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Brazil

Brazil's Ministry of Health has released figures that show a 6.2% reduction in the number of road deaths in 2009. The number of road deaths fell from 37,159 in 2008 to 34,859 in 2009, a decrease of 2,300. This improvement has been attributed to the "Lei Seca" (a law banning drinking and driving).

Rio de Janeiro has been highlighted as the state with the lowest road death rate in the country, with 8.5 deaths per 1,000 inhabitants, down from 12.7 deaths per 1,000 inhabitants in 2008.

Lithuania

The Lithuanian parliament, the Seimas, has approved new restrictions on promoting alcoholic beverages. Under the amendments, alcoholic beverages cannot be offered as bonus products or given as free presents. In addition, traders cannot offer discount coupons for alcohol, offer free samples of alcoholic beverages (except at exhibitions and markets), organise contests or sell publications promoting the consumption of alcoholic beverages.

Ecuador

On 20 June 2010, a ban on Sunday sales of alcohol came into effect in Ecuador, including restaurants. The government believes that 10% of murders are linked to alcohol and has imposed the measure to create greater security and to benefit tourism.

Italy

According to a study by Automobile Club d'Italia (ACI) that investigated drink driving in ten countries, the number of accidents in Italy rose from 10 in every 100,000 vehicles in 2000 to 16.6 in 2008. Despite a decreasing trend in alcohol-related road accidents in the majority of sampled countries, Italy, Sweden and Cyprus reported an increasing trend. 54.2% of accidents took place at weekends and of these 58% were recorded between 10pm and 7am. The number of accidents caused by women driving under the influence of alcohol rose from 7.2% of the total in 2000 to 10.3% in 2008. Accidents caused by drunk drivers aged under 28 accounted for 32.5% of the total.

US

In Minnesota a series of reforms have been signed in to law to address Driving Whilst Impaired (DWI), including broader sanctions for new and repeat offenders.

From July 1, 2011, drivers found with a 0.16% or higher blood alcohol concentration (BAC) must install ignition interlock systems – devices that require the driver to have less than a .02 BAC in order to start their vehicle – or face license suspensions of one to six years.

Drivers with three or more infractions in a ten-year period would be required to have an interlock for monitoring and prevention, or not drive at all.

The law does allow DWI offenders to drive immediately following their offense provided they have the device.

Cardiovascular and overall mortality risk in relation to alcohol consumption in patients with cardiovascular disease

Brief Overview of Paper:

The authors state that alcohol is linked to an extensively documented J-shaped dose effect curve, with regular moderate consumption reducing cardiovascular and overall mortality, whereas excessive or binge drinking has the opposite effect. Data indicative of a lower risk of cardiovascular events among moderate drinkers in apparently healthy people are extensive and consistent, whereas the role of alcohol intake among patients with cardiovascular disease (CVD) is less clear.

Recommendations about alcohol consumption in patients with previous CVD reflect experts' consensus rather than circumstantial evidence. For example, the US Food and Drug Administration warns that heart disease patients should stop drinking, and people who take aspirin regularly should not drink alcohol. However, in the American Heart Association/American College of Cardiology guidelines for secondary prevention, CVD patients are encouraged to maintain a lifestyle that includes drinking alcohol in moderation. The "Diet and Lifestyle Recommendations" scientific statement from the American Heart Association Nutrition Committee advises, "If you consume alcohol, do so in moderation (equivalent of no more than 1 drink in women or 2 drinks in men per day). The latter statement is largely accepted within the scientific community, definitely when referring to healthy people, although some would advise people to abstain completely rather than encouraging them to drink small amounts regularly. It has in fact been suggested that the consumption of alcohol for certain health benefits should not be encouraged because the harm would far outweigh the gain, especially among poor populations and in low-income countries, where the disease burden per unit of alcohol consumption is greater."

In this paper, the authors review the evidence on the beneficial or harmful effects of alcohol in patients who have experienced a first cardiovascular event and briefly discuss the major mechanisms underlying the relationship. They point out that abuse of alcohol, binge drinking, and drinking outside meals have all been associated with detrimental effects. The authors also discuss limitations inherent in observational studies of alcohol and health and disease.

As for implications for practice and policy, they state that their review "provides reasonable evidence that regular and moderate alcohol intake is significantly associated with a reduction in the incidence of secondary cardiovascular and all-cause mortality in patients with a history of CVD." However, when it comes to formulating alcohol policy based on these results, they point out that there are marked differences in the patterns of drinking among countries, especially when comparing drinking patterns between Mediterranean countries and those of Northern Europe and Russia. Hence, they state that "in some low-income populations and poor countries, even if the net effect on CVD might be beneficial, the effect of alcohol on the overall burden of disease might be detrimental because of more frequent uncontrolled alcohol-use disorders, cancer, liver cirrhosis, and injury." In their conclusions, they warn against heavy or excessive drinking but state that regular moderate drinkers "need not be told to modify their drinking habits."

AIM Council Member and co-author of this study Giovanni de Gaetano, MD, PhD comments:

"When I obtained my MD degree, many years ago, there were three pieces of advice given to a patient who had suffered an acute myocardial infarction (AMI): don't smoke, don't drink and take complete bed rest for one month. Today the first advice only is still valid. Our review paper in Circulation offers a balanced but strong support to the benefit of moderate alcohol drinking after an AMI. In our conclusions we suggest not to advise abstainers to start drinking after an AMI, but to encourage those who were already drinkers before the event not to stop moderate drinking. It is too a prudent approach? We do believe that drinking should not be considered as a drug to be prescribed to prevent reoccurrence, but a lifestyle that may protect against cardiovascular risk. Obviously, a cardiologist should inform his AMI patient that moderate drinking might offer him a better health perspective than being an abstainer. He must certainly give him a strong advice, if it is the case, to stop heavy and/or irregular (binge) drinking."

Article: Costanzo S, Di Castelnuovo A, Donati MB, Iacoviello L, de Gaetano G. Contemporary Reviews in Cardiovascular Medicine. Cardiovascular and overall mortality risk in relation to alcohol consumption in patients with cardiovascular disease. *Circulation* 2010;121:1951-1959.

The best is yet to be by Harvey E. Finkel, MD

It gets tiresome fighting the same battles all over again, all over again. To no one's great surprise an outfit in the UK calling itself the Institute of Alcohol Studies is focusing its concern, and urging the rest of us to join in, on a problem that I, here in the US, and colleagues in the UK and elsewhere in Europe are unaware exists—a virtual epidemic of alcohol abuse by the elderly. Picture the scene!

A natural well-intentioned protective inclination to coddle the elderly, some might say to patronize them, has led, over the years, a number of dot-orgs to grudgingly allow no more than a single daily drink, better even less, to those of us past middle age. I suspect that some use concern for the elderly as a pretext to further their prohibitory agendas. This blanket and arbitrary restriction is unscientific and unfair.

Like bottles of wine, even those in the same case, people age differently, one from the other. Although time may amplify what were once insignificant defects, a large and increasing proportion of the populace well beyond the age of 60 is very fit, mentally keen, healthy and active. They don't care to be told to desiccate their lifestyle. A mature person who drinks moderately is likely to both tolerate the alcohol better and benefit from it more than a young adult naïve to drinking. The older person is far more likely to handle alcohol responsibly. One is well advised to be especially cautious with frail individuals, of whatever age. Those few harboring specific contraindications to drinking, perhaps more likely among the aged, should be counseled by their individual physicians. (I hope the medical profession is becoming more sophisticated and objective about the nuances of alcohol consumption.) I should state that one needn't start drinking just because of reaching a certain age. Let's review some highlights from the medical literature.

Epidemiologic data, repeatedly confirmed, demonstrate the safety and health benefits of moderate drinking, especially for older people. Preservation of mental function (cognition), physical fitness, alertness, well-being, and social interaction all have been shown associated with moderate drinking, compared to abstinence. The risks of the major causes of disability and death are gratifyingly reduced in moderate drinkers of age. We have seen evidence, hints, and hopes that the combined effects of alcohol

and the polyphenols found chiefly in red wine extend life span and delay the tolls of aging: atherosclerosis, cancer, inflammation, and dementia. Abstinence and smoking are associated with intellectual decline. (Of course, it is possible that some of the more functional individuals are better able to gain access to potables.) In one intriguing study, the intellectual scores of aging co-twins who drink moderately are distinctly higher than those of their counterparts who drink substantially more or less. (The J-shaped curve again.) The mountainously well-documented reductions of risks of heart attack, stroke, and other cardiovascular disasters and of diabetes are particularly important for older people. Another research group concluded, "Wine consumption remains one of the last pleasures of this stage of life: our findings argue against prohibiting mild or moderate wine consumption in the elderly."

More recently, in a study by Lang, et al., of 13,333 men and women aged 65 and older followed in the US and England over five years, those who drink more than one or two per day scored better than abstainers by most health measurements. Further, these moderate drinkers do not show physiological signs of the increased sensitivity to alcohol in older people that some had feared, including declining body water content, higher blood alcohol concentration after a standard dose, and decrease in the body's ability to adapt to the presence of alcohol. The results indicate that, other factors being equal, older folks may drink as much as they did when younger, always within sensible limits and situations.

Skovenborg has pointed out that the decrease of total body water with age, a foundation of advised drinking restrictions, has been much exaggerated. (Less water would mean less space in the body in which to dilute alcohol.) He also noted that age differences in blood alcohol are minimized by drinking with meals and that net health benefits of higher consumption rise with age.

*What though youth gave love and roses,
Age still leaves us friends and wine.*

--Thomas Moore

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Alcohol use and mortality in older men and women

A study published in May in the journal *Addiction* compared the effect of alcohol intake on 10-year mortality for men and women over the age of 65 years.

The study followed two prospective cohorts of community-dwelling men aged 65–79 years at baseline in 1996 ($n = 11,727$) and women aged 70–75 years in 1996 ($n = 12,432$). Alcohol consumption was assessed according to frequency of use (number of days alcohol was consumed per week) and quantity consumed per day. Cox proportional hazards models were compared for men and women for all-cause and cause-specific mortality.

Compared with older adults who did not consume alcohol every week, the researchers found that the risk of all-cause mortality was reduced in men reporting up to four standard drinks per day and in women who consumed one or two drinks per day. One or two alcohol-free days per week reduced this risk further in men, but not in women. Similar results were observed for deaths due to cardiovascular disease.

In conclusion, for people over the age of 65 years, an alcohol intake of four standard drinks per day for men and two standard drinks per day for women was associated with lower mortality risk. For men, the risk was reduced further if accompanied with 1 or 2 alcohol-free days per week.

Source: Alcohol use and mortality in older men and women *Addiction* Published Online: 28 May 2010 Kieran A. McCaul, Osvaldo P. Almeida, Graeme J. Hankey, Konrad Jamrozik, Julie E. Byles & Leon Flicker

Alcohol consumption and the risk of breast cancer among BRCA1 and BRCA2 mutation carriers

Authors of a study published in the journal *The Breast* state that alcohol's effect on women who carry a BRCA gene mutation is unclear.

The researchers conducted a case-control study of 1925 matched pairs of predominantly premenopausal women who carry a BRCA1 or a BRCA2 mutation. Information on current alcohol consumption was obtained from a questionnaire administered during the course of genetic counselling or at the time of enrolment.

A modest inverse association between breast cancer and reported current alcohol consumption was

observed among women with a BRCA1 mutation (OR = 0.82, 95% CI 0.70–0.96), but not among women with a BRCA2 mutation (OR = 1.00; 95% CI 0.71–1.41).

The study concluded that compared to non-drinkers, exclusive consumption of wine was associated with a significant reduction in the risk of breast cancer among BRCA1 carriers (p -trend = 0.01).

Alcohol consumption does not appear to increase breast cancer risk in women carrying a BRCA gene mutation.

Source: Alcohol consumption and the risk of breast cancer among BRCA1 and BRCA2 mutation carriers *The Breast*, In Press, Corrected Proof, Available online 12 June 2010.

Further evidence that moderate alcohol consumption may play a role in the prevention of Alzheimer's Disease

In a case-control study from Spain on the effects of smoking and alcohol use on the risk of Alzheimer's Disease (AD), the authors found that the risk of AD was unaffected by any measure of tobacco consumption. On the other hand, alcohol consumers showed a 47% lower risk of developing AD than did never consumers, with effects mainly among women and among never smokers. No differences were noted by type of alcoholic beverage consumed.

The authors conclude that mean daily total consumption of alcohol showed increasingly protective dose-response relationships in women.

The numbers in this analysis were rather small, and there is always the possibility of confounding by other lifestyle factors. Still, the study supports a number of previous epidemiologic studies showing a lower risk of developing AD for moderate consumers of alcohol.

Reference: García AM, Ramón-Bou N, Porta M. Isolated and joint effects of tobacco and alcohol consumption on risk of Alzheimer's Disease. *Journal of Alzheimer's Disease* 2010;20:577-586. (DOI 10.3233/JAD-2010-1399).

For the full critique of this paper by the International Scientific Forum on Alcohol Research, please www.alcoholforum4profs.org

People may change to a 'healthier' pattern of drinking as they age

In a prospective longitudinal study of a cohort of Americans in the "Baby Boomer" generation, subjects' drinking habits were assessed at two points, when they were approximately 53 years of age and again when they were approximately 64 years of age. As the subjects got older, they began to consume fewer drinks per occasion but to consume alcohol more frequently; the net effect was little change in total alcohol intake for women but a slight increase for men.

In most epidemiologic studies, regular moderate drinking is the pattern associated with lower risk of many chronic diseases; hence, the described change in drinking pattern in this study (smaller amounts on more frequent occasions) can be considered a "healthy" change. Most long-term observational

studies show a decrease in total alcohol intake with ageing, although reasons for such are poorly understood.

This paper emphasises the importance of knowing the pattern of drinking, and not just the total number of drinks consumed over a week, when evaluating the impact of alcohol consumption on health and disease.

Reference: Molander RC, Yonker JA, Krahn DD. Age-related changes in drinking patterns from mid- to older age: results from the Wisconsin Longitudinal Study. *Alcoholism: Clinical and Experimental Research* 2010;34 (Published early online 7 May 2010).

For the full critique of this paper by the International Scientific Forum on Alcohol Research, please www.alcoholforum4profs.org

Type 2 diabetes risk lower among moderate drinkers

A study of 35,000 20- to 70-year-olds in the Netherlands found that moderate alcohol consumption, in conjunction with a variety of healthy lifestyle choices, - was associated with a 40% reduction in risk of developing Type 2 diabetes.

The protective effect held as long as study subjects also met at least three of four healthy-lifestyle conditions: obesity prevention, adequate exercise, not smoking, and a balanced diet. The moderate

drinkers were less likely to develop Type 2 diabetes compared to abstainers who adopted similar healthy behaviours.

The researchers defined moderate drinking as consuming one daily drink for women and up to two per day for men.

Source: The study from the Dutch research group TNO is published in the June 2010 issue of the *American Journal of Clinical Nutrition*.

Alcohol and type 2 diabetes - A review

A review sought to describe a) the association between alcohol consumption and the risk of type 2 diabetes (T2D) and b) the impact of alcohol on the glycaemic control with and without anti-diabetic drugs.

For the first part of the review the researchers selected meta-analyses, review articles and observational studies more recent than year 1990 including at least 1000 participants. For the second part of they included all articles more recent than year 1990. Most observational studies find a J-shaped association between alcohol intake and incidence of T2D. Interestingly, drinking pattern plays a role, i.e. binge drinking increases the risk of T2D. Opposing information exists about the influence of beverage type. In T2D the acute effects on plasma glucose, insulin, fatty acids and triglyceride vary, in part

depending on concomitant intake of food. Acute alcohol intake does not induce hypoglycemia in diet treated T2D, but increases the risk of hypoglycemia in sulphonylurea treated patients. In most studies, long-term alcohol use is associated with improved glycaemic control in T2D.

The researchers conclude that moderate alcohol consumption reduces the incidence of T2D, however, binge drinking seems to increase the incidence. Acute intake of alcohol does not increase risk of hypoglycemia in diet treated subjects with T2D, only when sulphonylurea is co-administered. Long-term moderate alcohol use seems to be associated with improved glycaemic control in T2D probably due to improved insulin sensitivity.

Source: Alcohol and type 2 diabetes. A review A. Pietraszek, S. Gregersen, K. Hermansen. Nutrition, Metabolism and Cardiovascular Diseases, Volume 20, Issue 5, Pages 366-375

Moderate alcohol consumption is associated with other healthy lifestyle factors

An analysis based on a very large number of subjects in France demonstrates, that moderate consumers of alcohol have many associated healthy lifestyle habits: lower levels of body mass index, blood glucose, heart rate, stress and depression scores; higher subjective health status, HDL-cholesterol values, levels of physical activity and social status. The authors suggest that alcohol is not related causally to any of these factors, and that the other lifestyle factors, not alcohol consumption, are the reason that moderate drinkers have less cardiovascular disease. They chose a very narrow group of citations from the literature to support this contention.

The authors ignore a large number of well-conducted prospective epidemiologic studies showing that moderate drinkers are at lower risk over time of developing certain risk factors. Further, the authors of this paper ignore an immense basic science literature that suggests that alcohol is an important factor in the development of biological risk factors, atherosclerosis, and cardiovascular disease. Further, they do not describe a number of studies that

have shown specifically that moderate drinking is associated with less cardiovascular disease and diabetes among subjects who are otherwise very healthy (non-smokers, not obese, physically active, and on a healthy diet).

There is no doubt that confounding by associated lifestyle factors can play a role in the lower risk of chronic diseases among moderate drinkers, who tend to also have other healthy behaviours. However, there is now a large body of scientific evidence that indicates that alcohol is an important factor in the lower rates of such diseases; current scientific data do not support the conclusions of the authors of this paper.

Reference: Hansel B, Thomas F, Pannier B, Bean K, Kontush A, Chapman MJ, Guize L, Bruckert E. Relationship between alcohol intake, health and social status and cardiovascular risk factors in the urban Paris-Ile-De-France Cohort: is the cardioprotective action of alcohol a myth? European J Clin Nutrition, advance online publication, doi:10.1038/ejcn.2010.61.

For the full critique of this paper by the International Scientific Forum on Alcohol Research, please www.alcoholforum4profs.org

High-density lipoprotein subclasses are a potential intermediary between alcohol intake and reduced risk of cardiovascular disease

A low serum level of High Density Lipoprotein Cholesterol (HDL-C) is a significant independent risk factor for cardiovascular disease, at the same time a high HDL-C has been shown to be protective. The Rancho Bernardo Study compared HDL-C and HDL subclasses of 2171 community-dwelling older adults with their consumption of alcoholic beverages. Participants were categorised according to reported intake of alcoholic beverages (g per week) and frequency of drinking. After adjusting for differences in age, BMI, diabetes, current smoking, exercise and hormone therapy in women, the results showed that regular moderate drinkers had a higher number and percentage of large HDL particles than non-drinkers.

These findings indicate that one possible mechanism of alcohol decreasing the CVD risk is through favourable changes in the lipoprotein composition. The authors conducted a cross-sectional study of NMR-derived HDL subclasses and alcohol intake among 2171 community-dwelling older adults with a large proportion of daily or near-daily alcohol consumers (44 %). The study aimed to assess whether, in addition to increasing total HDL, alcohol may induce a beneficial shift in HDL particle size distribution. Participants were categorised based on reported alcohol intake (g per week) and on

frequency (none, < 3 times/week, 3-4 times/week, >= 5 times/week). The association between alcohol intake and lipoprotein fractions was examined using sex-specific linear regression models adjusted for age, BMI, diabetes, current smoking, exercise and hormone therapy in women.

The study found that there was a stepwise gradient with the highest weekly alcohol consumption associated with the highest total HDL size and greatest number of medium and large HDL particles, as well as higher total HDL concentrations (all $P < 0.001$); total small HDL did not differ. Alcohol-HDL size associations were similar in both sexes and did not differ by use of hormone replacement therapy in women.

The authors conclude that regular alcohol consumers had a higher number and percentage of large HDL particles than non-drinkers. These results suggest that one way that alcohol may decrease cardiovascular disease is through potentially favourable changes in lipoprotein subclass composition.

Source: High-density lipoprotein subclasses are a potential intermediary between alcohol intake and reduced risk of cardiovascular disease: The Rancho Bernardo Study. Muth ND, Laughlin GA, von Muhlen D, Smith SC, Barrett-Connor E. *Br J Nutr* 2010;

A 42-year-old man considering whether to drink alcohol for his health

In his article published in June in the *Journal of the American Medical Association*, Kenneth J. Mukamal, MD, MPH, states that 'Alcohol consumption is widespread and, in excess, a leading cause of morbidity and mortality worldwide. At the same time, a consistent body of observational evidence has found that individuals who consume alcohol within recommended limits have a lower risk of coronary heart disease than do abstainers.'

Mukamal states that these observations have led many to consider small amounts of alcohol as a cardioprotective strategy. He puts forward a theoretical case for discussion and exploration: Mr Q, a 42-year-old man who has consistently sought ways to preserve his health, is at a crossroads in his

discussions with his physicians about the health effects of his regular, limited alcohol intake.

The discussion reviews the epidemiology of drinking in the United States, the established effects of moderate alcohol intake on key pathophysiological biomarkers and pathways, the strengths and limitations of observational evidence linking alcohol intake to lower risk of coronary heart disease, other chronic diseases linked to moderate alcohol intake, and a framework in which MrQ can discuss the potential risks and benefits of alcohol consumption with his physicians.

Source: A 42-Year-Old Man Considering Whether to Drink Alcohol for His Health Kenneth J. Mukamal, MD, MPH, *JAMA*. 2010;303(20):2065-2073 <http://jama.ama-assn.org/>

Mediterranean diet and red wine protect against oxidative damage in young volunteers

A study based in Chile aimed to compare the effect of a Mediterranean diet (MD) versus an Occidental diet (OD) on oxidative damage, in young adult volunteers, with or without the concomitant intake of red wine.

Forty-two omnivorous male students 20–27 years old were given either diet for 3 months. During the first and third month they received the prepared diets alone but during the second month they also had 240 ml/day of red wine. Blood and urine samples were taken at 0, 30, 60, and 90 days for analyses. A linear mixed effect model was used to compare the effect of both diets and wine, controlling values by baseline measurements.

Results showed that the Mediterranean diet increased plasma vitamin C, β -carotene and total antioxidant reactivity (TAR). OD increased plasma vitamin E. Wine supplementation, analyzed combining both diet groups, raised plasma vitamin C, β -carotene, uric acid, TAR, plasma and urinary polyphenols

and decreased plasma vitamin E. Also wine intake increased concentration of red blood cell (RBC) glutathione while significantly decreasing plasma glutathione. In oxidative damage measurements OD group showed higher concentration of 8-hydroxy-2'-deoxyguanosine (8-OHdG) in DNA from peripheral blood leukocytes and plasma nitrotyrosine, when compared with MD group. Wine intake significantly decreased 8-OHdG and plasma nitrotyrosine in both diets, particularly in OD.

The study concludes that the study participants on a mediterranean diet showed better antioxidant defenses and less oxidative damage than those on OD. Moderate wine consumption improved antioxidant defenses in both groups and counteracted the oxidative damage observed with OD.

Source: Mediterranean diet and red wine protect against oxidative damage in young volunteers *Atherosclerosis* Available online 21 April 2010.

Low–moderate prenatal alcohol exposure and risk to child behavioural development: a prospective cohort study

Australian researchers examined the association of fetal alcohol exposure during pregnancy with child and adolescent behavioural development. They found that the children of women who were light or moderate drinkers (2 to 6 drinks per week or one per day) early in pregnancy tended to have “more positive” behaviour than the children of mothers who did not drink at all early in pregnancy.

The study recruited 2,900 pregnancies (1989–91) and the 14-year follow up was conducted between 2003 and 2006 at the Tertiary obstetric hospital in Perth, Western Australia. The women in the study provided data at 18 and 34 weeks of gestation on weekly alcohol intake: no drinking, occasional drinking (up to one standard drink per week), light drinking (2–6 standard drinks per week), moderate drinking (7–10 standard drinks per week), and heavy drinking (11 or more standard drinks per week).

Longitudinal regression models were used to analyse the effect of prenatal alcohol exposure on Child Behaviour Checklist (CBCL) scores over 14 years,

assessed by continuous z-scores and clinical cutoff points, after adjusting for confounders. Their children were followed up at ages 2, 5, 8, 10 and 14 years. The CBCL was used to measure child behaviour.

Results showed that light drinking and moderate drinking in the first 3 months of pregnancy were associated with child CBCL z-scores indicative of positive behaviour over 14 years after adjusting for maternal and sociodemographic characteristics. These changes in z-score indicated a clinically meaningful reduction in total, internalising and externalising behavioural problems across the 14 years of follow up.

The authors state that their findings do not implicate light–moderate consumption of alcohol in pregnancy as a risk factor in the epidemiology of child behavioural problems.

Source: Low–moderate prenatal alcohol exposure and risk to child behavioural development: a prospective cohort study. Robinson M, Oddy W, McLean N, Jacoby P, Pennell CE, de Klerk N, Zubrick S, Stanley F, Newnham J. *BJOG* 2010; DOI:10.1111/j.1471-0528.2010.02596.x.

Binge drinkers report sub-optimal health status more often than non-binge drinkers

A new study has looked at the frequency of binge drinking in relation to drinkers' own perceptions of their overall health status. Findings indicate that binge drinkers have a 13% - 23% greater likelihood of reporting lower health status.

Researchers examined a total of 200,587 adult, current drinkers (89,919 men, 110,668 women) who participated in the 2008 Behavioural Risk Factor Surveillance System (BRFSS). The BRFSS asked participants to rate their health by answering the question: "Would you say that, in general, your health is excellent, very good, good, fair, or poor?" Study authors then estimated the prevalence of binge drinking and heavy drinking (defined as an average of 14 drinks (of 14g) per week for men, and seven or more drinks (of 14g) per week for women), as well as the frequency of binge drinking (defined as the number of binge episodes reported by drinkers during a 30-day period). Self reported health was then

divided into the categories of optimal (excellent, very good, or good) and sub-optimal (fair or poor).

"The results indicate that binge drinking continues to be a serious public health concern across the lifespan," said James Tsai, an epidemiologist at the Center for Disease Control and Prevention (CDC) and corresponding author for the study.

"These results are significant because persons who report lower self-rated health are at greater risk of hospitalisation and death than persons who report higher self-reported health," said Robert D. Brewer, alcohol programme leader at the CDC. "Consequently, this study adds to the growing body of scientific evidence showing that binge drinking is associated with a with many serious public health outcomes, including hospitalisations and deaths."

Results will be published in the August 2010 issue of *Alcoholism: Clinical & Experimental Research* and are currently available at [Early View](#).

Gene-environment interactions in 7610 women with breast cancer: prospective evidence from the Million Women Study

Ruth Travis of the Cancer Epidemiology Unit at the University of Oxford and colleagues investigated the combined effects on breast cancer incidence of low-penetrance genetic susceptibility polymorphisms and environmental risk factors for breast cancer (reproductive, behavioural, and anthropometric). The findings are published in the June edition of the *Lancet*.

To test for evidence of gene—environment interactions, the researchers compared genotypic relative risks for breast cancer across the other risk factors in a large UK prospective study.

The researchers tested gene—environment interactions in 7,610 women who developed breast cancer and 10,196 controls without the disease, studying the effects of 12 polymorphisms in relation to prospectively collected information about ten established environmental risk factors (age at menarche, parity, age at first birth, breastfeeding, menopausal status, age at menopause, use of hormone replacement therapy, body-mass index, height, and alcohol consumption).

After allowance for multiple testing none of the 120 comparisons yielded significant evidence of a gene—environment interaction. By contrast with previous suggestions, there was little evidence that the genotypic relative risks were affected by use of hormone replacement therapy, either overall or for oestrogen-receptor-positive disease. Only one of the 12 polymorphisms was correlated with any of the ten other risk factors: carriers of the high-risk C allele of MAP3K1-rs889312 were significantly shorter than non-carriers (mean height 162.4 cm [95% CI 162.1—162.7] vs 163.1 cm [162.9—163.2]; $p=0.01$ after allowance for multiple testing).

The researchers conclude that risks of breast cancer associated with low-penetrance susceptibility polymorphisms do not vary significantly with these ten established environmental risk factors.

Source: Gene-environment interactions in 7610 women with breast cancer: prospective evidence from the Million Women Study. Ruth C Travis, Gillian K Reeves, Jane Green, Diana Bull, Sarah J Tipper, Krys Baker, Valerie Beral, Richard Peto, John Bell, Diana Zelenika, Mark Lathrop, for the Million Women Study Collaborators. *The Lancet*, Volume 375, Issue 9732, Pages 2143 - 2151, 19 June 2010

Volvo to introduce alco-lock technology in UK

In-car technology to prevent driving over the alcohol limit could arrive in the UK by the end of the year.

Chris Wailes, large cars product manager at Volvo. Wailes explained that the company has an alco-lock system called Alcolock that is already available, but that he hoped to see its arrival by the end of 2010.

Already available on Volvo cars in Sweden, where fleets including Carlsberg and many taxi firms use Alcolock, Wailes said the product would be an add-on and not expensive, although the cost is as yet undetermined for the UK market. The technology

prevents drivers from starting the engine if they are over a certain alcohol limit – this can be adjusted from zero tolerance to the national limit.

The system is currently open to abuse with drivers able to ask other people to blow into the breathalyser. However, Volvo said future generations of Alcolock will be fully integrated into the car allowing breath to be monitored without the use of a breathalyser. Such systems will eventually be replaced by skin sensors on steering wheels within five years, which will be able to test for alcohol exposure.

Diageo invests in Purple Flag scheme in the UK

Diageo is to invest around £100,000 over three years as headline sponsor of the 'kitemark' scheme that recognises safe and successful nighttime economies. Purple Flag status is given to nightspots that are judged to have taken strides to improve the environment at night for visitors and residents. This includes tackling alcohol-related disorder, with pubs and clubs playing a key part.

Nine areas have achieved Purple Flag status; three of them - Liverpool, Nottingham and Clerkenwell in London - gained accreditation in June.

Other accredited areas are Bath, Birmingham, Manchester, Kingston-upon-Thames, and Covent Garden and Leicester Square in London.

For more information, visit www.atcm.org/purple-flag/index.php #WHAT%20IS%20PURPLE%20FLAG?



UK Government publishes wide-ranging alcohol policy document

The UK coalition government has published a wide-ranging document detailing its alcohol policy, which includes plans to overhaul the Licensing Act, conducting a review of the tax regime for alcoholic drinks, and a commitment to ban below-cost retail sales of alcohol. Most of the plans laid out in the document were contained in the Tories' election manifesto. Among the plans for overhauling the Licensing Act are promises to increase fines for under-age alcohol sales to a maximum of GBP 20,000, granting more powers to local authorities and police forces to remove licences, and cutting red tape to encourage more performance of live music.

The document states "We will overhaul the Licensing Act to give local authorities and the police much stronger powers to remove licences from, or refuse to grant licences to, any premises that are causing problems... We will allow councils and the police to shut down permanently any shop or bar found to be persistently selling alcohol to children. We will double the maximum fine for under-age alcohol sales to £20,000. We will permit local councils to charge more for late-night licences to pay for additional policing."

UK Government resources

The Department of Education has formally replaced the DCSF. The new website can be found via: www.education.gov.uk.

Following the announced freeze on government communications activity, the Why Let Drink

Decide? website will be taken down on 30 June. Information and advice about young people and alcohol can be found on DirectGov at www.direct.gov.uk/en/Parents/Yourchildshealthandsafety/Youngpeopleandalcohol/index.htm.

NHS publish 'Statistics on Alcohol' in UK

'Statistics on Alcohol, England 2010' was published by the NHS in May. This statistical report presents a range of information on alcohol use and misuse which are drawn together from a variety of published sources and includes additional analysis undertaken by the NHS Information Centre for health and social care.

The report aims to present a broad picture of health issues relating to alcohol in England and covers topics such as drinking habits and behaviours among adults (aged 16 and over) and school children (aged 11 to 15), drinking-related mortality, affordability of alcohol and alcohol-related costs. Drinking behaviour among adults and children.

Key facts from the report include:

In England, in 2008:

- 71% of men and 56% of women (aged 16 and over) reported drinking an alcoholic drink on at least one day in the week prior to interview. 11% of men and 6% of women reported drinking on every day in the previous week.

22% of men reported drinking over 8 units and 15% of women reported drinking over 6 units on at least one day in the week prior to interview.

- The average weekly alcohol consumption was 16.8 units for men and 8.6 units for women.

- 28% of men reported drinking more than 21 units in an average week. For women, 19% reported drinking more than 14 units in an average week.

- 18% of school pupils aged 11 to 15 reported drinking alcohol in the week prior to interview; this figure is lower than 2001, when 26% of pupils reported drinking in the last week.

- 48% of pupils said they had never had a proper alcoholic drink, compared to 39% in 2003.

- Pupils who drank in the last week consumed an average of 14.6 units.

- In 2006 to 2008, young people in London were less likely to have drunk alcohol in the last week (39%) than young people living in any other Government Office Region (51% to 63%).

Knowledge and attitudes to alcohol

- In 2009, 90% of Great Britain (GB) respondents reported that they had heard of measuring alcohol in units.

- There has been an increase from 54% in 1997 to 75% in 2009 in the proportion of people in GB who had heard of daily drinking limits. Throughout the period, differences between men and women have been slight.

- Pupils in England aged 11 to 15 are becoming less tolerant of drinking and drunkenness among their peers. For example, in 2008, 36% agreed that "it was OK for someone of their age to drink alcohol once a week", compared with 46% in 2003.

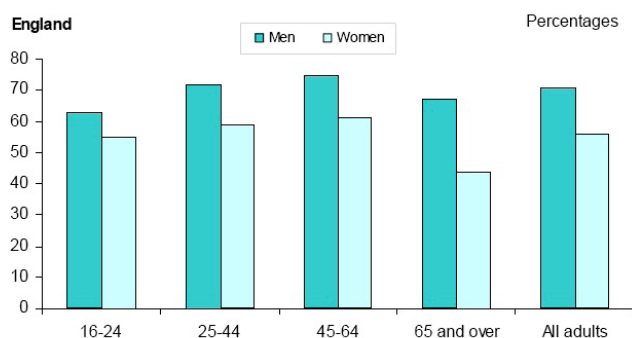
Drinking related costs, ill health and mortality in England:

- In 2007, 6% of men and 2% of women are estimated to be harmful drinkers, the most serious form of hazardous drinking, which means that damage to health is likely.

- In 2008, there were 6,769 deaths directly related to alcohol. Of these alcohol related deaths, the majority (4,400) died from alcoholic liver disease.

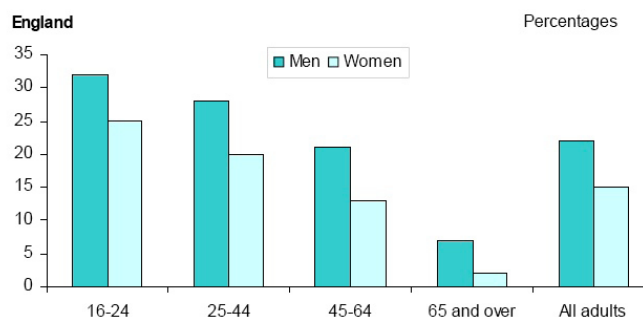
The report is available from <http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles/alcohol/statistics-on-alcohol-england-2010>

Figure 2.1 Proportion of adults who drank in the last week, by age and gender, 2008



Source: General Lifestyles Survey 2008, Office for National Statistics (ONS) Copyright © 2010, re-used with the permission of the Office for National Statistics

Figure 2.2 Adults whose maximum daily amount of alcohol in the last week was more than 8 units (men) or 6 units (women), by age and gender, 2008



Source: General Lifestyle Survey 2008, Office for National Statistics (ONS) Copyright © 2010, re-used with the permission of the Office for National Statistics

World Cup 'designated a driver' TV campaign from Budweiser in UK

AB InBev UK is promoting responsible drinking with the launch of a new TV advert from Budweiser to coincide with the brand's sponsorship of the 2010 FIFA World Cup.

The 30 second advert urges consumers to 'Designate a Driver' and will run until 11 July. The campaign includes a consumer and stakeholder outreach to highlight the message behind the campaign.



According to results of a survey conducted last month in the UK by Custom Research, 51% of respondents were aware of the concept of a designated driver. *"More than half of UK respondents were familiar with the concept of a designated driver, but it's clear that there is an opportunity to educate consumers about the concept of a designated driver, and to encourage consumers to plan ahead in order to get home safe"* James Watson marketing director at Budweiser Western Europe said.

The survey showed that 84% of respondents think that promoting the use of designated drivers is a good way to reduce drink driving.

Budweiser's 'Designate a Driver' ad features on ITV, Channel 4, Five and Sky and will be available on video-on-demand channels throughout the tournament.

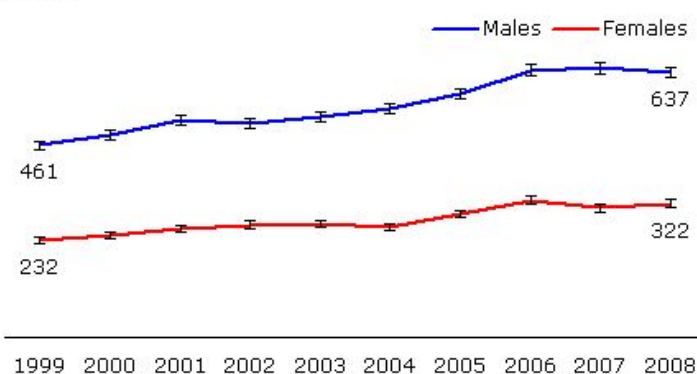
Hospital admissions due to alcohol levelling off in Wales

Public Health Wales report that the latest data for both alcohol-attributable and alcohol-specific hospital admissions are levelling, ending a previously upward trend.

A similar pattern has been observed for alcohol-attributable and alcohol-related mortality rates which, after rising over many years, have recently stabilised. The number of hospital admissions remains high, with around 14,500 alcohol-specific hospital admissions in 2008. Using the wider definition of alcohol-attributable hospital admissions, there were around 54,000 admissions in Wales in 2008.

Alcohol-specific hospital admissions in Wales residents, European age-standardised rate (EASR) per 100,000, 1999-2008

Source: Public Health Wales Observatory using PEDW (HSW), MYE (ONS), definition (NWPHO)



UK report recommends reduction in legal BAC limit for drivers

A study by the National Institute for Clinical Excellence (NICE) has estimated that cutting the drink-drive limit for motorists in England and Wales could prevent around 3,000 road injuries and 145 deaths in the first year. The findings of the study, carried out on behalf of the Department for Transport, will be considered as part of the Department's review of drink and drug driving law led by Sir Peter North.

The report states that reducing the limit from 80mg to 50mg/100ml, in line with most countries in Europe, will result in major improvements to road safety. According to the report, the introduction of a limit of 50mg/100ml in fifteen countries in Europe collectively led to 11.5% fewer alcohol-related driving deaths amongst 18-25 year olds - the age group most at risk of being involved in accidents. In 2008, in the UK 420 people were killed in drink-driving accidents, accounting for 17% of all road fatalities, but this is one of the lowest figures per capita and per road mile travelled anywhere in the world.

The report acknowledges that for the reduction in the legal BAC limit to effectively change people's attitudes to drink-driving and improve road safety in the long term, it must be supported by ongoing publicity, as well as visible and rapid enforcement.

The report is available from <http://guidance.nice.org.uk/OtherPublications>

Report on progress of self regulation in alcohol advertising in Europe



On 26 May, EASA and The Brewers of Europe, published a report on the progress of self-regulation in alcohol advertising. Compiled by the EASA secretariat, independently reviewed by KPMG Sustainability and published by The Brewers of Europe, the report

“Responsible beer advertising through self-regulation” reflects the progress made in the implementation of the commitment to the European Alcohol and Health forum in relation to the advertising self-regulation.

Backing The Brewers of Europe’s work, Robert Madelin, Director General, European Commission stated in the report’s foreword, “The Brewers have worked consistently and in consultation with the European Advertising Standards Alliance to deliver effective and credible self-regulation with progressively broader European coverage.”

Europe-wide initiative

Europe’s brewers already had advertising self-regulation codes in place, but wished to ensure all these were operating within credible and effective advertising self-regulation systems. The setup and the scale of the advertising self-regulation initiative were unprecedented: The Brewers took the European Commission’s comprehensive best practice model and developed 7 Operational Standards, for the enhancement of advertising self-regulation systems and responsible beer communications in all the European countries. The report demonstrates substantial progress made, with Self-regulation systems were set up in countries where they did not exist before; 10 countries improved their complaints handling systems through further incorporation of independent elements; Consumer awareness of advertising self-regulation systems was increased in 24 out of 27 countries; and 26 countries have a complaints handling system in place with effective sanctions.

EASA was asked to write the report in its capacity as the independent expert in advertising self-regulation in Europe. The Brewers of Europe have partnered with EASA with the common goal to ensure effective advertising self-regulation across the EU 27, helping

to set up SROs where these do not exist yet, reinforcing existing self-regulatory systems, and helping to ensure responsible commercial communication for beer advertising. This corresponds to the commitments made in the EASA’s Charter which among others include to strengthen self-regulation in all forms of advertising. This report is one example of the cooperation at the European level, initiated several years ago through monitoring and training events with advertising professionals and representatives of the beer industry.

The report is available for download at: http://www.brewersofeurope.org/docs/flipping_books/responsible_beer_ad_2010/files/100507_sr_report_on_7_os_final_lr.pdf

UK: 520,000 people work with a hangover every day

A new survey from Drinkaware claims that over 520,000 people arrive for work suffering from hangovers after drinking too much the previous night on a daily basis. Almost one in 10 people in the UK admitted to going into work with a hangover at least twice a week, with one in five admitting that it has had an adverse effect on their work. 17% of those that admitted to working with hangovers also admitted that it has caused them to fall behind or make mistakes, while 7% said that they had to go home early as they felt unwell. 90% admitted that coming in with a hangover was ‘unacceptable’ though three out of five said that they had joked about suffering from their hangover.

Ireland: date set for the introduction of a new BAC limit

Noel Dempsey, the Minister for Transport in Ireland, announced that the new BAC limit for driving of 50mg will be effective from September 2011. Dempsey stated that the September 2011 date will give the Medical Bureau of Road Safety time to purchase 86 breath testing machines that can test the new limits.

The Road Traffic Bill 2009 including the reduced drink-drive limit was passed by the Dail on 23 June 2010.

Polish drink drive campaign

In Poland in 2009, the Polish Spirits Producers (PPS) together with the Police and the National Road Safety Authority launched a huge national “Don’t drink and drive” campaign. There were adverts on TV and radio; 450 poster billboards across several cities, more than 200,000 leaflets distributed in bars as well as increased police checks on the roads. The campaign was also promoted via the internet through a dedicated website www.pilesniejedz.pl (donotdrinkanddrive.pl) and on social networks such as Facebook and other sites often visited by the target group like www.activist.pl (portal dedicated to clubbers) and www.students.pl.

The campaign was independently evaluated by interviewing over 400 people on the streets in the busiest transport hubs in the Polish cities of Lublin and Olsztyn, but the campaign itself was rolled out throughout Poland.

The evaluation showed that:

- The most effective medium was TV: 78% of the respondents watched and remembered the TV spot “Been drinking? Don’t drive!”
- 59% of the target group noticed the billboards in nearby busy public transport stations
- The radio spot reached 44% of the target group
- 35% of the participants had seen the internet campaign and 25% of the respondents had received the leaflet.
- Respondents said the campaign “Don’t drink and drive!” was practical, worthwhile, informative, comprehensive, interesting and factual.

In terms of impact, it is important to note that 46% of the respondents declared that, thanks to the campaign, they will change their attitude toward driving a car under the influence of alcohol and 77% declared they will try to withhold others from drinking and driving.

The campaign will continue to be developed and rolled-out in more cities in Poland.



Italy campaign to stop expectant women drinking

In Italy, shock tactics are being used to warn women of the dangers of drinking while pregnant, launching a campaign based on the image of a foetus inside a cocktail glass.

The campaign aimed at warning pregnant women about the dangers of alcohol, shows the foetus in a curled up position at the bottom of the glass, beneath ice cubes and a slice of orange, with the simple message “When Mum drinks, baby drinks too” (“Mama beve, bimbo beve”).

The health warning has been launched in the north-east Veneto region in response to findings by the Italian Institute of Health that 65% of women in Italy consume alcohol during their pregnancy.

The Veneto, which includes Venice, has Italy’s second highest rate of alcohol consumption, with around 67% of women saying they drink regularly. The adverts will appear on buses, on bill boards and in the women’s lavatories of bars, restaurants and nightclubs.



Spain: Teenagers drink as much alcohol as university students

Teenagers in Spain (both boys and girls) drink on average the same amount of alcohol as university students, but within a shorter period of time according to a survey carried out by Socidrogalcohol in Valencia.

Of the total 6,000 youngsters aged 14 to 18 who took part in the survey, 31.9% girls are regular binge drinkers and drink five or more alcoholic drinks in less than two hours, compared to 31.7% of female university students. Additionally, 24% of boys binge drink compared to 12% of male university students.

The survey found that young people in Spain are more likely to drink alcohol to excess between once and twice a week usually, specially on Saturday (61%); Thursday (27%) and Friday (19.9%).

The ‘botellon’ where young people drink on the street, is practised by both teenagers (69%) and university students (84%).

NICE consultation on alcohol education in UK schools

In draft guidance issued for public consultation on the 17 June, NICE makes recommendations for PHSE education in UK schools. The report states 'All children and young people are entitled to high-quality education about sex, relationships and alcohol to help them make responsible decisions and acquire the skills and confidence to delay sex until they are ready. Evidence demonstrates that this type of education delivered as part of a planned and timetabled programme by trained and confident teachers helps children and young people better understand their own physical and emotional development. Research also suggests effective sex, relationships and alcohol education can help a child make responsible, healthy and safe choices, and improve their performance at school'.

Comments on this draft guidance can be submitted via the NICE website until 15 July 2010 (www.nice.org.uk). Final guidance is expected in January 2011.

Alcohol Scotland Bill passes first stage

Following a debate in the Scottish Parliament on 11th June, a majority of MSPs voted in favour of the general principles of the Alcohol (Scotland) Bill. The Bill will now proceed to the next stage of legislative scrutiny. All MSPs agreed on the need to tackle alcohol-related harm in Scotland. There was broad support for a ban on price promotions and the principle of a social responsibility levy on alcohol retailers. However, opposition MSPs continued to oppose the introduction of minimum pricing. (Full details of the debate can be found on the Scottish Parliament website www.scottishparliament.uk).

A Conservative amendment calling on the Government to remove minimum pricing from the Bill was passed by a majority of MSPs, however it doesn't have any legal effect at this point. The Bill will move to Stage 2 where the legislation will be examined line-by-line and amendments considered.

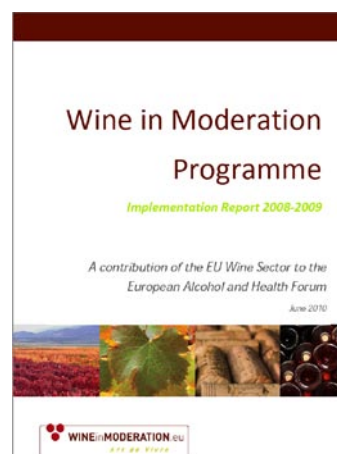
Release of the Wine in Moderation Programme implementation report 2008-2009

Two years after the launch of the Wine in Moderation Programme, the EU wine sector has produced a report to evaluate the effectiveness of the actions taken by the different players to implement the programme at EU and national level.

The report includes a detailed description of all the national initiatives to promote moderate responsible wine drinking patterns that are making of the Wine in Moderation programme a real success story.

This report is part of the wine sector's commitment to transparent and accountable monitoring of voluntary actions taken in the framework of the EU Alcohol and Health Forum.

To read the full report: www.wineinmoderation.eu/images/stories/documents/reports/Wine_In_Moderation_Report_FINAL.pdf



Vietnam alcohol policy workshop

As input to its preparation for drafting a national alcohol policy, the Health Strategy and Policy Institute (HSPI) of the Ministry of Health of the Socialist Republic of Vietnam invited ICAP to co-organise a national workshop entitled, "Sharing Experiences for the Development of the National Policy on Alcohol-related Harm Prevention and Control."

The workshop report records the main points of discussion and highlights areas of common interest among stakeholders. The report is available from www.icap.org

World health Organisation members endorse global strategy to tackle harmful alcohol use

A global strategy to reduce the harmful use of alcohol was adopted unanimously at the annual assembly of the World Health Organisation (WHO) in Geneva. Health leaders representing WHO's 193 member states agreed to wide-ranging interventions to reduce the harm caused by excessive alcohol consumption.

Suggested interventions in the global strategy include higher taxes and minimum unit prices for alcoholic drinks and tighter restrictions on alcohol marketing.

For more information on the process of developing a global alcohol strategy visit http://www.who.int/substance_abuse/activities/globalstrategy/en/index.html

Video game developed to help recovering alcoholics

A video game being developed by the University of Central Florida (UCF) and the Veterans Affairs Medical Center (VAMC) in Charleston, S.C. hopes to help recovering alcoholics reintegrate with sober life and prevent recidivism.

The game, called "Guardian Angel," works by leading the player through a series of mini games that mimic the choices addicts face leaving rehabilitation. For instance, players begin the game without a job or driver's license, and must complete objectives such as planning routes around the city without passing a liquor store, or ridding their homes of alcohol and related triggers. The game also includes an emotional component, with a "craving meter" that keeps track of the user's character's stress level and state of mind. If those cravings get too high, the player relapses.

Dr. Marcia Verduin, one of the UCF professors developing the game, said the hope is that players will make these mistakes in the game to see what happens instead of doing it in the real world. Another professor involved with the project said they also wanted to make practicing relapse skills more enjoyable.

The current pool comprises 40 VAMC volunteers. Once research on a larger sample is complete, the professors hope to make the game available for free on the internet.

Russia : Night ban proposed on some alcoholic drinks

A Kremlin-backed bill to ban late-night sales of alcoholic beverages with an alcohol level of more than 5% at stores and kiosks has been submitted to the government. The legislation prohibits sales of beverages with more than 5% alcohol content from 11 pm to 8 am, except in restaurants and cafes.

Regional authorities will have the right to change the hours of the ban. The bill was drafted by the Federal Agency for Regulation of the Alcohol Market on a September order from President Dmitry Medvedev.

The government published an anti-alcohol strategy in December that aims to reduce national consumption by 15% by 2012 and by another 55% by 2020. Official data show that at least 2 million Russians in a population of 142 million are alcoholics, and more than 100,000 die every year of alcohol-related causes.

Moscow barred nighttime sales of alcoholic beverages stronger than 15% in January 2006, except in restaurants and cafes. But the new legislation imposes a tougher limit.

Campaign to prevent alcohol consumption among under aged launched in Honduras

Honduran brewer Cerveceria Hondurena (CHSA) has joined forces with the Honduran Institute for the Prevention of Alcoholism, Drug Addiction and Pharmaceutical Dependence (Ihadfa) and launched an awareness campaign aimed at preventing the consumption of alcoholic beverages among children and teenagers.

The campaign will run on TV, radio, press and Internet through the website www.sacaelpadre.com



Parents play an active role in changing the drinking culture

A study, published in the June edition of the Australia and New Zealand Journal of Public Health, questioned mothers on their intentions to introduce their adolescents to alcohol use, the research also captured data on whether the parent's alcohol use affected those intentions.

The study found that the majority of Australian mothers (68%) interviewed believed that they had a role to play in educating their children about alcohol use and that this role should extend beyond their child reaching the legal drinking age of 18-years. Mothers were also concerned that their efforts to teach their children about responsible alcohol consumption might be overridden by Australian Cultural expectations (39%).

The report found that mothers' intentions to initiate their children into alcohol use were remarkably similar despite differences in mothers' own alcohol use. This suggests that approaches to education and

guidance for parents are unlikely to need to take mothers' alcohol use into account when planning ways to support parents in this aspect of their role, at least for mothers of early adolescents.

CEO DrinkWise Australia, Cath Peachey said that they are positive on two fronts; "Firstly, they show that mothers realise that they have a role to play in influencing their children's consumption of alcohol; and secondly, they recognise the need for cultural change," Ms Peachey said.

DrinkWise has launched two multi-faceted social marketing campaigns - Kids Absorb Your Drinking and Kids and Alcohol Don't Mix. Both campaigns empower parents to positively influence their Children's future drinking behaviour.

Source: Mothers' intentions to introduce their adolescent to alcohol use: does mothers' alcohol use effect intentions? Rachel Roberts , Melinda Beckwith David Watts Australian and New Zealand Journal of Public Health, Volume 34 Issue 3, Pages 281 – 287. Published Online: 1 Jun 2010

ICAP launch global actions website

The International Center for Alcohol Policies (ICAP) has announced the launch of www.global-actions.org, the inaugural website for Global Actions on Harmful Drinking.

The companies sponsoring Global Actions on Harmful Drinking have established three initiatives to address the harmful use of alcohol around the world.

The activities documented at www.global-actions.org are the result of a collective commitment made by the chief executives of major international beverage alcohol producers to make a significant effort in the 2010-2012 time frame to address harmful drinking through a combination of global and local actions, with an emphasis on low- and middle-income countries. The website at www.global-actions.org offers user discussion pages, publications and other resources, and background information on three critical initiatives launched in the areas of self-regulation, drink driving, and noncommercial alcohol.

The companies sponsoring Global Actions on Harmful Drinking have launched three critical initiatives to address the harmful use of alcohol.

- Self-Regulation—with a focus on Argentina, Brazil, CARICOM region countries, China, India,

Mexico, Nigeria, Philippines, Rwanda, Ukraine, and Vietnam;

- Drink Driving—with a focus on China, Colombia, Mexico, Nigeria, Russia, and Vietnam; and
- Noncommercial Alcohol—with a focus on Belarus, Brazil, Botswana, China, Estonia, India, Kenya, Mexico, Russia, and Sri Lanka.

2010 Hohaiyan Musical Event Designated Driver Let's GO!

Brewers of Tiawan are promoting a designated driver event at the 2010 Hohaiyan Musical Event 'Designated Driver Let's GO!' also has a facebook page http://apps.facebook.com/i_am_des The 2010 Hohaiyan Musical Event at Kungliao runs for 3 days from July 9th-11th.



Alcohol use in Denmark: a descriptive study on drinking contexts

Using data from the National Health and Morbidity Survey from 2005 a recent study examined the contexts of alcohol use in Denmark in relation to gender and age. Among the 21,832 subjects invited to participate, 14,566 completed the survey. For the entire study population and restricted to heavy users (>21 standard drinks per week for males; >14 for females), the authors of the study computed the prevalence of each age and gender group who indicated to drink alcohol in different drinking contexts. To compare the contexts for heavy use between age groups, they estimated prevalence ratios for each group compared to the 16-20-year-old age group, with adjustments for gender.

Results showed that more than 68% of the study population drank alcohol in social contexts, such as at home with/visiting family and friends, or in party

contexts. Similar patterns were found amongst males and females; however, there was a predominance of males for drinking alcohol during work and leisure-times. The majority of heavy users also drank alcohol in social and party contexts. Among heavy users, drinking at home alone was eight times more prevalent among those aged 45-64 compared with those aged 16-20 years.

The authors conclude that drinking contexts varied in relation to gender and age. The findings may provide useful insight into contexts for alcohol use in Denmark and give a better understanding of some of the many aspects associated with alcohol use.

Source: Alcohol use in Denmark: a descriptive study on drinking contexts Author: Gronkjaer M; Vinther Larsen M; Curtis T; Gronbaek M; Norgaard M. Journal: Addiction Research and Theory Citation: Vol 18, No 3, 2010, pp359-370

Reproductive health: Findings from the Australian Longitudinal Study on Women's Health

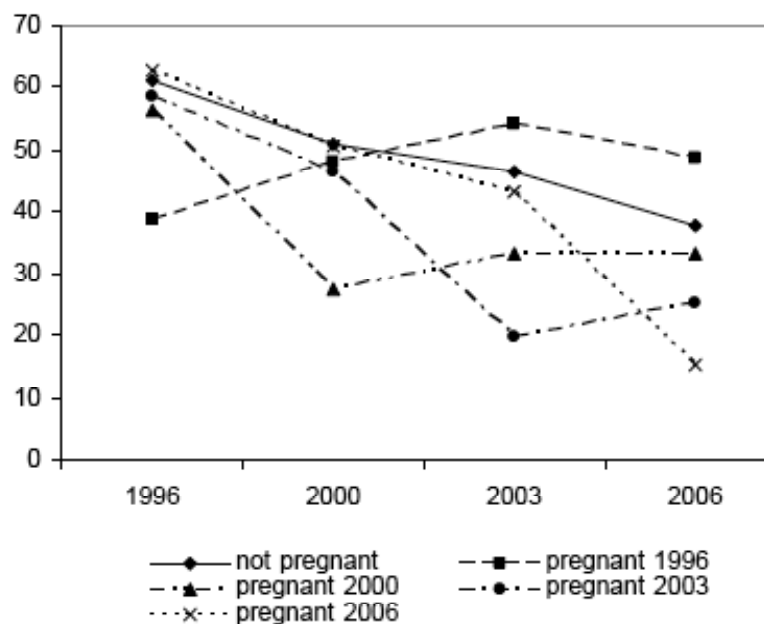
A report focussing on the reproductive health of women from the Australian Longitudinal Study of Women's Health (ALSWH). The report was developed on the basis of discussions between the ALSWH research team and the staff of the Australian Government Department of Health and Ageing and has the broad aim of examining reproductive health among Australian women of child bearing ages.

In section 6.5. Use of tobacco and alcohol during pregnancy the report examines the prevalence of tobacco and alcohol consumption among non-pregnant women and before, during and after pregnancy. Of women who were smokers and not pregnant at any survey 30% quit smoking over the ten years from 1996 to 2006. At least half the women who were smokers before pregnancy quit smoking during pregnancy, but 30% or more did not. Of women who were drinking at risky levels (for pregnant women) but were not pregnant at any survey, 40% stopped risky drinking over the ten years from 1996 to 2006. More than half the women who were drinking at risky levels (for pregnant women) before pregnancy stopped drinking at those levels during pregnancy,

but 35% or more did not. Women who were younger were more likely to smoke or to consume alcohol at risky levels during pregnancy.

The full report is available from www.alswh.org.au/reports/OtherReportsPDF/majorreportD2010.pdf

Figure 6.6 Prevalence of risky drinking among women who were pregnant at any survey or were pregnant at only one survey



Italy: harmful or protective factors?

A study examined the relationship between cultural norms and drinking practices in Italian young people using qualitative interviewing techniques. The researchers collected self-reported drinking history information from young people including whether they were allowed alcohol with meals in a family setting when growing up.

Ethnographic interviews were held with 80 adolescent (ages 16-18) and 80 young adult (ages 25-30) regular and heavy drinkers in two regions (Abruzzo and Umbria). All 20 Italian regions produce wine. Abruzzo has a high ratio of heavy drinkers while Umbria has a high ratio of regular drinkers. Questions included age at first drink, first 5+, first drunk, context of drinking, drinking with family during meals, availability of alcohol at home, parent's relationship to, attitudes about and discussion about alcohol.

Half of regular and heavy drinkers were allowed alcohol in a family setting while growing up. Those allowed alcohol with meals when growing up consumed less on their first drink occasion and were more likely to never drink 5+ or get drunk than those not allowed. They also had reduced or delayed 5+ or drunk occasions.

The authors conclude that in Italy the tradition of incorporating alcohol with meals in a family setting may protect against harmful drinking. Other qualitative research should explore family, other adult and peer relationships to clarify alcohol use and risk-related behaviors. Research in countries with similar and different early age introduction would increase knowledge about the protective aspect of drinking in a family setting.

Source: Italy: harmful or protective factors? Strunin L; Lindeman K; Tempesta E; Ascani P; Anav S; Parisi L Journal: Addiction Research and Theory Vol 18, No 3, 2010, pp344-358

Summary of new dietary advice on drinking alcohol for Americans

The US Dietary Guidelines Advisory Committee (DGAC) has issued its recommendations for the new Dietary Guidelines for Americans 2010, which are now open for a period of public comment. The dietary guidelines are jointly issued and updated every five years by the Departments of Agriculture (USDA) and Health and Human Services (HHS).

The guidelines relating to alcohol are as follows:

'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. Moderate alcohol consumption is defined as average daily consumption of up to one drink per day for women and up to two drinks per day for men and no more than three drinks in any single day for women and no more than four drinks in any single day for men. One drink is defined as 12 fl. oz. of regular beer, 5 fl. oz. of wine, or 1.5 fl. oz. of distilled spirits.

The substantial epidemiological literature is based on studies where individuals report their "average" intake as drinks per day, month or year. 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 DGAC did find strong evidence that heavy consumption of four or more drinks a day for women and five or more drinks a day for men had harmful health effects. A number of situations and conditions call for the complete avoidance of alcoholic beverages.'

Written comments on the DGAC report are welcomed until July 15, 2010, and oral testimony may be provided at a public meeting to be held on July 8, 2010 in Washington. For more information, visit www.cnpp.usda.gov/dietaryguidelines.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

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