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Alcohol and Public Health

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General Alcohol Information

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Measures of Alcohol Consumption and Alcohol-Related Health Effects from Excessive Consumption

Current Drinking

- Current drinkers are those who consume alcohol-containing beverages.
- In 2002, 54.9% of U.S adults (18 years and older) reported drinking at least one drink in the past month. The prevalence of past-month alcohol consumption was higher for men (62.4%) than for women (47.9%) (SAMSHA, NSDUH, 2002).

Binge Drinking

- Binge drinking is generally defined as having 5 or more drinks on one occasion, meaning in a row or within a short period of time (Naimi, 2003). However, among women, binge drinking is often defined as having 4 or more drinks on one occasion (NIAAA, 2004) (Wechsler, 1998). This lower cut-point is used for women because women are generally of smaller stature than men, and absorb and metabolize alcohol differently than men.
- About 1 in 3 adult drinkers in the United States report past-month binge drinking, and this ratio has changed very little since the mid-1980s (Serdula, 2004).
- In 2001, there were approximately 1.5 billion episodes of binge drinking in the U.S. Binge drinking rates were highest

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among those aged 18 to 25 years; however, 70% of binge drinking episodes occurred among those aged 26 years and older (Naimi, 2003).

- Binge drinkers were 14 times more likely to report alcohol-impaired driving than non-binge drinkers (Naimi, 2003).
- Binge drinking is associated with a number of adverse health effects, including unintentional injuries (e.g., motor vehicle crashes, falls, burns, drownings, and hypothermia); violence (homicide, suicide, child abuse, domestic violence); sudden infant death syndrome; alcohol poisoning; hypertension; myocardial infarction; gastritis; pancreatitis; sexually transmitted diseases; meningitis; and poor control of diabetes (Naimi, 2003).

Heavy Drinking

- Heavy drinking is consuming alcohol in excess of 1 drink per day on average for women and greater than 2 drinks per day on average for men (NIAAA, 2004).
- In 2002, 5.9% of U.S. adults reported heavy drinking in the past 30 days; the prevalence of heavy drinking was greater for men (7.1%) than for women (4.5%) (CDC, BRFSS, 2002).
- Heavy drinking is associated with a number of chronic health conditions, including chronic liver disease and cirrhosis, gastrointestinal cancers, heart disease, stroke, pancreatitis, depression, and a variety of social problems (Naimi, 2003).

Alcohol Dependence

A person is defined as being dependent on alcohol if he or she reports three or more of the following symptoms in the past year (DSM-IV, 1994).

- Tolerance (e.g., needing more alcohol to become intoxicated).
- Withdrawal
- Alcohol use for longer periods than intended.
- Desire and/or unsuccessful efforts to cut down or control alcohol use.
- Considerable time spent obtaining or using alcohol, or recovering from its effects.
- Important social, work, or recreational activities given up because of use.
- Continued use of alcohol despite knowledge of problems caused by or aggravated by use.

In 2002, 3.7% of past-year drinkers were alcohol-dependent (SAMSHA, NSDUH, 2002).

Underage Drinking

- As of 1988, all states prohibit the purchase of alcohol by youth under the age of 21 years. Consequently, underage drinking is defined as consuming alcohol prior to the minimum legal drinking age of 21 years.
- In 2003, 44.9% of 9th through 12th graders reported drinking alcohol on one or more of the past 30 days; prevalence of current drinking was higher for females (45.8%) than among males (43.8%) (CDC, YRBS, 2003).
- In 2003, 28.3% of 9th through 12th graders reported binge drinking (having five or more drinks of alcohol in a row or within a couple of hours) at least once during the past 30 days. The prevalence of binge drinking was higher for males (29%) than among females (27.5%) (CDC, YRBS, 2003).
- Alcohol use is a leading risk factor in the three leading causes of death among youth: unintentional injuries (including motor vehicle crashes and drownings); suicides; and homicides. Other adverse consequences of underage drinking include risky sexual behavior and poor school performance (CDC, YRBS, 2001).
- Zero tolerance laws, which make it illegal for youth under age 21 years to drive with any measurable amount of alcohol in their system (i.e., with a blood alcohol concentration (BAC) ≥ 0.02 g/dL), have reduced traffic fatalities among 18 to 20 year olds by 13% and saved an estimated 21,887 lives from 1975 through 2002 (NHTSA, 1997).

Alcohol Use and Women's Health

- For women of childbearing age, the consequences of excessive alcohol consumption, particularly binge drinking, includes unintentional injuries, domestic violence, risky sexual behavior and sexually transmitted diseases, unintended pregnancy, and alcohol-exposed pregnancies.
- In 2001, 11.8% of women aged 18 to 44 years reported consuming alcohol within the past month, and 11% reported binge drinking (5 or more drinks on any one occasion) (Naimi, 2003).

- Women with unintended pregnancies were 60% more likely to binge drink during the three months before conception than women with intended pregnancies (Naimi, 2003).

Alcohol-Impaired Driving

- In 2002, 2.2% of U.S. adults reported alcohol-impaired driving in the past 30 days (CDC, BRFSS, 2003).
- In 1993, there were approximately 123 million episodes of alcohol-impaired driving in the United States. (Liu, 1997).
- In 2001, there were approximately 1.4 million arrests for driving under the influence of alcohol or narcotics. This is an arrest rate of 1 of every 137 licensed drivers in the United States. (NHTSA, 2003).

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Alcohol-Related Health Effects from Excessive Alcohol Consumption

Total Deaths due to Alcohol

- In 2000, there were approximately 85,000 deaths attributable to either excessive or risky drinking in the U.S., making alcohol the third leading actual cause of death (Mokdad, 2004).
- Alcohol-related deaths in the United States vary considerably by state, and are directly related to the amount of alcohol consumed and the pattern of alcohol use.

Alcohol Motor Vehicle Crash Deaths

- In 2002, 17,419 people in the United States died in alcohol-related motor vehicle crashes, accounting for 41% of all traffic-related deaths (NHTSA, 2003).
- In 1995, 36% of all crash fatalities among youth aged 15 to 20 years were alcohol-related (Samber, 1997; NHTSA, 1997).
- From 1997 through 2002, 2,355 children died in alcohol-related motor vehicle crashes; 1,588 (68%) of these children were riding with a drinking driver (CDC, MMWR, 2004).

Alcohol and Unintentional Injuries

- Alcohol-related unintentional injuries and deaths include motor vehicle crashes, drownings, falls, hypothermia, burns, suicides, and homicides.
- Approximately 31.1% of those who die from unintentional, non-traffic injuries in the United States have a blood alcohol concentration of 0.10 g/dL or greater (Smith, 1999).
- Patients treated in an emergency department (ED) for an unintentional injury are 13.5 times more likely to have consumed 5 or more alcohol-containing beverages within 6 hours of their injury compared to age and sex matched community controls (Vinson, 2003).

Alcohol and Violence

- In 1997, about 40% of all crimes (violent and non-violent) were committed under the influence of alcohol (Bureau of Justice Statistics, 1998).
- In 1997, 40% of convicted rape and sexual assault offenders said that they were drinking at the time of their crime (Greenfield, 2000).
- Approximately 72% of rapes reported on college campuses occur when victims are so intoxicated they are unable to consent or refuse (Wecshler, 2004).
- Two-thirds of victims of intimate partner violence reported that alcohol was involved in the incident (Bureau of Justice Statistics, 1998).
- Nearly one-half of the cases of child abuse and neglect are associated with parental alcohol or drug abuse (Grant, 2000).
- Approximately 23% of suicide deaths are attributable to alcohol (Smith, 1999).

Alcohol and Pregnancy

- Adverse health effects that are associated with alcohol-exposed pregnancies include miscarriage, premature delivery, low birth weight, sudden infant death syndrome, and prenatal alcohol-related conditions (e.g., fetal alcohol syndrome and alcohol-related neurodevelopmental disorders).

- In 1999, 12.8% of women aged 18 to 44 years reported any alcohol use (at least one drink) during pregnancy, and 2.7% reported binge drinking (5 or more drinks on any one occasion) (MMWR, 2002).
- Alcohol-related neurodevelopmental disorder and alcohol-related birth defects are believed to occur approximately three times as often as Fetal Alcohol Syndrome (FAS) (CDC, NCBDD/FAS, 2004).
- Fetal Alcohol Syndrome is one of the leading causes of mental retardation, and is directly attributable to drinking during pregnancy. FAS is characterized by growth retardation, facial abnormalities, and central nervous system dysfunction (i.e., learning disabilities and lower IQ), as well as behavioral problems.
- The incidence of FAS in the United States ranges from 0.2 to 1.5 per 1,000 live births <http://www.cdc.gov/ncbddd/fas> (CDC, NCBDD/FAS, 2004).
- Any maternal alcohol use in the periconceptual period (i.e., during the three months before pregnancy or during the first trimester) is associated with a six-fold increased risk of SIDS (Iyasu, 2002).
- Binge drinking (five or more drinks at a time) during a mother's first trimester of pregnancy is associated with an eight-fold increase in the odds that the infant will die of SIDS (Iyasu, 2002).

Alcohol and Sexually Transmitted Disease

- Alcohol use by young adults is associated with earlier initiation of sexual activity, unprotected sexual intercourse, multiple partners and an increased risk for sexually transmitted diseases.
- Among teens aged 14 to 18, 20% of those who reported drinking before age 14 also reported being sexually active compared to 7% of those who did not report drinking before this age (The National Center on Addiction and Substance Abuse, 1999).
- In 1998, an estimated 400,000 college students between the ages of 18 and 24 had unprotected sex after drinking, and an estimated 100,000 had sex when they were so intoxicated they were unable to consent (Hingson, 2002).

- Among adults aged 18 to 30, binge drinkers were twice as likely as those who did not binge drink to have had two or more sex partners (Leigh, 1994).
- People who abuse alcohol are more likely to engage in risky behaviors, such as having unprotected sex, having more sex partners, and using intravenous drugs. In a single act of unprotected sex with an infected partner, a teenage woman has a 1% risk of acquiring HIV, a 30 % risk of getting genital herpes, and a 50% chance of contracting gonorrhea (Alan Guttmacher Institute, 1994).

Hepatitis C and Chronic Liver Disease

- Alcohol consumption can exacerbate the HCV infection and accelerate disease progression to cirrhosis. Alcohol may also exacerbate the side effects of antiviral treatment for HCV infection, impairing the body's response to the virus (Larrea, 1998).
- In 2003, there were 12,207 deaths from alcohol-related chronic liver disease (CLD). Approximately 75% of those deaths occurred among men (CDC, NCHS, 2003).
- Approximately 40% of the deaths from unspecified liver disease in the United States are attributable to heavy alcohol consumption (Parrish, 1993).

Alcohol and Cancer

- Alcohol-related cancers include oral-pharyngeal, esophagus (squamous cell type), prostate, liver, and breast. In general, the risk of cancer increases with increasing amounts of alcohol.
- Excessive drinkers are 3 times more likely to develop liver cancer than non-drinkers (English & Holman, 1995).
- Excessive drinkers are 4 times more likely to develop esophageal cancer than non-drinkers (English & Holman, 1995).
- Oral cancers are six times more common in heavy alcohol users than in non-alcohol users (American Cancer Society, 2002).
- Compared to non-drinkers, women who consume an average of 1 alcoholic drink per day increase their risk of breast cancer

by approximately 7%. Women who consume an average of 2 to 5 drinks per day increase their risk of developing breast cancer by approximately 50% compared to that of non-drinkers (American Cancer Society, 2002).

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Effective Prevention Strategies for Alcohol-Related Health Problems

Alcohol Taxes

- A 10% increase on the tax for alcohol containing beverages could reduce the number of binge drinking episodes per month by 8% (Sloan, 1995).
- For every 1% increase in the price of beer, the traffic fatality rate declines by 0.9% (Ruhm, 1996).
- A 25% increase in the 1992 federal beer tax would have reduced work-loss days from non-fatal workplace accidents by 4.6 million and lost productivity by \$491 million (Oshfeldt, 1997).
- Raising state beer tax from 10¢ per case to \$1 per case would increase the probability of graduating from college by 6.3% (Cook, 1993).

Minimum Legal Drinking Age Laws

- All states and the District of Columbia have enforced 21-year-old minimum drinking age laws. In 2002, an estimated 917 lives saved in traffic crashes as a result of the age 21 minimum drinking age laws (NHTSA, 2002).
- Increasing the minimum drinking age from 18 to 21 has reduced both drinking and traffic crashes among youth by 10 to 15% (O'Malley & Wagenaar, 1991).

Comprehensive Community Programs

- Comprehensive community-based programs have reduced past month alcohol consumption among underage youth by 7% (Wagenaar, 2000).

Intervention Training Programs for Servers

- Server training programs have reduced alcohol sales by 11.5% and sales to pseudo-intoxicated buyers by 46% (Toomey, 2001).
- Server training programs have reduced single vehicle nighttime injury crashes by 23% (Holder, 1994).

Screening and Brief Intervention

- Brief physician advice to reduce alcohol consumption has reduced the number of binge drinking episodes in the past 30 days more than 40% (Fleming, 1997).
- The U.S. Preventive Services Task Force (USPSTF) recommends regular screening in primary care practices for alcohol misuse among adults and pregnant women (AHRQ, 2003).

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