Sainsbury's and Aldi, have so far backed the scheme by voluntarily taking cheap, highly-potent lagers and ciders off the shelves.

As a result, the number of police calls made by members of the public to report concern about street

drinking and related anti-social behaviour dropped to 94 between last September and March, from 191 during the same period the previous year.

Tim Newcomb, assistant chief constable of Suffolk Police, said: "The support we have received from independent and national retailers has been fantastic, and we have found that many have shared our views that removing these products will have a beneficial effect on our communities."

Ipswich Police have already received around 50 enquiries about the Reducing the Strength campaign from forces and councils around the country.

Alcohol charity launches DrinkHelp.ie

Alcohol Action Ireland has launched a new website to assist people find alcohol-related services and information. The website, drinkhelp.ie, also has general consumer information on alcohol, including a drinks calculator and calorie counter. DrinkHelp.ie has been developed by Alcohol Action Ireland, the national charity for alcohol-related issues, in response to consistent demand from people contacting the charity seeking access to alcohol services, as well as information and advice.

DrinkHelp.ie offers users:

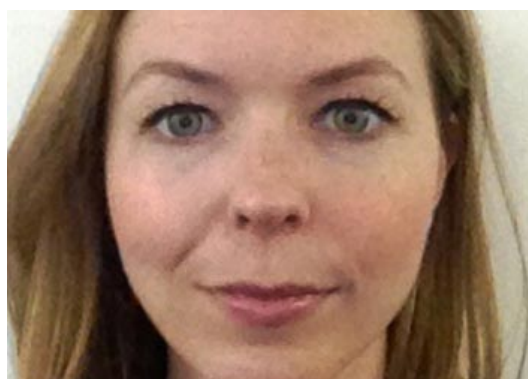
- The Alcohol Service Finder
- A series of leaflets providing information and advice on alcohol, including tips on how to cut down on your drinking, with specific leaflets for families, women, men and older people.



Drinking Mirror, warns women in Scotland of the effects of over consumption

In Scotland, a smartphone app is being used to give women a glimpse of how drinking too much could affect their looks. It comes as part of efforts to target women aged 31 to 44 in a campaign to change attitudes about alcohol. Last year the Scottish government urged drinkers to take smaller glass sizes, to promote health and limit ageing. It has now updated its "drinking mirror" app to show how cutting back could improve your looks over 10 years. Figures from the Scottish Health Survey also indicate more than one in three regularly drink more than is good for their health.

www.drinksmarter.org/handy-tools/drinking-mirror-app



'My World Survey' highlights complexity of pressures on young people in Ireland

Drinkaware.ie has welcomed findings from the recently published 'MyWorld Survey - National Study of Youth Mental Health in Ireland'. The first national study of mental health of Irish youth aged 12 to 25, gives an insight into the complex experience of being young in Ireland.

The CEO of drinkaware.ie, Ms Fionnuala Sheehan said: "While some media reports have highlighted the fact of alcohol being a problem for some young people - and it undoubtedly is - the research paints a more complex, multi-faceted picture."

"Reports to date have had a primary focus on negative factors; this report is very welcome as it takes a more holistic approach and considers protective factors (resilience, optimism, coping, social support, life satisfaction, self-esteem and help-seeking behaviour) in conjunction with risk factors (stress, depression, anxiety, alcohol and drug use, bullying, suicidal behaviour, and gambling behaviour)."

The My World Study found that the majority of adolescents (70%) were functioning well across a variety of mental health indicators and that, in general, adolescents who indicated they were in distress were more likely to report excessive drinking behaviour, to have experienced being bullied at some point, to have reported low availability of a special adult when in need and don't talk about their problems or seek help.

Levels of psychological distress amongst adolescents (12-18/19 years) generally increased with school year, with sixth year students reporting higher levels of difficulty and lower levels of positive wellbeing. Problem drinking, substance use and behavioural problems also increased across the school years and were highest amongst sixth years.

The Study found that the majority of young adults (those aged 19 to 25) were functioning well but experiencing higher levels of distress than adolescents, with approximately 40% with elevated levels of stress and anxiety. 46% reported 'often' being stressed, and 14% being 'highly' stressed by their financial situation. Young adults stressed by finances were more likely to drink excessively and to misuse substances than their peers experiencing less financial stress.

Half of young adults were shown to engage in 'problem drinking'. The Study noted that "Young people that had difficulty in coping are significantly more likely to be classified as engaging in harmful drinking behaviour or having possible alcohol dependence."

Ms. Sheehan commented "The Study shows that mental health difficulties emerge in early adolescence, peak in the late teens and early 20s and, in general, coincide with a decrease in protective factors such as self-esteem, optimism and positive coping strategies; this is a particularly vulnerable period in a young person's life and clearly points to the need for early intervention"

"A key finding highlighted in the report concerns the positive role of 'One Good Adult' in a young person's life and suggests that every young person needs at least one supportive adult in their lives, such as a family member, a relative, a teacher or a close friend to promote their mental health and well-being. In relation to alcohol, one of the key messages in the report is that 'The presence of one good adult may moderate drinking behaviour in adolescence'".

<http://www.headstrong.ie/content/myworld>

'Reclaim Your Weekend' website wins Gold and Silver at 2013 Irish Media Awards

Drinkaware.ie's Reclaim Your Weekend website has won Gold in the Best Research Initiative category and Silver in the Best use of Interactive / Digital Media category at the 2013 Irish Media Awards. The website which encourages consumers to adopt a pacing strategy when drinking, provides information on free things to do and places to go at the weekend.

drinkaware.ie were also awarded Best Charity Website for the ReclaimYourWeekend.ie website at the 2013 Digital Media Awards in March. The Reclaim Your Weekend initiative is part of drinkaware.ie's Pacing campaign, launched in April 2012.

Training for marketing professionals in the EU

SpiritsEUROPE is training marketing professionals across Europe as part of an on-going commitment to the European Alcohol & Health Forum. For the 3rd consecutive year, training workshops are organised at national level with the local stakeholders in production, distribution and advertising to rehearse knowledge and skills on advertising standards in general - and digital media in particular

SpiritsEUROPE state that just because both minors and companies are present on social networks, it does not mean that the two interact with each other. In fact, digital and social media platforms allow for better safeguards and targeting to ensure our commercial communication is intended for adults only, thanks the use of registered users' databases and the nature of the data collected.

The most recent event took place on 11 March in Dublin, where 42 key advertising agencies and their clients gathered with representatives from spiritsEUROPE, Facebook, the Advertising Standards Authority of Ireland, and Central Copy Clearance Ireland.

marketresponsibly.eu

Getting the facts right on underage drinking in the EU

Spirits of Europe have produced a fact sheet on teenage alcohol consumption. 'Getting the facts right on underage drinking' has summary information on trends and current status of underage drinking in Europe, the diversity of consumption patterns in different countries, the principal influences on youth drinking and the most effective means to curb underage drinking.

www.spirits.eu/files/98/factsheet--underage-drinking--to-publish.pdf



The effects of alcohol tax decrease and borders opening in Nordic countries

A study investigated the effects of reductions in alcohol taxation and increases in travellers' allowances on alcohol consumption and related harm in Denmark, Finland, and southern Sweden.

In late 2003 and early 2004, taxes on alcoholic beverages were reduced in Denmark and Finland, and the abolition of quantitative quotas on alcohol import for personal use from other European Union countries made cheaper alcohol more available in Denmark, Finland, and Sweden.

The researchers carried out analyses of routine statistical register data and summaries of results from longitudinal and repeated cross-sectional population surveys and other previous analyses, with northern Sweden as a control site for secular trends.

Results indicate that, contrary to expectations, alcohol consumption increased only in Finland and not in Denmark and southern Sweden, and self-reported survey data did not show an increase in any site. In Finland, alcohol-attributable harms in

register data increased, especially in people with low socio-economic status. Few such effects were found in Denmark and southern Sweden. Self-reported alcohol-attributable problems did not increase at any of the three sites.

The authors conclude that harms measured in register data did tend to increase in the short term with the policy change, particularly in Finland, where the tax changes were broader. But reducing price and increasing availability does not always increase alcohol consumption and harm. Effects are dampened in affluent societies, and other factors may intervene. The results for Finland also suggest some limits for general population surveys in testing for relatively small policy effects.

Source: Room, R., Bloomfield, K., Gmel, G., Grittner, U., Gustafsson, N.-K., Mäkelä, P., Österberg, E., Ramstedt, M., Rehm, J. & Wicki, M. What happened to alcohol consumption and problems in the Nordic countries when alcohol taxes were decreased and borders opened? *Int. Journal of Alcohol and Drug Research*, 2(1), 77-87.

www.ijadr.org/index.php/ijadr/article/view/58/101

Skiers in Austria take risks on the piste

Austrian Road Safety board (KFV) tested 600 skiers at various resorts in Austria and found that one in five people ski having consumed alcohol, and 29% of these skied over the legal limit for driving.

26% of 15-24 year-olds who were tested had drunk alcohol, 24% for the 25-49 age group and to 7% for the over 50s. Among those who had consumed alcohol, 73% said they had drunk something "light" such as beer or shandy, 24% a stronger drink such as wine and 8% a strong winter-warmer like schnapps.

Alexandra Kuehnelt-Leddihn from the KFV said: "People skiing under the influence of alcohol pose an increased risk to themselves and to other people on the slopes... People greatly underestimate the likelihood of an accident. Even a small amount of alcohol can be dangerous."

Police figures show that 27 people have died in accidents with other skiers so far this year, up from 19 at the same point in 2012; the number of registered incidents has fallen from 2,120 in 2012 to 1,742 this year.

Reduced alcohol wines - change needed to EU Common Agricultural Policy

The WSTA reports that it is making strenuous efforts with the Department for Environment, Food and Rural Affairs (Defra) and other parties to include provision for Reduced Alcohol Wine in the next reform of the EU Wine Regime now being discussed in Brussels as part of the wider Common Agricultural Policy (CAP) reform.

Ideally, the trade would like EU Regulations to permit the removal of alcohol from standard wine products whilst (a) maintaining acceptable taste profiles and (b) ensuring an appropriate sales denomination.

Affordability of alcohol in Europe report

A report by the Institute of Alcohol Studies examines the affordability of alcohol in Europe and maps Affordability index to consumption and harm measures for each country. The results indicate that there is no detectable relationship between alcohol affordability and the harm/consumption ratio in the EU.

www.ias.org.uk/resources/papers/occasional/eu-affordability.pdf

Alcohol availability for young people to be reduced in Latvia

With the aim of reducing alcohol consumption among young people, the Latvian Parliamentary Judicial Commission has submitted to the Saeima (Parliament) amendments to Latvian administrative rules.

Latvia has one of the highest alcohol consumption rates among young people in Europe. The proposed changes will make young people liable if they purchase alcoholic drinks underage. This minor offence will be punishable with either a verbal warning or a fine of up to 25 LVL – around 35 Euro – (fine amount will be larger for repeated violation).

In order to combat illegal alcohol trade more effectively, the bill makes property owners liable if illegal activities involving alcohol are noted in their premises.

Amendments also make it a legal requirement for people aged 18 to 25 to provide personal identification documents at the moment of purchase when buying alcoholic drinks.

Fingertip alcohol scanner launched in the UK

The AlcoSense TruTouch, which is being launched at the Commercial Vehicle show in Birmingham, can determine a person's level of intoxication in seconds with just a touch of a finger. The technology has been shown to be 96% accurate. The scanner uses a near-infrared light to measure blood alcohol content in the skin via contact with an optical pad. The light reflected back by the skin is then analysed to determine alcohol concentration in the tissue.

The system can also determine the identity of the user meaning it could be used at entrances or turnstiles, enabling companies in sectors like construction, mining and heavy industry to test every employee before they start work.

The TruTouch is not yet certified in the UK.



US federal spending bill boosts ongoing drink drive campaign

US Congress has provided full federal funding for the three components of the ongoing Mothers Against Drunk Driving (MADD) Campaign. The spending bill allows over \$50 million for aspects of the campaign, including:

- \$29 million for three annual high visibility “crackdowns.” Two of these crackdowns are the twice yearly Drive Sober or Get Pulled Over campaigns, which are key to supporting law enforcement efforts to keep drunk drivers off the road. The other is for Click It or Ticket, the seat belt campaign, which also helps reduce drunk driving fatalities, since a seat belt is the best defense against a drunk driver.
- \$20 million dollars for states that pass an all-offender ignition interlock law. Currently, 17 states require interlocks for all offenders. Evidence

suggest that these devices reduce drunk driving by two-thirds while on offenders’ vehicles.

- \$5 million dollars for advanced anti-drunk driving technology. The advanced technology project, known as the Driver Alcohol Detection System for Safety, or DADSS, is part of a cooperative agreement between federal government and the world’s leading automotive companies. The technology that will eventually eliminate drunk driving by making cars that will fail to operate if the driver is impaired. This funding will aid this vital research.

Grants will also be available to states to address other key areas of highway safety, including distracted driving, occupant protection, motorcycle safety, traffic records and improving graduated driver licensing laws.

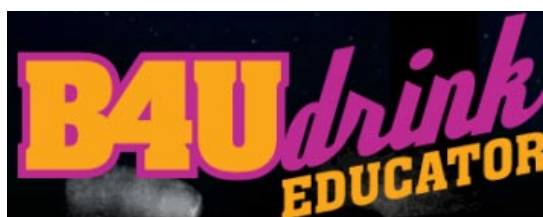
‘B4Udrink’ uses latest science to estimate BAC

To coincide with April’s Alcohol Awareness Month, The Century Council has re-launched an interactive online programme, B4Udrink, offering the latest available science to estimate an individual’s blood alcohol concentration (BAC).

A revised algorithm for B4Udrink now includes the effects of height and age on an individual’s BAC in addition to gender, weight, and alcohol consumed. The newly revised B4Udrink Virtual Bar also illustrates the effect food can have on an individual’s BAC, including how a meal high in fat has little effect on one’s BAC yet a meal high in carbohydrates or protein may decrease an individual’s BAC. In addition to the algorithm, The Century Council re-designed the B4Udrink programme’s interface to be

more mobile-friendly, making it more accessible to young adults on the go.

“The B4Udrink Virtual Bar gives people the ability to virtually explore different scenarios regarding how they think their night might go, discover their drinking limits and plan accordingly. This information empowers individuals to make educated, responsible decisions when going out socially,” said Ralph Blackman, The Century Council’s President and CEO.



US National Football League endorses drink drive campaign

In March The US National Football League (NFL) announced their support for MADD’s Campaign to Eliminate Drunk Driving.

NFL Commissioner Roger Goodell made the announcement stating, “We are pleased to endorse MADD’s campaign and further build upon our partnership to do everything we can to warn players, team personnel and fans about the dangers of drunk driving. We have made progress but have more work to do to ensure that everyone associated with the NFL makes safe, responsible decisions with alcohol and

never gets behind the wheel when they shouldn’t.”

MADD and the NFL began their partnership in 2010. It includes game day designated driver programmes in 11 stadiums, player education and other awareness activities. The NFL plans on convening an alcohol-related summit this year in conjunction with MADD that will include NFL players, coaches, team doctors and executives, counsellors, National Highway Traffic Safety Administration (NHTSA) and the National Collegiate Athletic Association (NCAA).

US survey confirms parent's Influence in kids decision whether to drink alcohol

The Century Council, in recognition of Alcohol Awareness Month, has commissioned a new survey of parents, with at least one child ages 10-18 living in the household. The results reveal both parents and kids cite parents as the leading influence on kid's decisions to not drink alcohol.

89% of parents believe they hold the leading influence over their kids' decisions not to drink at all or to not drink on occasion. A second tier of perceived influences behind parents on their kids' decision not to drink underage includes friends/peers (57%), brothers/sisters (42%), and teachers (40%). When asked to prioritise responsibility, 71% identify my family as having the highest level of responsibility to address underage drinking, well ahead of their child's school, and their community.

"As parents we need to start the discussion about alcohol as early as age 11 and continue having the

discussion often throughout middle school, high school and college," said Ralph Blackman, President and CEO of The Century Council. *"The Century Council provides resources to parents and educators to lead these conversations with their kids."*

The survey indicates most parents are talking to their kids about underage drinking, with only 10% reporting they have not yet had a conversation. When discussing underage drinking, parents are primarily talking about: how alcohol affects the brain and body (67%), drinking and driving is against the law/illegal (64%), alcohol is illegal (58%), and being physically harmed or killed (49%). The survey found that the top conversations among parents and their kids on underage drinking are the same regardless of the age of their children.

www.centurycouncil.org

Drink drive initiative in Uganda

Uganda Breweries (UBL), with their Red Card campaign, are championing zero tolerance to drink driving. The initiative seeks to create awareness of the issue and to influence behavioral change among people who drink and drive. In addition, through their DrinkIQ programme enable trained police officers and bartenders to help patrons to drink responsibly.

The beer company has also engaged transport workers to promote a safe ride home concept where people that have a lot to drink use public transport or hire a special taxi to return them home. The initiative includes the hiring of a replacement driver or professional drivers who can be called at any time to drive patrons safely home in their cars.

Members of Uganda Alcohol industry association met with key stakeholders in the industry to deliberate on issues concerning alcohol quality, marketing and responsible drinking.

"We are creating awareness that will bring behavioural change among our patrons; we want our customers to show responsibility when consuming alcohol." Richard Wejuli Wabwire, the Corporate Relations and Regulatory Affairs Director UBL stated.

Upon its success in Kampala, the beer makers are thinking of rolling out to other parts of the country.

National alcohol policy, Seychelles

The Drug and Alcohol Council (Dac) has recommended the implementation of a national policy to regulate the consumption, production, sale and advertising of alcohol in Seychelles.

The principal secretary of social affairs, Linda William-Melanie, said that the policy would form part of the wider national Renesans Sosyal (Wake Up Call) initiative.

The proposed policy seeks to address five main areas of concern: to significantly reduce the level of alcohol consumption in the country, to encourage responsible drinking behaviour, to ensure that alcohol products are manufactured under hygienic conditions, to ensure that children under 18 are encouraged to make informed decisions about alcohol use as adults, and to inform and educate the adult population on the consequences of excessive alcohol abuse.

Measures suggested in the policy document include tightening the regulations governing the manufacture and sale of traditional baka and lapire, restricting advertisements and promotional activities for alcoholic products, imposing harsher penalties for drivers found to be under the influence of alcohol, and to encourage all workplaces to educate their employees on the dangers of alcohol abuse.

State Attorneys General talk about underage drinking

The Century Council has joined with Attorneys General from across the US to tape Public Service Announcements (PSA) focussing on their new initiative for teen driver safety, IKnowEverything. The PSAs will be distributed in May during National Youth Traffic Safety Month.

iknoweverything.centurycouncil.org

Bill imminent on alcohol ads restrictions in South Africa

In South Africa, a Bill restricting alcohol advertising is likely to be presented to Cabinet in early April Health Minister Dr Aaron Motsoaledi announced.

“There has been a lot of research. Now is time for action,” said Dr Motoaledi, speaking at the launch of the SA Health Review in Pretoria.

Acknowledging that it was going to be tough, he appealed to researchers and academics to stand with him. Motsoaledi said he would continue to take a stand against both alcohol and tobacco.

A creative approach to anti drunk-driving campaigns in Slovakia

Forum PSR-Slovakia launched an original ‘shock campaign’ in October 2012, which is ongoing. Clients in bars receive ‘the bill for their consumption’, which included all costs that may be incurred from drunk-driving: the bill would detail items like “Broken car window repair: €1,600” or “Kidney: €20,000”. The back of the bill states that costs are the result of not drinking responsibly and/or driving under the influence of alcohol. If the client agrees to fill in a short questionnaire, they receive a voucher for a taxi ride.

This campaign - called “How much you wanna pay?” – was carried out in about 400 bars during two months and over 12,000 bills were handed out. In addition, the message was displayed in 1,000 bars and in taxi cars, and had the potential to reach almost 6 million persons through press coverage.



New Zealand safer journeys Action Plan

The New Zealand Government released its Safer Journeys Action Plan 2013-15 in March. The plan includes the introduction of random roadside drug-testing and also outlines proposals for new blood alcohol limits and getting old and unsafe cars off roads.

The action plan includes proposals for different blood alcohol limits for different drivers, such as commercial drivers, drivers with a conviction, and drivers with a certain number of demerit points, as well as for various age groups.

The government will decide early next year whether blood alcohol limits should be reduced.

Diageo Initiative to promote responsible drinking

Diageo has launched a new tool to promote responsible drinking, with the slogan ‘Ask Dave’. The tool gives users useful information and tips on the type and amount of alcohol they consume, as well as their effects through a online calculator, also adapted to be accessed on mobile phones.

When the user selects a drink, Dave will calculate the number of units or grams of alcohol, the time it takes to assimilate the body and the calories involved, according to the company details.

Furthermore, ‘Ask Dave’ allows users to share what they have learned in social networks, and can interact and exchange results and curiosities.

This initiative has been launched to coincide with the start of Easter continuing Diageo’s strategy to reinforce the messages of accountability at special times of travel and celebration.

calculator.drinkiq.com/en-row/gateway



AIM – Alcohol in Moderation was founded in 1991 as an independent not for profit organisation whose role is to communicate “The Responsible Drinking Message” and to summarise and log relevant research, legislation, policy and campaigns regarding alcohol, health, social and policy issues.

AIM Mission Statement

- To work internationally to disseminate accurate social, scientific and medical research concerning responsible and moderate drinking
- To strive to ensure that alcohol is consumed responsibly and in moderation
- To encourage informed and balanced debate on alcohol, health and social issues
- To communicate and publicise relevant medical and scientific research in a clear and concise format, contributed to by AIM's Council of 20 Professors and Specialists
- To publish information via www.alcoholinmoderation.com on moderate drinking and health, social and policy issues – comprehensively indexed and fully searchable without charge
- To educate consumers on responsible drinking and related health issues via www.drinkingandyou.com and publications, based on national government guidelines enabling consumers to make informed choices regarding drinking
- To inform and educate those working in the beverage alcohol industry regarding the responsible production, marketing, sale and promotion of alcohol
- To distribute AIM Digest Online without charge to policy makers, legislators and researchers involved in alcohol issues
- To direct enquiries towards full, peer reviewed or referenced sources of information and statistics where possible
- To work with organisations, charities, companies and associations to create programmes, materials and policies built around the responsible consumption of alcohol.

AIM SOCIAL, SCIENTIFIC AND MEDICAL COUNCIL

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