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Finland

A new proposal by Finland's Ministry of Social Affairs and Health could ban the advertising of alcoholic beverages on TV and radio before 11pm. Currently, adverts for mild alcoholic beverages (up to 22% abv.) are allowed on the radio at any time throughout the day.

Northern Ireland

Tough new penalty points for licensed premises, bans on irresponsible drinks promotions and power of closure on licensed premises have been passed by the Northern Ireland Assembly.

The measures were included in the Licensing and Registration of Clubs (Amendment) Bill. It is expected that the new legislation will be fully operational by the Autumn.

The measures include a new penalty point system for pubs, clubs, hotels and off licences. Five or six penalty points will be issued to those convicted of serving drink to minors. If premises receive ten, they will be closed for a minimum of one week and a maximum of three months.

The Bill gives courts the powers for on the spot closures of licensed premises or registered clubs in the event of disorder or expected disorder for up to 24 hours and powers to make regulations to restrict or prohibit irresponsible drinks promotions.

There is greater flexibility for sports clubs where under 18s will be able to stay in the bar area until 10pm (currently it is 9pm).

Sweden

The Swedish liquor monopoly, Systembolaget may face competition after almost 60 years of state sanctioned monopoly. On 16 December 2010 a report presented to the Ministry of Health and Social Affairs, suggested that producers of alcoholic beverages may obtain the right to sell alcohol directly to the consumer from their own premises - an arrangement labelled "yard sales".

In order for the Government to make yard sales legal, the Alcohol Act would have to be amended, and approved by the Swedish Parliament. If the legislation goes smoothly through parliament, yard sales could take place from early 2012.

Sri Lanka

The Sri Lankan government plans to introduce charges for treating alcohol-related illnesses from February 2011. A union representing doctors in Sri Lanka has protested against government plans to stop free healthcare for those addicted to alcohol. The union says the new measure jeopardises doctor-patient relations because medics are required to provide a health report for each patient.

Netherlands

According to a proposed amendment to the Dutch Licensing and Catering Act, the consumption of alcohol by under 16 year olds in public places will be banned in the Netherlands. It is currently illegal to sell alcohol to under-16s but the amendment will target teenagers drinking in public with fines.

US 2010 Dietary Guidelines released

On the 31st January the Dietary guidelines for the US 2010 were officially launched. US recommendations of 1 drink (14g) for women and 2 drinks (28g) for men a day remain. The following key statements on alcohol are included:

* If alcohol is consumed, it should be consumed in moderation—up to one drink per day for women and two drinks per day for men—and only by adults of legal drinking age.⁵

5. See Chapter 3, 'Foods and Food Components to Reduce', for additional recommendations on alcohol consumption and specific population groups. There are many circumstances when people should not drink alcohol.

'The consumption of alcohol can have beneficial or harmful effects, depending on the amount consumed, age, and other characteristics of the person consuming the alcohol. Alcohol consumption may have beneficial effects when consumed in moderation. Strong evidence from observational studies has shown that moderate alcohol consumption is associated with a lower risk of cardiovascular disease. Moderate alcohol consumption also is associated with reduced risk of all-cause mortality among middle-aged and older adults and may help to keep cognitive function intact with age. However, it is not recommended that anyone begin drinking or drink more frequently on the basis of potential health benefits because moderate alcohol intake also is associated with increased risk of breast cancer, violence, drowning, and injuries from falls and motor vehicle crashes.'

Key Definitions for Alcohol

What is moderate alcohol consumption? Moderate alcohol consumption is defined as up to 1 drink (14g) per day for women and up to 2 drinks (28g) per day for men.

What is heavy or high-risk drinking? Heavy or high-risk drinking is the consumption of more than 3 drinks on any day (42g) or more than 7 per week for women, and more than 4 drinks on any day (56g) or more than 14 per week for men.

What is binge drinking? Binge drinking is the consumption within 2 hours of 4 or more drinks for women (56g or more in two hours) and 5 or more drinks for men (70g or more over 2 hours).

Agriculture Secretary Tom Vilsack and Secretary of the Department of Health and Human Services (HHS) Kathleen Sebelius announced the release of the 2010 Dietary Guidelines for Americans, the federal government's evidence-based nutritional guidance to promote health, reduce the risk of chronic diseases, and reduce the prevalence of overweight and obesity through improved nutrition and physical activity. Because more than one-third of children and more than two-thirds of adults in the United States are overweight or obese, the 7th edition of Dietary Guidelines for Americans places stronger emphasis on reducing calorie consumption and increasing physical activity.

The new 2010 Dietary Guidelines for Americans focus on balancing calories with physical activity, and encourage Americans to consume more healthy foods like vegetables, fruits, whole grains, fat-free and low-fat dairy products, and seafood, and to consume less sodium, saturated and trans fats, added sugars, and refined grains. The guidelines include 23 Key Recommendations for the general population and six additional Key Recommendations for specific population groups, such as women who are pregnant. Key Recommendations are the most important messages within the Guidelines in terms of their implications for improving public health. More consumer-friendly advice and tools, including a next generation Food Pyramid, will be released by USDA and HHS in the coming months. Below is a preview of some of the tips that will be provided to help consumers translate the Dietary Guidelines into their everyday lives:

- Enjoy your food, but eat less
- Avoid oversized portions.
- Make half your plate fruits and vegetables.
- Switch to fat-free or low-fat (1%) milk.
- Compare sodium in foods like soup, bread, and frozen meals – and choose the foods with lower numbers.
- Drink water instead of sugary drinks.

The 2010 Dietary Guidelines are available at www.dietaryguidelines.gov

For more information on the Dietary Guidelines, see www.health.gov/dietaryguidelines and www.healthfinder.gov/prevention

Social aspects and communication regarding alcohol and health via national drinking guidelines

This paper looks at definitions of 'drinks' and 'low risk' or responsible drinking guidelines from different countries and how to balance a message - based on the Canadian, UK, WHO and US guidelines - that accepts that drinking in moderation can form part of a healthy diet and lifestyle. It should be noted that commercial communications regarding the benefits of moderate consumption are banned by advertising and marketing codes across the globe.

The discussion looks at themes common to guidelines, where they exist, as well as at the importance of incorporating messages regarding pattern of drinking, drinking with food, messages for older populations, the family setting, and the role of parents as regards their responsibilities towards their children.

Standard drinks and definitions

Definitions of 'drinks' or 'units of alcohol' vary from country to country, from 8g in the UK, 10g in Australia, 14g in the US and 19.75g in Japan. National guidelines for drinking are standardised for reasons beyond consumers measuring how much they drink themselves. Governments use defined drinks to track how much alcohol people are drinking and trends year to year. Drinks are generally served in well-defined amounts at restaurants and bars, allowing servers and retailers to monitor how much alcohol is being dispensed and ensuring that drink sizes do not vary significantly across venues. For licensing authorities, standard measures are a useful tool for tracking sales. Finally, the strengths of different types of beverage alcohol vary significantly, and using standard measures allows for uniformity.

However, as you will note from table 1, many countries have a maximum recommended gram intake per day without defining unit size.

Based on grams of intake or standard drinks, recommendations on drinking levels for men and women exist in many countries globally. Official guidelines on alcohol consumption are usually produced by a government department, public health bodies, medical associations or NGO's such as the World Health Organisation (WHO). These drinking guidelines advise on levels of alcohol consumption considered "safe," "responsible," or "low-risk" and vary

from 14g – 24 g a day for women and 20 – 32 g a day for men.

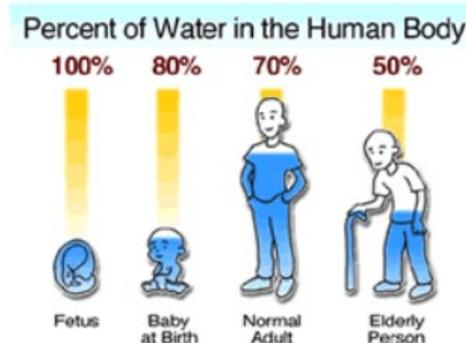
For the many countries where there are no official Government guidelines, such as Belgium, China, Germany, Hungary, India or Russia, it is recommended that the WHO low risk responsible drinking guidelines are followed, which are:

- Women should not drink more than two drinks (10 g) a day on average;
- For men, not more than three drinks (10 g) a day on average;
- Try not to exceed four drinks on any one occasion; and
- Don't drink alcohol in some situations, such as when driving, if pregnant or in certain work situations and abstain from drinking at least once a week.
- Men or women who consistently drink more than these recommended levels may increase risks to their health.

Issues common to different guidelines

Guidelines for older populations

Increasingly we are seeing recommendations submitted to guideline reviews that suggest that the elderly should reduce their alcohol consumption to below daily drinking guidelines for other adults. This is based partially on the fact that they have less body water than younger adults.



On the other side of the coin, moderate, regular consumption, within the guidelines helps protect against cardiovascular disease, cognitive decline and all cause mortality, hence the recent Chapter on Alcohol for the US Dietary Guidelines 2010 states the following:

'In most Western countries where chronic diseases such as CHD, cancer, stroke and diabetes are

Table 1- Responsible/ low risk drinking guidelines

Country	Unit/ standard drink	Recommended guidelines for adult 'low risk' consumption – maximum levels in grams of alcohol
Australia	10g	Australian Guidelines to Reduce Health Risks from Drinking Alcohol (National Health and Medical Research Council Guidelines) For healthy men and women: Drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury. Drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.
Canada	13.6g	Centre for Addiction and Mental Health For men and women: Maximum of 2 units/day (27.2g) Men to not exceed 14 units (190.4g) per week Women to not exceed 9 units (122.4g) per week
France	10g	Based on WHO international guidelines cited by the Health Ministry Men: Maximum of 3 units/day (30g). Women: Maximum of 2 units/day (20g).
Germany	12g	BzGA, Federal Center for Health Education Men: Maximum of 24g/day. Women: Maximum of 16g per day. Two alcohol free days per week are recommended for both men and women.
Ireland	10g	Department of Health and Children Men: Maximum of 21 standard drinks/week (210g). Women: Maximum of 14 standard drinks/week (140g). For both men and women, it is important that they are spread out over the week and not saved for one session or big night out. This equates to a daily low risk limit of 2 or 3 standards drinks for women, or 3 or 4 standard drinks for men, with some alcohol free days over the course of the week. It is advised that plenty of water or non-alcoholic beverages are consumed between alcoholic drinks.
Portugal	14g	National Council on Food and Nutrition Men: maximum of 2-3 units/day (28-42g). Women: Maximum of 1-2 units/day (14-28g).
Slovenia	N/A	Institute of Public Health Men: Maximum of 20g/day, 50g on a special occasion. Women: Maximum of 10g/day, 30g on a special occasion.
Sweden	N/A	Swedish Research Council Men: Maximum 20g/day. Women: Maximum 20g/day.
United Kingdom	8g	UK Department of Health The Chief Medical Officers recommend that you do not regularly exceed Men: 3-4 units/day (24-32g) Women: 2-3 units/day (16-24g)
USA	14g	Dietary Guidelines for Americans 2010 Men: an average daily consumption of up to two drinks per day, but no more than four drinks in any single day. For women: and average daily consumption of up to one drink per day for women, but no more than three drinks in any single day.

the primary causes of death, results from large epidemiological studies consistently show that alcohol has a favorable association with total mortality especially among middle age and older men and women... Moderate evidence suggests that compared to non-drinkers, individuals who drink moderately have a slower cognitive decline with age. Although limited, evidence suggests that heavy or binge drinking is detrimental to age-related cognitive decline.'

The guidelines for the UK are similar - *'The health benefits are more evident from regular daily drinking.'* Specifically, men over age 40 and postmenopausal women are emphasised as recipients of a *'significant health benefit in terms of reduced coronary heart disease mortality and morbidity.'* Middle aged or elderly non-drinkers or infrequent drinkers and especially those at risk for heart disease *'may wish to consider the possibility that light drinking may be of benefit to their overall health and life expectancy.'* Some guidelines suggest one or two alcohol free days a week.

Alcohol free days? Is there a case for a 'liver holiday'?

The Canadian proposals (currently under review) contain a recommendation saying *'Always have some non-drinking days per week to minimise tolerance and habit formation.'* The WHO guidelines suggest one alcohol free day per week. There is very little scientific evidence supporting a guideline to refrain from drinking on one or more days per week, if consumers adhere to the low risk guidelines. The basic science evidence indicates that many of the beneficial effects of moderate drinking on cardiovascular disease or on inflammation last for 24 - 36 hours – such as decrease in platelet adhesion, other coagulation factors, and the activation of certain genes affecting fibrinolysis – and they return to the usual level thereafter. As in many cases, it is matter of dose, hence a more appropriate guideline may be *'if you have drunk to excess, then abstain from drinking for 24 - 48 hours, giving the liver a chance to recover.'*

Increasing moves to stating a maximum number of drinks a day

Reflecting an acknowledgement that people celebrate and party from time to time and so as not to worry them unduly, several guidelines now have

an 'upper limit'.

US guidelines recommend no more than three drinks in any single day for women (42g) and for men no more than four drinks (56g) in any single day for men.

WHO guidelines recommend no more than 4 drinks on one occasion (40g).

Australia's 2008 guidelines recommend average consumption of 20g of ethanol for both men and women and up to 40g of ethanol on occasional days.

Few guidelines mention drinking with meals or pattern of drinking:

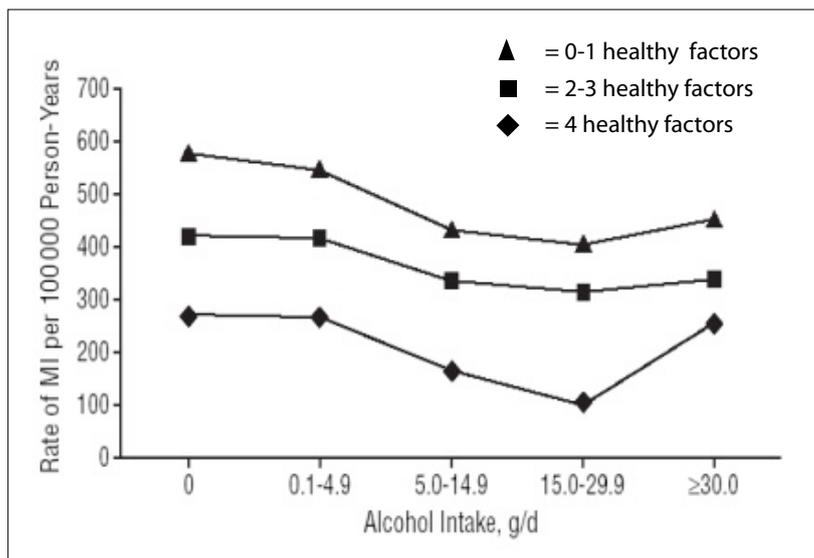
The US Dietary Guidelines 2010, justify this lack of daily recommendation in the following way:

'Because most US citizens do not drink every day, the DGAC also recommends that the definition for moderation be based on this general "average" metric over the course of a week or month instead of an exact threshold of "1 drink per day for women or two drinks per day for men" each day. The Committee further explored whether there was compelling evidence to expand the definition of moderation to include a specific healthy pattern of consumption, but could not find one particular pattern of consumption that had a strong evidence base and could provide more clarity than the recommendation above.'

The UK sensible drinking guidelines moved in 1995 from weekly recommendations of 14 units a week for women and 21 for men to daily guidelines to avoid the idea that it is OK to "save up" your units for one or two big nights a week. This reflects the importance of drinking pattern, although the National Health Service still use weekly limits of 14 units for women and 21 for men in many cases. Most guidelines, demonstrated by table 1 now suggest daily drinking limits.

Healthy Lifestyle a holistic approach

Another important area of research rarely reflected in alcohol guidelines is that moderate consumption should be considered as one component of a healthy diet and lifestyle, and put in context with other factors such as not smoking, maintaining a low BMI, eating a diet rich in fruit and vegetables and low in red meat and saturated fats, exercising and drinking in moderation. Overall, probably only 5-6% (or fewer) of Western populations manage to adhere to these "heart healthy" lifestyle factors.



Drinking at meal times and pacing should be highlighted

Research is increasingly showing the importance of drinking at meal times, as many adverse effects of a high-fat meal occur during what is known as the "post prandial state". Accompanying alcohol intake with food not only decreases the effect of alcohol (lowers the higher blood alcohol level associated with drinking on an empty stomach), but helps counter damaging free radicals. Rich foods increase the state of "oxidative stress" in the body. Dietary antioxidants, including those from red wine, can help reduce the oxidation of cholesterol and lipoprotein, both implicated in cardiovascular disease. Research shows that drinking outside of meal times increases the risk of high blood pressure; and, along with abstinence, is associated with greater all cause mortality.

Continued recognition of moderate drinking being a protective factor for post menopausal women and men over 40

Scientific data now clearly show evidence in support of "low risk" guidelines, rather than a message of "don't drink." The medical evidence for such a position began with scientific publications in the 1970s, with many hundreds of studies since then confirming this association. What has generally been shown is a J-shaped curve, ie: lower risk of most diseases from light-to-moderate drinking, higher risk for heavy drinking. Guidelines from around the world generally reflect overwhelming data showing that drinking in moderation can form part of a healthy diet and lifestyle for adults.

Canadian current Low Risk Drinking Guidelines state that 'men and women consuming up to 14 and 9

standard drinks per week respectively, have a lower risk of early death than abstainers.

UK guidance: *'The health benefits are more evident from regular daily drinking.'* Specifically, men over age 40 and postmenopausal women are emphasised as recipients of a *'significant health benefit in terms of reduced coronary heart disease mortality and morbidity.'* Middle aged or elderly non-drinkers or infrequent drinkers and especially those at risk for heart disease *'may wish to consider the possibility that light drinking may be of benefit to their overall health and life expectancy.'*

US revised guidelines 2010 - *'Total Mortality - In most Western countries where chronic diseases such as CHD, cancer, stroke and diabetes are the primary causes of death, results from large epidemiological studies consistently show that alcohol has a favourable association with total mortality especially among middle age and older men and women.'*

Balance between harms and benefits

These are reflected well in the US guideline alcohol chapter conclusions:

'The hazards of heavy alcohol (ethanol) intake have been known for centuries. Heavy drinking increases the risk of liver cirrhosis, hypertension, cancers of the upper gastrointestinal tract, injury, and violence (USDA, 2000). An average daily intake of one to two alcoholic beverages is associated with the lowest all-cause mortality and a low risk of diabetes and CHD among middle-aged and older adults. Despite this overall benefit of moderate alcohol consumption, the evidence for a positive association between alcohol consumption and risk of unintentional injuries and breast and colon cancer should be taken into consideration. The DGAC recommends that if alcohol is consumed, it should be consumed in moderation, and only by adults.'

The family setting and the role of parents as regards their responsibilities towards their children

The US guidelines state categorically that those under the legal drinking age should not drink.

In the UK Chief Medical Officer, based on the fact that 54% of 15 year olds currently drink, issued guidance for parents in 2009:

'(1) Children and their parents and carers are advised that an alcohol-free childhood is the healthiest and

best option. However, if children drink alcohol, it should not be until at least the age of 15 years

(2) If young people aged 15 to 17 years consume alcohol it should always be with the guidance of a parent or carer or in a supervised environment.(3) Parent and young people should be aware that drinking, even at age 15 or older, can be hazardous to health and that not drinking is the healthiest option for young people. If 15 to 17 year olds do consume alcohol they should do so infrequently and certainly on no more than one day a week.

Young people aged 15 to 17 years should never exceed recommended adult daily limits and on days when they drink, consumption should usually be below such levels'

Source: Donaldson L (2009) Guidance on the consumption of alcohol by children and young people. DH, London

To conclude:

Each year our understanding of the biological, physiological, psychological and social effects of drinking alcohol at different doses grows. In general, national guidelines reflect the medical findings of the j-shaped curve, that is, that approximately 20g a day consumption for women and 30g consumption a day for men is considered as 'safe' or 'low risk' for most healthy adults.

It should be remembered that guidelines are for healthy adults who chose to drink and do not apply to those under the legal drinking age or to pregnant women, or to those with a history of addiction or mental illness or certain other diseases.

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Alcohol consumption and cardiovascular risk factors in older lifelong wine drinkers

An Italian Longitudinal Study states that a protective effect of moderate alcohol consumption on the cardiovascular system has consistently been reported, but limited evidence has been produced on the association of alcohol with metabolic factors in the elderly.

The aim of the study by Persinotto of the department of Environmental Medicine and Public Health, University of Padova, Italy and colleagues was to investigate the association between different levels of current alcohol consumption and cardiovascular risk factors in a representative sample of elderly Italian men, mainly wine drinkers.

The cross-sectional multi-centre study had a population-based sample of Italian men aged 65-84 years, drawn from the Italian Longitudinal Study on Aging (ILSA) cohort. The analyses included 1,896 men. Almost all the drinkers (98%) drank wine as a lifelong habit.

Adjusted ORs for risk levels for cardiovascular factors were estimated, comparing drinkers with teetotalers using multivariate logistic regression models. The authors found that alcohol consumption in older age associated with healthier hematological values of fibrinogen, HDL cholesterol, Apo A-I lipoprotein and insulin, but it was also associated with a worse hematological picture of total, LDL cholesterol levels, and systolic pressure.

The authors conclude that in elderly moderate wine drinkers a noticeably safe metabolic, inflammatory and glycemic profile that might balance higher blood pressure, leading to a net benefit.

Source: Alcohol consumption and cardiovascular risk factors in older lifelong wine drinkers: the Italian Longitudinal Study on Aging Author: Perissinotto E; Buja A; Maggi S; Enzi G; Manzato E; Scafato E; Mastrangelo G; Frigo AC; Coin A; Crepaldi G; Sergi G Journal: Nutrition Metabolism and Cardiovascular Diseases Citation: Vol 20, No 9, 2010, pp647-655

Moderate-to-heavy alcohol intake may increase risk of atrial fibrillation

Kodama S, Saito K, Tanaka S, Horikawa C, Saito A, Heianza Y, Anasako Y, Nishigaki Y, Yachi Y, Iida KT, Ohashi Y, Yamada N, Sone H. Alcohol consumption and risk of atrial fibrillation. A meta-analysis. *J Am Coll Cardiol* 2011;57:427–436.

Authors' Abstract

Objectives: The purpose of this meta-analysis is to summarise the estimated risk of atrial fibrillation (AF) related to alcohol consumption.

Background: Results from observational studies examining the relationship between alcohol consumption and AF are inconsistent.

Methods: A systematic electronic search of Medline (January 1966 to December 2009) and Embase (January 1974 to December 2009) databases was conducted for studies using key words related to alcohol and AF. Studies were included if data on effect measures for AF associated with habitual alcohol intake were reported or could be calculated. The effect measures for AF for the highest versus lowest alcohol intake in individual studies were pooled with a variance-based method. Linear and spline regression analyses were conducted to quantify the relationship between alcohol intake and AF risk.

Results: Fourteen eligible studies were included in this meta-analysis. The pooled estimate of AF for the highest versus the lowest alcohol intake was 1.51 (95% confidence interval: 1.31 to 1.74). A linear regression model showed that the pooled estimate for an increment of 10 g per day alcohol intake was 1.08 (95% confidence interval: 1.05 to 1.10). A spline regression model also indicated that the AF risk increased with increasing levels of alcohol consumption.

Forum Comments

Background: There is no doubt that heavy alcohol intake can lead to cardiac arrhythmias, with the "Holiday Heart Syndrome" being known for more than three decades.¹ This syndrome often includes atrial fibrillation; the syndrome is usually not associated with long-standing heart disease and the arrhythmia tends to resolve when alcohol consumption is ceased.^{2,3} Nissen and Lemberg⁴ stated that even moderate drinking can lead to this syndrome, but others^{5,6} have found no effect on the risk of atrial fibrillation for moderate alcohol intake, only for heavy drinking.

One of the best studies on alcohol consumption and risk of atrial fibrillation is a Danish cohort study (the Danish Diet, Cancer and Health Study) examining the issue among 22,528 men and 25,421 women with a mean follow up of 5.8 years.⁷ The study included a large number of cases with atrial fibrillation, detailed information on potential confounding factors, and complete follow up through nationwide population-

based registries. The results included a modest increase in risk of atrial fibrillation in men with a consumption of >2 drinks/day and no association between alcohol consumption and risk of atrial fibrillation in women.⁷

There is much evidence that heavy alcohol consumption is associated with an increased incidence of atrial fibrillation, among other health risks. Differentiating heavy from moderate consumption not only redefines risk, but also redefines disordered abusive behaviour from a generally healthy dietary habit. It is likely that the pattern of consumption, not often addressed, and other confounders, also play a role in the occurrence of AF, as well as incidence of other adverse events. Binge drinking is associated with a greater incidence of arrhythmias, especially atrial fibrillation.⁸

In a review by Gronroos and Alonso,⁹ the following was reported: "A review of published observational studies and randomised trials identified 4 dietary exposures that had been investigated regarding AF risk: alcohol, fish-derived n-3 polyunsaturated fatty acids, caffeine, and ascorbic acid. Though studies were highly heterogeneous in their design and results, they showed a consistently increased risk of AF in heavy alcohol drinkers, but no risk associated with moderate alcohol intake."⁹

A recent publication from the Framingham Study showed no increase in risk of AF during a 4-year follow up among subjects reporting any level of alcohol consumption.¹⁰ A recent book on atrial fibrillation by Thelle and Lochen from Norway estimated that approximately 2.5 – 5% of the total incidence of AF in Norway may be due to alcohol consumption.¹¹ They stated that <3 units/day for men and <1.5 units/day for women were not associated with increased risk for AF in otherwise healthy hearts.¹¹ An extensive review of experimental, clinical, and epidemiologic data on atrial fibrillation did not find evidence that alcohol is a factor, certainly not a major factor, in the development of atrial fibrillation.¹²

Comments on present study

The present paper is based on both case-control and cohort studies with varying degrees of control for potential confounders. Stronger associations between alcohol and AF were seen in the case-control studies.

A weakness of this paper, and of essentially all meta-analyses, is that there were varying definitions for categories of alcohol consumption, and the highest category of alcohol intake included alcoholics and 6 or more drinks/day for some studies, while the highest category of alcohol intake was $\geq 1-2$ drinks/day in some studies.

The consistent message is that there is a difference between heavy and moderate use of alcohol, between binge drinking and a healthy pattern of drinking, and inherent health risk. The most important question would be: Does light to moderate drinking increase the risk of AF? The conclusion of the authors of this paper seems to be yes, while many other studies find little effect of such drinking.

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Moderate drinking in older adults may reduce mortality risk

Researchers at the University of Southern California analysed the Leisure World Cohort Study to evaluate the relationship between lifestyle practices and cardiovascular disease mortality. The findings suggest that not smoking, moderate alcohol consumption, physical activity, and normal weight are important health promoters in our aging population.

The study explored the association of smoking, alcohol consumption, caffeine intake, physical activity, and body mass index on cardiovascular disease (CVD) mortality in 13,296 older adults and calculated risk estimates using Cox regression analysis in four age groups (younger than 70, 70-74, 75-79, and over 80 years old).

The most important factor was current smoking, which increased risk in all age-sex groups. In women,

alcohol consumption of three or fewer drinks per day was related to decreased, 15-30%, risk in those older than 80 years old; in men, consuming four or less drinks a day was associated with reduced, 15-30%, risk. Active aged 70 or older had 20-40% lower risk. Both underweight and obese women were at increased risk.

The authors state that results in this large elderly cohort with long follow up showing a decreased risk of cardiovascular mortality with several lifestyle practices suggest that maintenance of these is an important health promoter in aging populations.

Source: Lifestyle Practices and Cardiovascular Disease Mortality in the Elderly: The Leisure World Cohort Study. Annlia Paganini-Hill. *Cardiology Research and Practice*, Volume 2011 (2011), Article ID 983764, doi:10.4061/2011/983764

Reduced risk of cognitive impairment by light to moderate intake of alcoholic beverages in Southern Chinese elderly population

Most studies in Caucasian populations showed that current drinkers with light to moderate consumption of alcoholic beverages reduced their risk of cognitive impairment and dementia. However, there is limited information concerning the association between alcohol consumption and cognitive function among older adults in Chinese populations. Recently, researchers from the University of Hong Kong carried out a cross-sectional study of 314 Chinese older participants with an average age of 79.9 years. Participants' socio-demographic information, other diseases, alcohol drinking habits, and a Mini Mental State Examination (MMSE) for cognitive function were obtained by a face-to-face interview.

The average weekly alcohol consumption in the cognitively impaired group was significantly higher than that of the normal cognition group [mean (SD): 861.89 (673.03) versus 241.21 (276.26) grams per week respectively. Drinkers with light to moderate

alcohol consumption were associated with higher MMSE scores than non-drinkers and heavy drinkers. Logistic regression analyses showed that heavy drinkers (>400g alcohol for men and >280g for women) were associated with an increased risk of cognitive impairment (OR = 4.99), while light drinkers and moderated drinkers (< 400g for men and < 280 g for women) were associated with reduced risks (OR = 0.32; OR = 0.17 respectively). Exercise and age were independent protective and risk factors respectively.

The authors conclude that heavy consumption of alcoholic beverages is associated with an increased risk of cognitive impairment while light to moderate drinking is associated with reduced risk.

Source: Association between alcohol consumption and cognitive impairment in Southern Chinese older adult Chan KK, Chiu KC, Chu LW. *Int J Geriatr Psychiatry*. 2010;25:1272-9.

Young rats given red wine polyphenols show less deterioration in endothelial function with ageing

The gradual decrease in endothelial function over time is a key factor in the development of diseases associated with ageing, especially cardiovascular disease (CVD). Many epidemiologic studies suggest greater protection against CVD from wine than from other beverages containing alcohol, with at least one factor being the polyphenols in red wine (RWPs).

The present study in rats found that the administration of red wine polyphenols protected against ageing-induced endothelial dysfunction. As stated by the authors: 'The present findings indicate that regular intake of RWPs in the drinking water starting at young age (16 week-old) prevented the aging-related endothelial dysfunction most likely by reducing the excessive oxidative stress in the arterial wall.' They further suggest an important role of NADPH oxidase and possibly also the angiotensin system in the abnormal vascular response in aging. Their study showed that, 'RWPs intake had also a physiological beneficial effect since it improved the physical exercise capacity of old rats.'

Forum members thought that this was an excellent paper, as it begins to delve into mechanisms by which polyphenols improve health. A mechanism is addressed and results are consistent with the working hypothesis of a specific interaction between polyphenols and peculiar enzymes. There is a satisfying agreement between basic mechanisms and pathophysiology.

Some scientists believe that interventions to improve endothelial function (such as the consumption of red wine or other sources of polyphenols) should begin earlier in life to slow down the endothelial dysfunction that occurs with ageing. This study in rats tends to support such a belief.

Reference: Dal-Ros S, Zoll J, Lang AL, Auger C, Keller N, Bronner C, Geny B, Schini-Kerth VB. Chronic intake of red wine polyphenols by young rats prevents aging-induced endothelial dysfunction and decline in physical performance: Role of NADPH oxidase. *Biochem Biophys Res Commun* 2011;404:743-749

For the full critique of this paper by members of the International Scientific Forum on Alcohol Research, please [click here](#).

Wine polyphenols have a variety of beneficial effects on health

Much of the protection against cardiovascular disease attributed to wine intake may relate not only to the alcohol, but to its polyphenolic constituents. This review article summarises research into the chemistry, bioavailability, metabolism and excretion of polyphenols as well as mechanisms of their action. As stated by the authors, 'These protective effects could be due to one or many components of the complex mixture of bioavailable and bioactive compounds present in red wine including ethanol, resveratrol, flavonols, flavan-3-ols, anthocyanins, phenolic acids as well as their metabolites formed either in the tissues or in the colon by the microflora.' The authors describe their cardioprotective effects, effects on vascular function and atherosclerosis, anti-

platelet effects, effects on myocardial ischemia, and anti cancer and anti-diabetic effects.

The authors conclude that 'Polyphenols are the most abundant antioxidants in the diet and are widespread constituents of wine, fruits and vegetables.' Their review provides an extensive scientific literature on polyphenols in wine; it suggests multiple mechanisms by which such substances may have beneficial effects on health.

Reference: Rodrigo R, Miranda A, Vergara L. Modulation of endogenous antioxidant system by wine polyphenols in human disease. *Clin Chim Acta* 2011;412:410-424

For the full critique of this paper by members of the International Scientific Forum on Alcohol Research please [click here](#).

Regular moderate consumption of alcoholic beverages may lower type 2 diabetes risk

Moderate consumption of alcoholic beverages has been consistently reported to be associated with a lower risk of Type 2 diabetes compared to non-drinkers. Most studies have focused on the average daily alcohol intake or total amount consumed during a week. Therefore, Japanese researchers investigated the relationship between drinking patterns and the incidence of type-2 diabetes. The study population consisted of 10,631 Japanese men, age 40–55 years without type 2 diabetes at entry into the study and each participant was followed until diagnosis of type 2 diabetes or 5 years after the baseline, whichever came first.

Data on the consumption of alcoholic beverages were obtained from questionnaires, where the weekly frequency of alcohol drinking as well as the quantity

per drinking day was addressed. During the follow-up period, 878 cases of type 2 diabetes were confirmed. The association between drinking patterns such as the weekly frequency and the quantity per drinking day, and the risk of type 2 diabetes was assessed and men who consumed 0.1–4.0 US standard drinks (12 g alcohol/drink) per drinking day on 4–7 days weekly had a 26 % lower risk of type 2 diabetes compared to non-drinkers.

The authors concluded that men who consumed alcoholic beverages in light to moderate amounts on 4-7 days per week, have a lower risk of type 2 diabetes compared to non-drinkers.

Source: Relationship between drinking patterns and the risk of type 2 diabetes: Sato KK, Hayashi T, Harita N, et al. the Kansai Healthcare Study. *J Epidemiol Community Health* 2010 Dec 3.

Healthier lifestyles may prevent 340,000 US cancers a year

About 340,000 cancer cases in the United States could be prevented each year if more Americans ate a healthy diet, got regular exercise and limited their alcohol intake, according to the World Cancer Research Fund (WCRF). These types of lifestyle changes could lead to significant reductions in particularly common cancers such as breast (38% fewer cases per year), stomach (47% fewer) and colon (45% fewer).

The research about how a healthy lifestyle can reduce cancer risk was released February 3 to mark World Cancer Day. The WCRF said its findings are supported

by the World Health Organisation's new Global Recommendations on Physical Activity for Health, a report that says that regular physical activity can prevent many diseases, including breast and colon cancer, cardiovascular disease and diabetes.

Other healthy lifestyle habits that reduce the risk of cancer include quitting smoking, avoiding secondhand smoke, avoiding excessive sun exposure, and preventing cancer-causing infections, the WCRF said.

More information visit http://www.wcrf-uk.org/audience/media/press_release.php?recid=138

Contribution of smoking-related and alcohol-related deaths to the gender gap in mortality: evidence from 30 European countries

Colleagues from the Social and Public Health Sciences Unit, Glasgow, investigated the causes of an established gender gap in mortality between men and women in 30 European countries.

Researchers analysed data on all-cause mortality, smoking-related mortality and alcohol related mortality for 30 European countries for the World the World Health Organisation Health for All database. Rates were standardised by the direct method using the European population standard and were for all age groups. The proportion of the gender gap in all-cause mortality attributable to smoking-related and alcohol-related deaths was then calculated.

There was considerable variation in the magnitude of the male 'excess' of all-cause mortality across Europe, ranging from 188 per 100,000 per year in Iceland to 942 per 100,000 per year in Ukraine.

Smoking-related deaths accounted for around 40% to 60% of the gender gap, while alcohol-related mortality accounted for 20% to 30% of the gender gap in Eastern Europe and 10% to 20% elsewhere in Europe.

The study concludes that smoking continues to be the most important cause of gender differences in mortality across Europe, but its importance as explanation for this difference is often overshadowed by presumptions about other explanations. Changes in smoking patterns by gender suggest that the gender gap in mortality will diminish in the coming decades.

Source: Contribution of smoking-related and alcohol-related deaths to the gender gap in mortality: evidence from 30 European countries. Gerry McCartney, et al Tobacco Control published online January 12 2011.

Wine consumption is not associated with weight gain

It is commonly assumed that regular intake of alcoholic beverages in excess accentuates the risk for body weight gain and obesity. Researchers from the University of Navarra (Spain) prospectively evaluated the association between the type of alcoholic beverage intake and weight change in a Mediterranean cohort. They followed 9,318 adults without previous chronic disease for an average of 6.1 years. Validated data on diet including consumption of alcoholic beverages were collected at baseline. Weight was recorded at baseline and updated every 2

years during the follow-up period. After 6 years, 1006 incident cases of overweight/obesity were identified in participants with normal weight at baseline.

The authors concluded that the type of alcoholic beverage can modulate the effect of alcohol intake on the risk of developing overweight/obesity.

Source: Type of alcoholic beverage and incidence of overweight/obesity in a Mediterranean cohort: The SUN project. Sayon-Orea C, Bes-Rastrollo M, Nuñez-Cordoba JM, Basterra-Gortari FJ, Beunza JJ, Martinez-Gonzalez MA Nutrition. 2010 Dec 9.

Drinking moderately seems to minimise mortality risk in the Japanese population

A pooled analysis of six ongoing large-scale cohort studies in Japan estimated the quantitative contribution of alcohol consumption to all-cause and major causes of mortality in the Japanese population.

The analysis included 309,082 subjects with 35,801 deaths during a follow-up period ranging from 7 to 18 years. A J- or U-shaped association was found for the risk of total and major causes of mortality in men, and the risk of total and heart disease mortality in women. Compared to non-drinkers, there was a significantly lower risk of total mortality at an alcohol consumption level of <69 g/day, cancer mortality at <46 g/day, heart disease mortality at <69 g/day and

cerebro-vascular disease mortality at <46 g/day in men, and for total mortality at <23 g/day in women. At a higher consumption, the mortality risk increased linearly with rising dose of alcoholic beverages among drinkers.

The scientists concluded that keeping the intake of alcoholic beverages below 46 g/day in men and 23 g/day in women appears to minimise the mortality risk in the Japanese population.

Source. Impact of alcohol intake on total mortality and mortality from major causes in Japan: a pooled analysis of six large-scale cohort studies. Inoue M, Nagata C, Tsuji I, Sugawara Y, et al J Epidemiol Community Health 2010 Dec 10.

Young people's drinking in the UK - two new reports

The Rowntree Foundation Trust have issued two new reports on young people's drinking in the UK

The first, 'The influence of family and friends on young people's drinking' by Arun Sondhi and Claire Turner is a round-up report examining family and friendship influences on young people's drinking habits, in order to shed light on how the negative aspects of young people's drinking culture in the UK might be changed.

Drawing on five research projects, it concludes that:

- prevention and harm reduction approaches need to take into account how family circumstances vary;
- public health messages need to connect more with the realities of parents' attitudes and practices;
- interventions should consider group behaviour, not just individuals' behaviour;
- the need for more appealing spaces for young people to socialise require further consideration.

The report is available from www.jrf.org.uk/publications/influence-family-and-friends-young-people-drinking

The second report, 'Teenage drinking cultures' by Andrew Percy et al. investigates the influence of friendship groups on teenagers' drinking.

The researchers identified eight groups of friends covering a mix of social class, gender and education, using data from the Belfast Youth Development Study. The 41 participants – aged 18 or 19 were asked about their drinking between the ages of 12 and 18 in order to construct a picture of the groups' drinking culture and how it developed as the friends grew older.

Key points from the report include

- Most young teenagers are drawn to alcohol by curiosity. Often, older siblings or other family members introduce a young teenager to alcohol. This new experience is quickly shared with close friends. Some teenagers start drinking alcohol so as not to be the odd one out amongst their friends.

- When drinking, young people want to get drunk, have fun with their friends and sober up before having to go home. They rarely set out to drink so much that they are sick, lose control or pass out. There is a considerable stigma associated with getting too drunk.
- Groups develop a range of customs (their drinking culture) that surround their alcohol consumption. These customs cover what they drink, how much they drink, where they drink and their intended level of intoxication.
- Most teenagers appear to develop a degree of self-control over their alcohol consumption through trial and error, with mistakes occurring along the way. Teenage drinkers are particularly vulnerable when they change the social context in which they drink alcohol.
- Parental attempts to restrict their teenager's contact with alcohol seldom lead to a reduction in drinking. On some occasions parental actions actually increase the risk of young people getting too drunk.

The report also identifies that certain social activities are associated with lower levels of consumption, such as dating in early teenage years. (It is only when teenagers are a little older and drinking moves indoors that the mix of alcohol and dating is observed). Being part of a sports team or being committed to school are also associated with reduced levels of consumption.

The report finds that when young drinkers get too drunk they can be at risk of a wide range of alcohol-related harm, such as getting into fights or trouble with the police, or engaging in risky sexual behaviour. The authors suggest that teaching young people techniques and strategies to control their drinking may reduce their exposure to alcohol-related harm.

The reports is available from www.jrf.org.uk/publications/teenage-drinking-cultures

German underage drinking cut by half in last 30 years

The results of a study presented in Berlin show that German youths are drinking less. According to a federal study, over the past 30 years, alcohol consumption among German teens has dropped by half. Although officials view the results as largely positive, concern remains about youth binge drinking.

The Federal Center for Health Education (BZgA) said around 13% of adolescents between the ages of 12 and 17 consumed some form of alcohol at least once per week, compared to 21% in 2004 and 25% in 1979. Young adults between the age of 18 and 25 also showed reductions in alcohol consumption, with 35% drinking once per week compared to 67% in 1973.

However the report highlights that of the 7,000 teens and young adults surveyed, 8% of males said they reached intoxication - defined as consuming five or more drinks during one occasion - at least once per

month. Those numbers remained stagnant compared with 2009.

Elisabeth Pott, BZgA director, stated that young adults in German were ill-informed of the consequences of binge drinking and that teenagers connected alcohol merely with 'partying and having fun' and were less aware of the 'serious health effects.'

Asked as to their motivation for drinking, over half of the 12 to 17 group said alcohol made it "easier to approach others." Just under 20% of those asked said they could "forget their problems" after drinking alcohol. The study also showed that peer pressure was a decisive factor in the drinking habits of young people: the more often one's circle friends consumed alcohol the higher one's one alcohol consumption proved to be.

www.bzga.de/forschung/studien-untersuchungen/studien/suchtpraevention/

Rural underage binge drinkers put their health at risk in Germany

A report on youth binge drinking in Germany by Dr Caroline Donath, from the Psychiatric University Clinic at Erlangen and colleagues, examined epidemiological data and analysed alcohol consumption patterns with respect to both urban-rural differences and differences according to migration background.

The study used data from a representative written survey of 44,610 students in the 9th grade of different school types in Germany in 2007/8.

27.4 % of the adolescents surveyed had a migration background. Turkish immigrants accounted for the largest group followed by adolescents who emigrated from former Soviet Union states. The sample included seven large cities, independent smaller cities and rural areas.

The results indicated that a life-time prevalence for alcohol consumption differs significantly between rural (93.7 %) and urban areas (86.6 % large cities; 89.1 % smaller cities) with a higher prevalence in rural areas. 57.3 % of the rural, and 45.9 % of the urban adolescents engaged in binge drinking in the 4 weeks prior to the survey.

Students with migration background of the former Soviet Union showed drinking behaviour similar to that of German adolescents. Adolescents with

Turkish roots had engaged in binge drinking in the last four weeks less frequently than adolescents of German descent (23.6 % vs. 57.4 %). However, in those adolescents who consumed alcohol in the last 4 weeks, binge drinking is very prominent across the cultural backgrounds.

The authors conclude that binge drinking is a common problem behaviour in German adolescents. Obviously adolescents with rural residence have fewer alternatives for engaging in interesting leisure activities than adolescents living in cities. This might be one reason for the more problematic consumption patterns there. Common expectations concerning drinking behavior of adolescents of certain cultural backgrounds ('migrants with Russian background drink more'/'migrants from Arabic respectively Oriental-Islamic countries drink less') were only partly affirmed. Possibly, the degree of acculturation to the permissive German alcohol culture plays a role here.

Source: Alcohol consumption and binge drinking in adolescents: comparison of different migration backgrounds and rural vs. urban residence - a representative study Caroline Donath, Elmar Gräbel, Dirk Baier, Christian Pfeiffer, Deniz Karagülle, Stefan Bleich, Thomas Hillemaier BMC Public Health

Pilot phase of for 'Alcohol-Checker' peer led project in Germany

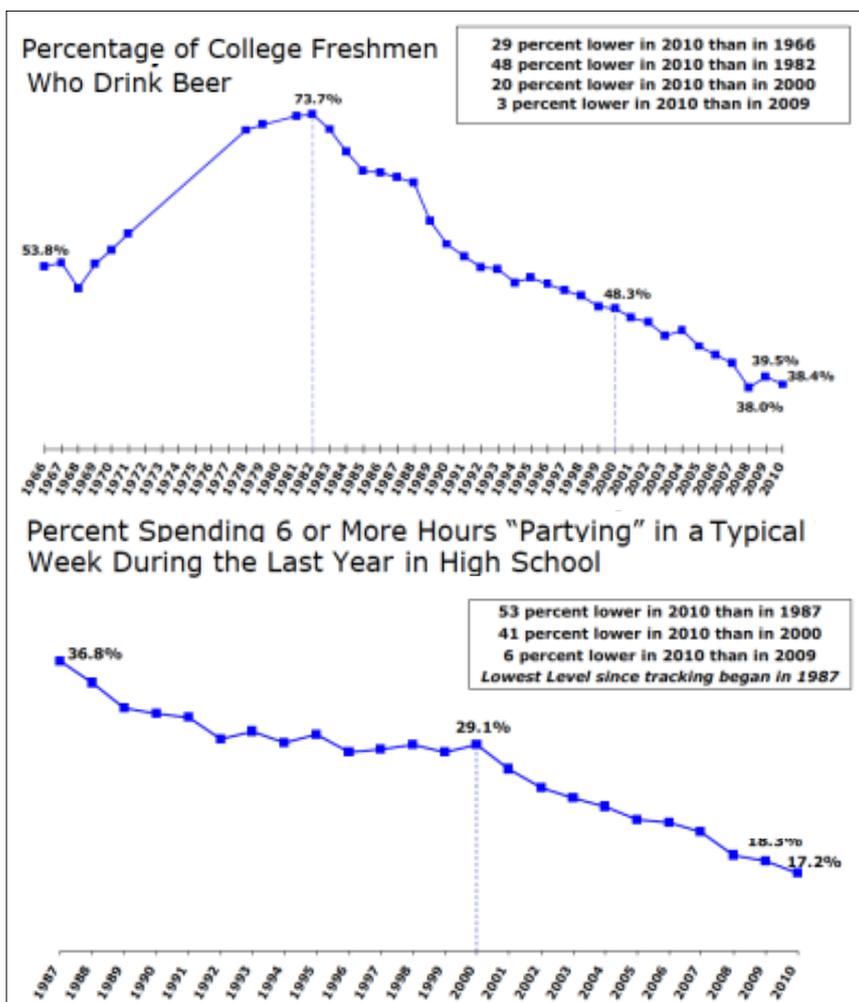
The pilot phase of an alcohol-prevention project commenced in Germany in February. The regional Centre for Addiction Issues (LSSH) with support from the Federal Centre for Health Education (BZgA) is leading the "Alcohol-Checker" project, which encompasses a wide range of alcohol prevention measures for young people in youth recreation.

The project uses 'alcohol experts' aged 16-20 who advise peers as to how to drink responsibly. The programme also offers youth recreational facilities equipment for an alcohol-free cocktail hour or access to an interactive game "Alcohol-Check - One tips".

Dr. Regina Kostrzewa, Director of the LSSH and project director of the project said that the alcohol checker project builds on the proven peer approach and allows the use of current methods of interactive access to aid addiction prevention amongst youths. This approach creates new ways of reaching difficult to reach target groups".

The pilot project starts with 10 seminars in Schleswig-Holstein and will be extended in the summer to other states. The Cocktailbox is in the evaluation phase, but it is planned to roll it out to youth recreational facilities throughout Germany.

US Freshman Survey shows students are drinking and partying less



Results of 2010 Cooperative Institutional Research Programme (CIRP) Freshman Survey were released on January 26th. The survey is the largest and longest running study of American students, and includes responses from over 20,000 students at 279 Baccalaureate universities and colleges. This years report confirms an encouraging continued downward trend in the consumption of alcohol and the amount of time spent 'partying'. However it also notes that students' self rated emotional health is at an all-time low, while the percentage of students who feel frequently overwhelmed is at an all-time high.

The survey is sponsored by UCLA and the American Council on Education and conducted by the Higher Education Research Institute (HERI) at UCLA's Graduate School of Education and Information studies.

Australian government report on teenage drinking

The National Drug Strategy Monograph: 'Australian secondary school students' use of tobacco, alcohol, and over-the-counter and illicit substances in 2008', was released in January by the Acting Minister for Health and Ageing, Mark Butler.

The report found that 8 out of 10 Australian secondary students aged between 12 and 17 years had tried alcohol at some time in their lives and 61% had consumed alcohol in the 12 months preceding the 2008 survey. The proportion of students drinking in the seven days before the survey was around 23%. Involvement with alcohol increased with age, with the proportion of students drinking in the seven days before the survey increasing from 11% of 13-year-olds to 41% of 17-year-olds. In the week before the survey slightly under 20% of all 17-year-old students had consumed alcohol at risky levels (7 or more drinks a day for males, 5 or more drinks a day for females). Premixed spirits were the most preferred beverage among female current drinkers, while beer and spirits were the most preferred beverages for male current drinkers. Adolescents who consumed alcohol in the

previous seven days most commonly obtained their alcohol from their parents (34%) or friends (22%) and consumed alcohol in their own home (31%) or at a party (30%).

The proportion of students aged between 12 and 17 years drinking in 2008 was lower than levels found in 2005 and 2002. The proportion of 12- to 15-year-olds drinking in the week before the survey decreased significantly between 2002 (29%) and 2008 (17%) and between 2005 (22%) and 2008. The proportion of 16- and 17-year-olds drinking in the week before the survey in 2008 (38%) was significantly lower than the proportion found in 2005 (47%) and 2002 (48%). While for both age groups, the proportion of all students drinking at risky levels in the week before the survey was lower in 2008 than in 2005 and 2002, there was no change in the proportion of current drinkers drinking at risky levels between 2002 and 2008.

The report is available from www.nationaldrugstrategy.gov.au/internet/drugstrategy/Publishing.nsf/content/school08

Heavy drinking in older teenagers has long-term and short-term consequences

In a systematic review of current evidence published in PLoS Medicine, the authors-Jim McCambridge from the London School of Hygiene & Tropical Medicine, London, and colleagues-conclude that there is enough evidence to support the theory that reducing drinking during late adolescence is likely to be important for preventing long-term adverse consequences of drinking, as well as protecting against more immediate harms.

Although there is an urgent need for better studies in this area, research to date provides some evidence that high alcohol consumption in late adolescence often continues into adulthood and is associated with long-term alcohol problems, including dependence.

The authors of the current study conducted a comprehensive literature review to identify 54 relevant studies which included at least one quantitative measure of the effects of alcohol, on outcomes in adulthood such as death, alcohol dependence, criminal offences, mental health, educational attainment, and smoking. The majority of

these studies were multiple reports from ten cohorts, half of which were from the US.

The authors found that although there is consistent evidence that higher alcohol consumption in late adolescence continues into adulthood and is associated with alcohol and other problems, most of these studies could not strongly support direct causality because of their weak designs. Furthermore, although a number of studies suggested links with late adolescent drinking to adult physical and mental health and social consequences, the evidence is generally of poorer quality and is insufficient to infer causality.

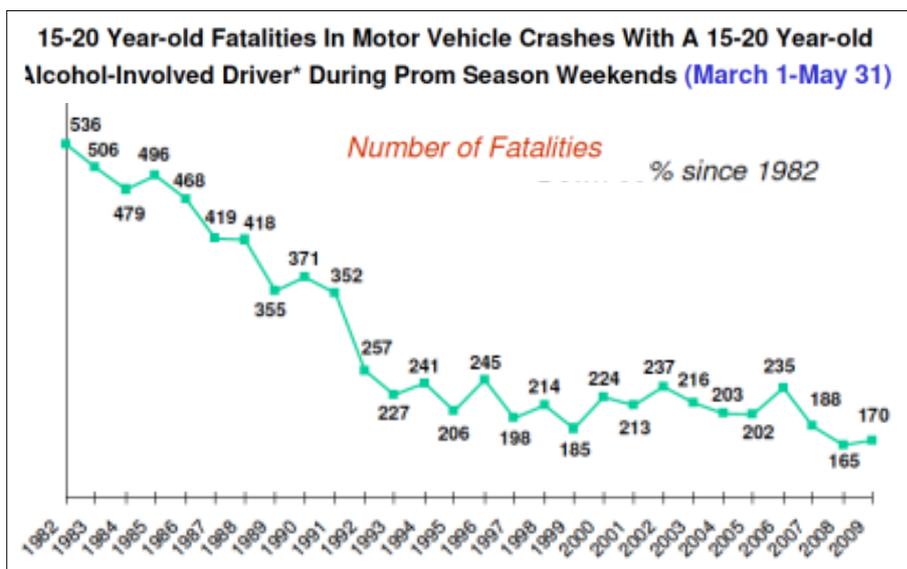
Source: McCambridge J, McAlaney J, Rowe R (2011) Adult Consequences of Late Adolescent Alcohol Consumption: A Systematic Review of Cohort Studies. PLoS Med 8(2): e1000413. doi:10.1371/journal.pmed.1000413

NHTSA report on prom fatalities for 2010

The proms season in the US runs from the beginning of March until the end of May. The latest statistics from the NHTSA show that the number of fatalities of teenage drivers in 2010 was up slightly from 165 to 170, but the trend since 1982 is a dramatic drop from 536 (68%).

A number of initiatives exist to discourage alcohol consumption at proms including www.buzzfreeprom.com (MADD) and www.safesober.com

For more information, visit www.alcoholstats.com/page.aspx?id=136



Alcohol-detecting cars could keep drunk drivers off the road

Researchers in Massachusetts are working on new technology that would prevent a car from starting if the driver is drunk.

The Driver Alcohol Detection Systems for Safety would keep impaired drivers off the road by detecting their blood alcohol content through two potential methods. It could analyse the driver's breath or the driver's skin through touch-based sensors on places like the steering wheel or door locks. If it detected blood alcohol content above the legal limit of .08, the vehicle would not start.

The concept is similar to the alcohol ignition interlock systems that are often court-ordered for convicted drunk drivers, but would be less obtrusive.

US Transportation Secretary Ray LaHood who visited

the QinetiQ lab for a demonstration told the AP that the technology is "another arrow in our automotive safety quiver." He also said that the technology would not be mandated, but would be optional for manufacturers to include in the future.

Head of the National Highway Traffic Safety Administration (NHTSA), David Strickland, also attended the demonstration. He said that the technology could help 9,000 alcohol-related traffic fatalities be avoided every year, but that it would not be implemented unless it was "seamless, unobtrusive, and unfailingly accurate."

The research is funded by \$10 million from both NHTSA and the Automotive Coalition for Traffic Safety.

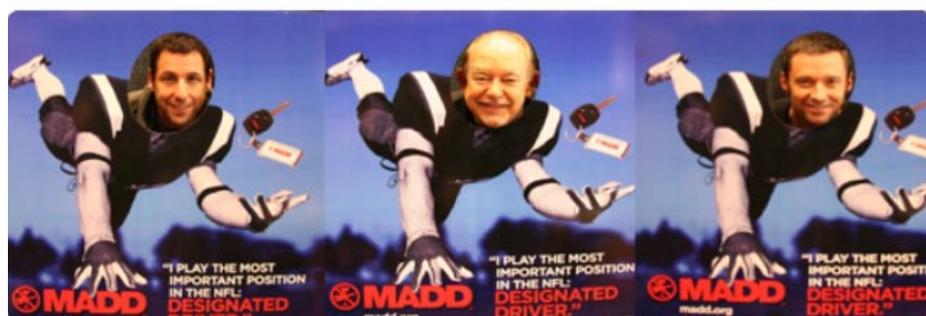
The most important position in the game – designated driver in US

Celebrities helped Mothers Against Drunk Driving (MADD) highlight the importance of football fans designating a sober driver before the Super Bowl weekend in January. Celebrities Adam Sandler, Hugh Jackman and Robin Leach were among those supporting the designated driver campaign.

In 2009, 65 people were killed in drunk driving related crashes on Super Bowl Sunday and the

morning after, the second highest number of traffic fatalities behind New Year's Day.

For more information visit www.madd.org



UK Drink Drive Christmas campaigns – positive tests fall

The latest figures issued for England and Wales show that over the Christmas and New Year period, of the 170,000 drivers breath tested, 6,613 were found to be over the limit. This compares to 9,148 out of 223,000 tests in the same period for 2009. Compared with 2009, the percentage of drivers found to be over the limit, or to have taken illegal drugs, was down slightly from 4.1% to 3.8%. The number of drivers being tested was down because the severe weather meant fewer people were venturing out onto the roads, according to the police.

In Scotland the ACPOS festive drink drive campaign reports that over the four week period a total of 426 offenders were caught driving whilst over the legal alcohol limit. A further 25 offenders were detected driving whilst under the influence of drugs, one of

whom was also reported for driving whilst impaired through alcohol. The figures show an overall reduction compared to last year's campaign which saw 460 drink drivers caught and a further 18 who were found to be unfit through drugs, 12 who whom were also unfit through alcohol. The total number of repeat offenders caught this year is also down with consideration being given to seize 18 vehicles compared to 47 during last year's campaign

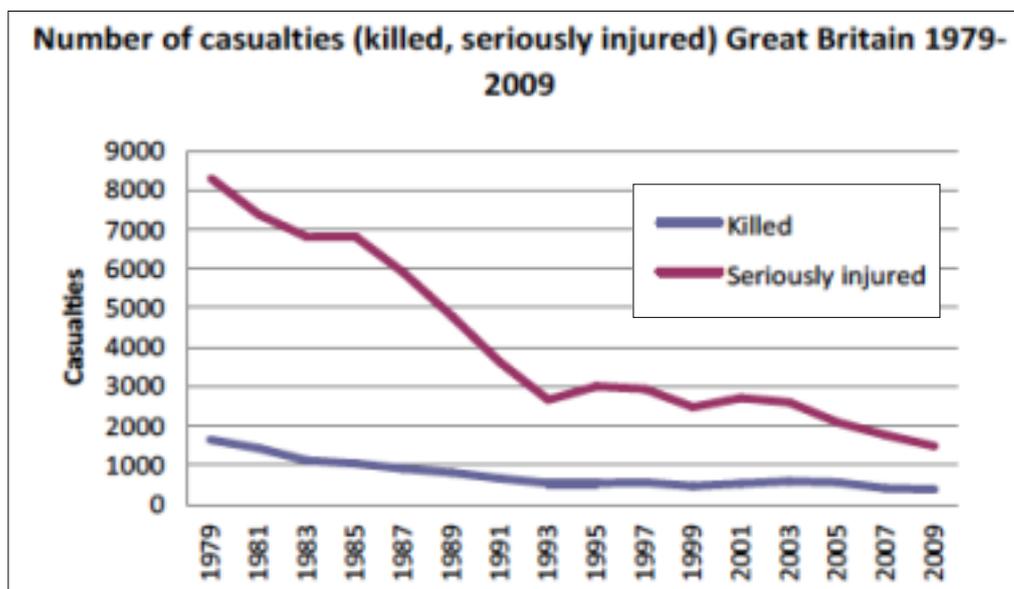
In Northern Ireland, The PSNI announced there were 414 detections out of 5,780 road side tests over the festive period – 13% fewer than last year.

Office of National Statistics figures indicate that overall, in 2009, there were 11,990 reported casualties (5% of all road casualties) occurred where someone was driving whilst over the legal alcohol limit.

The number of drink drive fatalities has declined from an all time high of 1,640 in 1979, when records began, to an all time low of 380 in 2009.

The number of seriously injured drink drive casualties has declined from an all time high of 8,300 in 1979 to an all time low of 1,480 in 2009.

Sources: Office for National Statistics Reported Road Casualties in Great Britain: 2009, Department for Transport



Rebellious risk takers respond better to alcohol messages that put them in control

In a recent study, researchers examined the effect of self-efficacy statements in humorous anti-alcohol abuse television adverts on college students. A post test only group design experiment was conducted with 124 college students. It was found that highly rebellious individuals who watched adverts with a self-efficacy statement (i.e., 'You Are in Control of the Situation') indicated lower alcohol expectancies, higher risk perceptions, and higher intentions to change their drinking behaviors than those in the non-self-efficacy condition. The findings suggest that

health promotional messages should be tailored to rebellious college students, particularly those who are at risk, in a manner that not only gains their attention, but also minimises possible defensive reactions to the given messages. Humorous messages with self-efficacy statements could offer ways to communicate with rebellious college students regarding their drinking problems.

Source: The effects of self-efficacy statements in humorous anti-alcohol abuse messages targeting college students: who is in charge? Author: Lee MJ Journal: Health Communication Citation: Vol 25, No 8, 2010, pp638-646

Raising awareness of the health and safety effects of alcohol In Canada

An analysis in CMAJ (Canadian Medical Association Journal) states that 'Focused programmes and public health policies can help reduce the burden of alcohol misuse in Canada.

The analysis, by researchers at the Centre for Addiction and Mental Health, Toronto, the Centre for Addictions Research of British Columbia and the University of Victoria, outlines several steps that could be taken to reduce the impact of alcohol in society and on individuals.

The authors estimate direct health care costs of alcohol in Canada in 2002 were \$3.3 billion and the total direct and indirect costs were \$14.6. Per capita sales have risen 13% since 1996 and are expected to continue rising. In 2002, an estimated 450,000

Canadians were dependent drinkers and there were 8,300 alcohol-related deaths.

The authors recommend population-level policies, including, for example, prices that are based on alcohol strength and keep pace with inflation, eliminating discount pricing, strengthening government control systems, restricting geographic access, increasing effectiveness of drunk-driving penalties and encouraging health practitioners to deliver brief interventions. They also call for limits on alcohol marketing and promotion.

Source: Alcohol in Canada: reducing the toll through focused interventions and public health policies Norman Giesbrecht, Timothy Stockwell, Perry Kendall, Robert Strang, and Gerald Thomas *Can. Med. Assoc. J.*, Feb 2011; doi:10.1503/cmaj.100825

Drink driving campaign Queensland's roads

The Department of Transport and Main Roads regularly runs anti-drink driving public education campaigns that are closely coordinated with Queensland Police Service enforcement efforts such as random breath testing. The most recent anti-drink driving public education campaign encourages motorists to 'Think before you drink. Think twice before you drive'.

The campaign uses, television, out of home (including outdoor, bus shelter and taxi backs) and ambient advertising (including advertising in pubs and clubs). The advertising is scheduled to appear during holiday periods and long weekends — statistics show a higher proportion of drink driving related crashes at these times.

The campaign began in December 2010 and a number of television commercials are being developed to run in phases at various times until 2013.

Two commercials are currently airing: 'Reflections – anxious and uncertain' encourages motorists to consider the consequences of their intention to drink and drive by the people who matter most to them; and 'Reflections – Police presence' reminds motorists you can be caught for drink driving anywhere, anytime.



ETSC Report on drink driving in Italy and Belgium

The European Transport Safety Council has produced two factsheets on Drink Driving in Italy and Belgium. The factsheets include updates on the extent of

the drink drive problem, updates on legislation and enforcement and campaigns to raise awareness.

www.etsc.eu/documents/C.pdf and
www.etsc.eu/documents/Drink-Driving_Italy.pdf

UK higher-earning women are twice as likely to drink excessively

The General Lifestyle Survey (GLF) a multi-purpose continuous survey carried out by UK Office of National Statistics collecting information on a range of topics from people living in private households. Results of the latest survey were published in January. Overall, the ONS figures show that men drink an average of 16.3 units per week, while women drink an average of 9 units per week.

The GLF 2009 survey found that in the UK 19% of women with a weekly household income of more

than GBP 1,000 (EUR 1,160.53 USD 1,592.48) drink excessively (more than six units) at least once a week, compared with 8% of women with a weekly income of GBP 400. The overall figures for both sexes show that 23% of higher-earning people drink excessively at least once a week, compared with 10% of people on lower incomes.

The survey report is available from www.statistics.gov.uk/statbase/Product.asp?vlnk=5756

<i>Persons aged 16 and over</i>		<i>Great Britain: 2009¹</i>					
Drinking last week	Usual gross weekly household income (£)						
	Up to 200.00	200.01 - 400.00	400.01 - 600.00	600.01 - 800.00	800.01 - 1000.00	1000.01 or more	Total ²
Percentages							
Drank more than 4/3 units on at least one day last week ³							
Men	30	28	36	39	43	46	37
Women	17	22	26	31	35	43	29
All persons	22	24	31	35	39	45	33
Drank more than 8/6 units on at least one day last week ³							
Men	14	13	21	22	26	26	20
Women	8	8	13	16	16	19	13
All persons	10	10	17	19	21	23	16

Binge drinking most common in higher incomes and better educated in the US

For the first time, the Centers for Disease Control and Prevention (CDC) released a report with data on health disparities by race, ethnicity, income, and education. The report included data on the impact of alcohol and drug use on segments of the United States population.

The CDC reports that binge drinking is on the rise. Unlike many other health disparities, the problem - consuming four drinks at a sitting for women, and

five for men -- is more common among those with higher incomes and better education. Low-income individuals, however, consume more alcohol when they binge, particularly American Indians and Native Alaskans .

The full report CDC Health Disparities and Inequalities Report - United States, 2011 is available from www.cdc.gov/minorityhealth/CHDIReport.html#Topic

International Medical Advisory Group (IMAG) Conference report

The 36th IMAG Conference, held in Frascati, Italy (17-19 October 2010) was organised by European Foundation for Alcohol Research (ERAB). There were more than 100 participants from 17 countries.

Some key points to emerge from this Conference can be summarised as follows.

- The Conference demonstrated that there are a number of promising treatment strategies in development which focus on those groups that are at risk. For example, appropriately timed brief personalised interventions can be effective in addressing the problem of binge drinking amongst individuals who have been identified as being at high risk, e.g. amongst groups of university students.
- By contrast, there is now a body of opinion that “social norms marketing campaigns” to correct the misperception about peer drinking levels are largely ineffective.
- ERAB – funded studies are contributing to an increased understanding of Alcoholic Liver Disease (ALD), susceptibility and treatment. It is apparent that within 15 years, it will be technically feasible

to scan the human genome and determine those individuals who are susceptible to alcoholic liver disease ALD.

- Acetaldehyde (from the breakdown of alcohol in the body) has been classified very recently by the World Health Organisation as a causal agent for cancers of the head, neck and throat.
- Consumption of alcohol increases the risk of breast cancer in women. Very large studies that control for other factors show that one drink per day increases the relative risk by a very small amount. Individuals need to consider health risks in the context of their own lifestyle, family history, etc., and in consultation with medical professionals.

The conference confirmed that the protective mechanisms of alcohol in relation to cardio-vascular disease are now well understood and the benefits of moderate drinking are widely accepted by the mainstream medical community.

A detailed report from the conference is available in the ERAB 2010 report, visit www.erab.org/asp2/newsroom/index2.asp?doc_id=509

Drinkaware annual conference

More than 100 representatives from the public health community and drinks industry attended the first Drinkaware Annual Conference on Monday 24th January 2011 at Westminster Central Hall, London. The event focused on how best to address under-18 alcohol misuse and aimed to initiate future collaboration between the sectors. The conference included an address by Andrew Lansley CBE, Secretary of State for Health and a panel discussion hosted by journalist Sheena McDonald.

Speaking at the conference, Andrew Lansley CBE, Secretary of State for Health, said: “As the White Paper made clear, one of our key public health objectives must be to turn the corner on alcohol related harm. It’s clear we need action. In other walks of life we don’t say what used to be must be. Alcohol misuse is not somehow hardwired into the national psyche. It’s not true to say the only way to break through the cycle is through punitive top-down measures... I believe we

can change behaviours, we can secure progress, and I believe we can do it without excessive, burdensome regulation”.

Alan Maryon-Davis, Honourary Professor of Public Health at Kings College London, spoke from a public health perspective about young people’s alcohol misuse and Jeremy Beadles, Chief Executive of the Wine and Spirits Trade Association, gave an industry perspective on the problem and existing initiatives.

Chris Sorek, Chief Executive of Drinkaware, concluded the session announcing plans to develop a panel of expert stakeholders from health and industry backgrounds to come together over the next year to harness the potential of their communications channels and share expertise and sector perspective to consider how parents can be motivated to be positive role models to their children.

For more information, visit www.drinkaware.co.uk

Children with ADHD much more likely to develop substance abuse problems as they age

Children with attention-deficit hyperactivity disorder are two to three times more likely than children without the disorder to develop serious substance abuse problems in adolescence and adulthood, according to a study by UCLA psychologists and colleagues at the University of South Carolina.

Steve S. Lee, a UCLA assistant professor of psychology and lead author of the study stated that this greater risk for children with ADHD applies to boys and girls, it applies across race and ethnicity — the findings were very consistent. The greater risk for developing significant substance problems in adolescence and adulthood applies across substances, including

nicotine, alcohol, marijuana, cocaine and other drugs.

Lee and his colleagues analysed 27 long-term studies that followed approximately 4,100 children with ADHD and 6,800 children without the disorder into adolescence and young adulthood — in some cases for more than 10 years.

The research by Lee and his colleagues, the first large-scale comprehensive analysis on this issue, is currently available online in the journal *Clinical Psychology Review* and will appear in a print edition later this year.

Alcohol and romantic relationships: A good or bad mix?

A study by University at Buffalo and University of Missouri researchers illustrates that drinking plays an important and sometimes unexpected role in young couples' romantic relationships.

The study shows that alcohol use can have both positive and negative effects of drinking, and documents the circumstances in which these effects are more likely to occur and according to the authors provides clues about who might be at risk from the adverse consequences of alcohol use within committed relationships.

Ash Levitt, PhD, lead author on the report and postdoctoral fellow at UB's Research Institute on Addictions commented that the study showed that **"drinking together rather than apart is clearly good for relationships. Individuals who drink with their partner report feeling increased intimacy and decreased relationship problems the next day, compared to individuals who drink apart from their partner or do not drink at all."**

The beneficial outcomes for relationships were associated with relatively lower levels of drinking, one to three drinks, whereas harmful outcomes – decreased intimacy and increased relationship problems – were associated with heavier levels of

drinking, as in four or more drinks.

The study included 69 heterosexual couples who averaged 20-21 years of age. The majority of the participants were white and over 90% were college students. Most were dating seriously and seven of the couples were married.

Heavy alcohol consumption was not found to be harmful to relationships when partners drank together vs. apart. Also, when both partners drank either heavy or light amounts, as long as they were similar amounts compared to their partner, it was better for the relationship than when one drank heavily and the other lightly.

The associations between drinking and relationships were stronger and more numerous for women than for men, suggesting that alcohol use plays a larger role in romantic relationships for women than it does for men. Women appeared to drink with their partner in response to relationship problems, feeling disconnected from him, or when they perceived that he had behaved negatively toward them the day before. Women also drank significantly more on days following negative events with their partners than men did after negative events.

Source: Published November 29 in the *Personality and Social Psychology Bulletin*

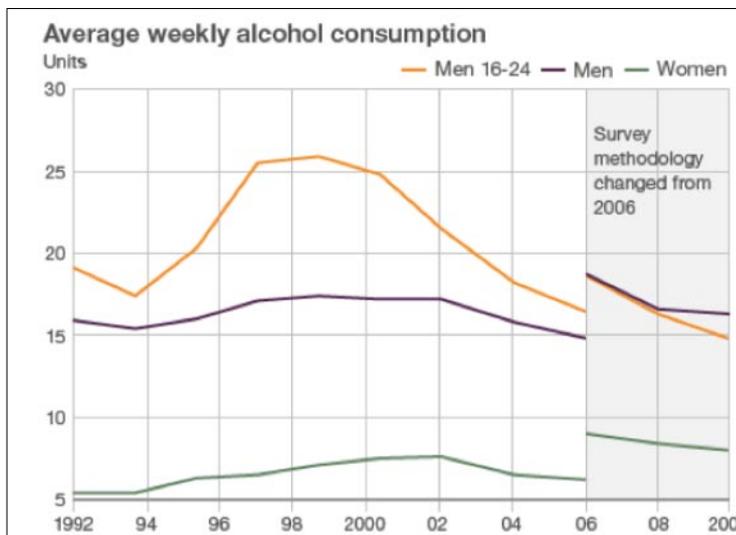
Alcohol Concern report 'Making Alcohol a Health Priority'

A position paper published by Alcohol Concern suggests that alcohol-related hospital admissions may rise to 1.5 million a year by 2015 if further investment in alcohol services are not prioritised. The charity states that the cost of alcohol to the NHS could rise to £3.7 billion per annum if investment in the NHS for alcohol services is not doubled. (It is currently estimated to be £2.7 billion per annum.)

The report addresses many important issues regarding alcohol misuse in the UK and what should be done to address alcohol dependent drinkers and those admitted to hospital for alcohol related injuries and treatment.

However the statistics used in the paper suggest that alcohol consumption and alcohol related deaths are increasing rapidly in the UK, contrary to Government and NHS statistics in recent years.

The report is available from www.alcoholconcern.org.uk/publications/policy-reports/making-alcohol-a-health-priority



Source: Office of National Statistics

Alcohol Deaths - UK rates fall in 2009

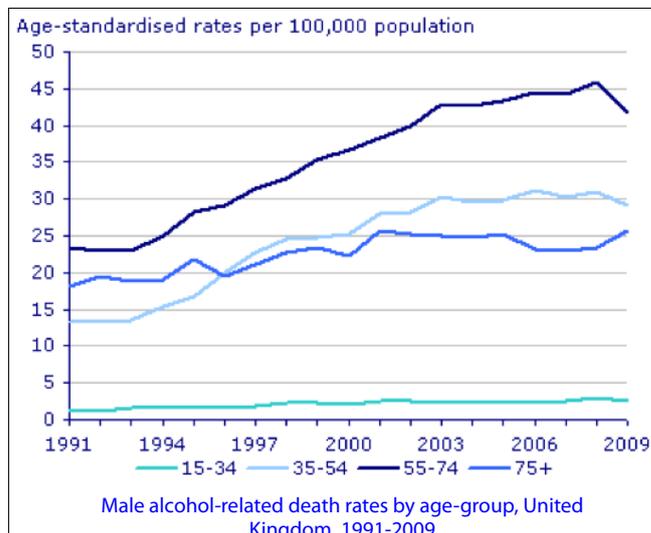
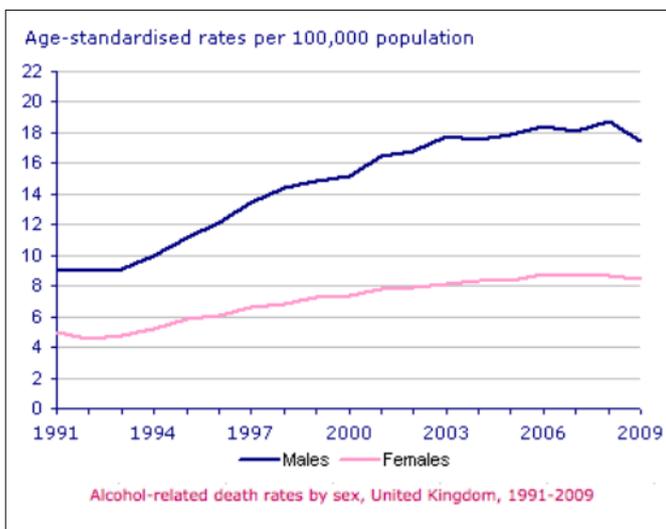
ONS figures indicate that the number of alcohol-related deaths in the UK has increased since the early 1990s, rising from the lowest figure of 4,023 (6.7 per 100,000 population) in 1992 to the highest of 9,031 (13.6 per 100,000) in 2008. Latest figures indicate that in 2009 the number of deaths fell to 8,664 (12.8 per 100,000).

There are more alcohol-related deaths in males than in females. Male rates more than doubled over the period from 9.0 per 100,000 in 1992 to 18.7 per 100,000 in 2008, although the rate was lower in 2009 at 17.4 per 100,000. There were steadier increases in female rates, rising from 4.6 per 100,000 in 1992 to 8.7 per 100,000 in 2007 and 2008. The rate decreased slightly in 2009 to 8.4 per 100,000. In 2009 males accounted for approximately two-thirds of alcohol-related deaths. There were 5,690 deaths in males and 2,974 in females.

Trends differ according to age. The highest alcohol-related death rate across the period was in men aged 55–74. In 2009 the rate for this group was 41.8 per 100,000. The lowest male rate was in those aged 15–34; the rate for this group in 2009 was 2.6 per 100,000. The only rate to increase among men from 2008 to 2009 was in those aged 75 years and over, rising from 23.4 to 25.6 per 100,000.

Like men, women aged 55–74 had the highest alcohol-related death rates over the period (20.1 per 100,000). Rates were lowest in women aged 15–34 (1.5 per 100,000). In 2009 the rates for women aged 35–54 and 75 and over were 13.8 and 13.3 per 100,000 respectively.

The report is available at www.statistics.gov.uk/StatBase/Product.asp?vlnk=6990&Pos=3&ColRank=2&Rank=272



UK campaign to discourage binge drinking in armed forces

Women soldiers are being warned to drink responsibly by the Ministry of Defence for fear of weight gain.

Adverts in Soldier magazine ask 'Does My Bum Look Big in This?' next to a pint glass in the shape of a large bottom complete with short legs wearing high heels. It then asks 'Are You Drinking to Excess?'



The MOD is using the advert to try to stop thousands of women in the forces from binge drinking. Last year the MoD launched similar adverts that featured the slogan 'Lager, Lager, LARGER!' in a bid to stop male soldiers drinking excessively. It showed a torso shaped pint glass with a bulging tummy and 'man boobs'.

A recent survey for the MoD found up to 23,000 members of the armed forces – around one in seven – were drinking 'hazardous and harmful' levels of alcohol.

Alcohol-free campus campaign starts in South Korea

The South Korean government has launched a campaign to prevent freshman deaths at universities as a result of 'initiation' or 'orientation' sessions. The government has signed agreements to work together with universities and parents to ultimately make campuses alcohol-free zones.

The ministry plans to educate students about the harmful effects of drinking and ban alcoholic beverage advertisements and other marketing promotions on campus in cooperation with universities. It also asked schools to forbid students from drinking inside dormitories, classrooms, student assembly halls and student lounges.

The campaign was launched by Health and welfare minister and the actress Ko Ah-seong, who is about to start her freshman year and has been appointed a goodwill ambassador the campaign.



Response to minimum pricing of alcohol in England

British Ministers have announced plans for setting up minimum prices for alcohol in England and Wales. Their plan will prohibit shops and bars from selling alcohol for less than the rate of duty plus VAT. This will set a base price for the first time ever. The Home Office has suggested that the new floor on alcohol prices would prevent approximately 7,000 crimes a year, 2000 of them violent and target products associated with problem drinking.

The British Medical Association called for tougher actions. Although a 50 pence-per-unit minimum was

backed by health campaigners, the Home Office's plans are substantially lower, with a minimum price of around 21p per unit of beer and 28p per unit of spirits. Petra Meier, professor of public health at Sheffield University, said, 'Around the 20 to 30p mark, the effect on alcohol-related harm is very modest.' She predicts the new minimum prices to save about 21 deaths and about 2,400 hospital admissions, 'compared with a 50p unit price, where you would save around 3,000 deaths and 39,000 hospital admissions'.

Drinkaware.ie focuses on relationships and the role of alcohol for Valentine's Day

Speaking ahead of Valentine's Day, Fionnuala Sheehan, drinkaware.ie Chief Executive encouraged people to think about their drinking and whether it could be affecting their relationship. "Many of us don't really think if our drinking may be affecting our partner. With Valentine's Day around the corner, drinkaware.ie is throwing the spotlight onto relationships and the effect excessive drinking can have on them. 'I would encourage people to log on to drinkaware.ie to get the facts about how much alcohol they are consuming plus simple tips for changing unhealthy drinking habits'".

- Know your limits, and stick to them together.
- Don't push your partner to drink the same amount as you.
- Deal with relationship issues when you're sober.

For more information, visit www.Drinkaware.ie



Drinkaware.ie's tips for a healthier relationship include:

- Break your habits. If date night always means drinking, why not mix it up with some alcohol free alternatives?

Scottish government launches alcohol awareness social media campaign

The Scottish Government has launched an integrated social marketing campaign that aims to encourage people to consider the amount of alcohol they drink and to cut down.

The campaign uses the central theme 'Every time you have a drink it adds up to more than you think'. It is running across radio, print and digital until the end of February.

The campaign is supported by field marketing activity across the country involving a 'mocktail' bar, where a free unit measure cup will be given out to help people monitor their alcohol intake and find out how many units they are consuming with each drink. A range of retail partners including Aldi, Spar, RS McColl, David Sands and Superdrug will also be distributing free cups to Scots across the country.

A website www.drinks smarter.org will support the campaign, providing information about sensible drinking guidelines and the health benefits of doing so.

Paula Macdermid, senior strategic marketing manager for the Scottish Government, said: "The campaign is well-timed as it launches in the New Year, when people are ready to look at ways to start afresh after the festive season. The campaign asks people to reflect on their current drinking, how this compares to the sensible drinking guidelines and to consider reducing their intake."



'Know when to say when' – New South Wales campaign

A new campaign running from January to March 2011 challenges the public to consider the amount of alcohol they consume, by placing the spotlight on behaviour that many people accept as 'normal' when people drink too much. The campaign shows the difference between having a good time with a few drinks and how that can change if too much alcohol is consumed with the main message 'Know when to say when'.

The campaign targets 18-65 year olds and is designed to clearly dramatise the spectrum of consequences from drinking, not only to the drinker but also to those they come in contact with. The scenes are presented in a non-judgemental way, ultimately provoking the viewer to determine where they draw the line when it comes to drinking.

The campaign seeks to challenge the values, beliefs and norms that surround alcohol consumption and emphasises a message of personal responsibility.



Diageo, Foster's back 'Early Declaration'



The Australian cricket community and major liquor suppliers are again encouraging fans to 'Know When to Declare' this summer in a new and expanded responsible drinking campaign.

Cricket Australia and its partners Foster's Group, Diageo Australia and the Nine Network have expanded on last year's "Classic Declarations" broadcast campaign.

'Know When to Declare' Phase 2 will carry the tag, "Don't be 'that guy' at the cricket", reminding young Australians to take responsibility for their actions and not to be known as 'that guy' who is left embarrassed for having one too many with his mates.

The campaign includes a 30 second TV community service announcement (CSA) this year featuring Australian fast bowler Mitchell Johnson and Channel 9 commentators Michael Slater and Tony Greig. This years campaign will also include outdoor billboards and communication direct to cricket captains of community cricket clubs around the country.

NIAAA fact sheet on women and alcohol

The NIAAA have created a new fact sheet on Women and Alcohol. The fact sheet includes details of safe drinking guidelines and potential health risks of exceeding recommended limits. It emphasises that women's bodies react differently to alcohol than men's bodies and therefore women are more susceptible to alcohol's health risks, hence the lower recommended limits for women. The sheet also includes consumption statistics in the US for both men and women based on data from the National Epidemiologic Survey on Alcohol and Related Conditions.

pubs.niaaa.nih.gov/publications/womensfact/womensfact.htm



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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Professor Alan Crozier, Professor of Plant Biochemistry and Human Nutrition, University of Glasgow

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