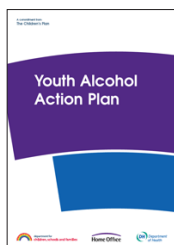


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In this month's edition, Helena Conibear reviews the Youth Alcohol Action Plan recently released by the UK government.

Our Medical News section includes another breast cancer study from France and one of the first studies investigating the relationship between moderate alcohol

consumption and non-alcoholic fatty liver disease, both with comments from professor R Curtis Ellison.

In the Social and Policy News section, we report on the resolution calling upon the World Health Organisation (WHO) to develop a global strategy to reduce alcohol harm and Dr Geoff Lowe comments on the impact of alcohol sales on the risk of serious assault in Canada.

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World

A group of 11 Southeast Asian nations has proposed that the World Health Organization (WHO) establish Oct. 2 - Mahatma Gandhi's birthday - as World No Alcohol Day. The proposal was made by India and accepted by the World Health Assembly.

A final vote on the plan will take place at the assembly's executive board meeting in January 2009. It could take a year for the proposal to be granted official approval.

France

The French Prime Minister, Mr Francois Fillot, announced measures aimed at eliminating the 'Happy Hours' and Open Bars in France. Some cities already enforce measures: Happy Hours were banned in Nantes from November 2007; outdoor alcohol consumption has been banned in Rennes, together with alcohol sale after 8 pm.

Scotland

The Scottish Government has launched a website www.alcoholdebate.com to stimulate debate and discussion around alcohol and its role in society in Scotland.

The website will cover a range of themes, initially relevant to the Government's two target groups (parents and women).

Northern Ireland

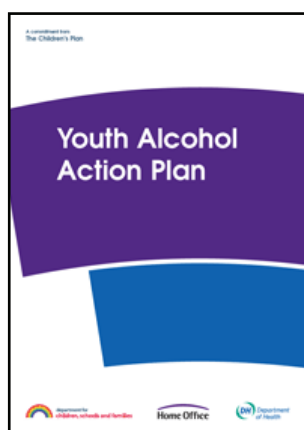
In November 2007, a Draft Criminal Justice (NI) Order 2007 was published for consultation. The Northern Ireland Office has now considered all the comments received following the consultation and made two specific changes to the proposed legislation - that is the consent of the young person participating in any test purchase scheme will be required in law and there will be a statutory requirement for Government to publish guidance on how the schemes should operate. Consultation closes on 18 July, regarding the guideline principles for test purchase operations. More information is available via: www.nio.gov.uk

India

The Indian government has revealed that it is considering the implementation of a uniform tax on alcohol across the country. Currently, taxes on liquor business are imposed differently in different states; a uniform tax regime, would eliminate disparity in liquor prices. The current variance in taxes can lead to smuggling and creates many problems for nationwide alcohol suppliers.

Despite the apparent benefits of a uniform tax, however, some remain skeptical, questioning if states which are currently enjoying high tax rates will be willing to adopt a lower, uniform rate.

The Youth Alcohol Action Plan by Helena Conibear, Executive Director, AIM



The UK Youth Alcohol Action plan was presented to Parliament by the Secretary of State for children, Schools and Families, the Secretary of State for The Home Office and the Secretary of State for Department of Health on the 2nd June. This well researched and largely balanced paper identifies and discusses the main issues regarding alcohol use and abuse by those underage in the UK.

The 36 page report recognises that:

'Whilst some adults and young people do not drink alcohol at all for religious, cultural or other reasons, drinking alcohol is a normal activity for many adults in Britain and young people drink for much the same reasons as everyone else does to have fun, to relax, to socialise and to feel more outgoing.'

The report gives overwhelming evidence that less young people are drinking, although the 20% who are, are drinking 11 units (8g) a week on average. Statistics show:

◇ The proportion of 11 to 15-year-olds who drink regularly has fallen (from 28% in 2001 to 21% in 2006). But those who do drink are drinking more (The average weekly consumption of alcohol

for 11 to 15-year-olds increased from 5 units in 1990 and has remained at 9-11 units between 2000- 2007).

◇ 11 to 13-year-olds are less likely to have had a drink in the previous week (14% in 2001 down to 9% in 2006) but the 9% are drinking 10 units a week on average.

◇ Between 2001 and 2006, the proportion of 11 to 15-year-olds who say they never drink rose from 38% to 46%.

◇ Fewer young people are exposed to alcohol advertisements on television (a decline of 31.1% and 39.0% in 16 to 24 and 10 to 15-year-olds respectively between 2002-06). Young people are now less likely to describe the adverts as being aimed at them (a decline of 31.1% and 39.0% in 16-24 and 10-15-year-olds respectively between 2002-06), based on research conducted by ASA and Ofcom in November 2007.

◇ Test purchase enforcement campaigns have reduced under age purchase failure rate from around 50% to 20%, with the July 2007 failure falling to 15%

However:

◇ Girls are drinking in excess more than boys - 47% of 15-year-old girls had been drunk at least once in the past month compared with 37% of boys of the same age and 9% of alcohol related hospital admissions are aged 18 and under.

The report states:

'These issues are not just about young people illegally buying alcohol - though that is an important dimension - but more broadly

about access to alcohol and its use by young people. We therefore need to take determined action to tackle their problems, working closely with parents, schools, health services and the police.

First, we need to be clear that unsupervised drinking by young people under 18 in public places - which has the closest links to crime and anti-social behaviour, as well as putting young people at risk in other ways - is unacceptable. This Action Plan sets out how we will work with the police and the courts to stop it.

Second, drinking by young people in the home is clearly the responsibility of parents and families, not the Government. But there are things we want to change. We believe there is a need for clearer health information for parents and young people about how consumption of alcohol - particularly at an early age- can affect children and young people. That is why we have asked the Chief Medical Officer to produce clear guidelines on the issue. We will also ensure that parents who fail to take their responsibility seriously will be made to do so.

Finally, we need industry to play more of a part, not just in refusing to sell alcohol to young people under the age of 18, but also more generally in marketing and promoting alcohol in a more responsible way. So we will work with the industry to strengthen the standards that currently govern these issues with a view to making them mandatory.'

The report recommends that in addition to the Government's current approach to young people and alcohol of:

- ◇ Enforcing prohibition on the purchase of alcohol by under-18s, backed by tough enforcement by taking action against retailers who are selling to under-18s;
- ◇ Enforcement of laws around adults purchasing on behalf of others who are underage (proxy purchase);
- ◇ Encouraging police powers of confiscation and dispersal powers to stop children and young people from drinking in public places and implementing Alcohol education in schools as part of wider drugs education beginning in the primary phase;
- ◇ Liaising with the industry regarding voluntary and mandatory agreements on the marketing and advertising of alcohol, specifically to address its potential appeal to young people;
- ◇ Introducing a national indicator on reducing young people's use of alcohol and drugs that will be measured in all local authority areas, followed by a new ten-year Drugs Strategy, published in February 2008.

There will be a new focus on parents as the source of supply –

'Alcohol consumed by young people is increasingly likely to be obtained from the home. Of the 11- 15-year-olds who drank 14 or more units in the previous week, 48% claim to have been given alcohol directly by their parents whilst 42% claim to have taken it without their parents consent.'

Advisory guidelines will be drawn up for parents

The paper recognises that young people drink before the age of 18, with over 50% of 13-year-olds having experienced an alcohol drink. By age 15 and over 90% will have tried alcohol and 50% are drinking some alcohol weekly. The action plan recognises the role and responsibility of parents in deciding when and how they should allow alcohol to be drunk at home, and states it would not want to interfere in parental rights in the home as regards their own children. The secretaries of state have asked the Chief medical officer to provide comprehensive guidelines for parents to refer to however.

The marginalised targeted

15% of respondents aged 10 - 17 drank once a week or more; yet they were responsible for 34% of all violent offences committed by this age group.

The Government hopes that by introducing a new criminal offence of 'persistently drinking in public' to be used if parenting orders and Acceptable Behaviour Contracts (ABCs) fail, this combined with stronger dispersal powers for the police should deal more effectively with trouble makers.

Tackling irresponsible parents

'Parents of youths caught persistently drinking unsupervised in public places or causing violence and disorder will be subject to parenting orders and could receive a criminal record – as could youths caught persistently while increasing powers to punish parents who act irresponsibly by supplying large amounts of alcohol to their children

and friends for consumption in public place's.

Parenting Contracts should be used more widely with the parents of young people repeatedly caught drinking in public as it is essential that parents take responsibility. The Government will encourage the police and appropriate agencies to make greater use of Parenting Orders for parents whose children persistently drink in public. Specific conditions would need to be met, such as compulsory attendance at parenting classes and/or strict monitoring of their child's drinking behaviour

Acceptable Behaviour Contracts (ABCs) will be extended to young people caught drinking in public, in which the young person and their parents agree to attend a session with a trained worker.'

Young people increasingly the focus - as well as suppliers

Retailers have complained that those under the legal drinking age attempting to obtain alcohol repeatedly have faced few prosecutions, whilst premises risk closure or losing their licence. Although the paper recommends reducing the 'three underage test purchase failures and you lose your licence to two' - new police powers will target persistent offenders.

Increased police powers

'We will therefore legislate, subject to the approval of Parliament, to make it an offence for under-18s to persistently possess alcohol in a public place and to ensure the police have the enforcement powers they need to tackle drinking by young people in public places. Prosecution will require evidence of continued

confiscation and failure to abide by an ABC.

We will legislate to give police the powers to disperse under-18s who are drinking and behaving anti-socially from any location and not just designated areas’.

Voluntary codes of practice to become mandatory

‘The Government feels strongly that it is right that all licensed premises not only comply with the law, but that they also operate to a set of standards that promote best practice. To this end, we will work with the alcohol industry to strengthen the standards, with a view to making them mandatory’.

Offering bored youth other things to do

‘Evidence shows that participating in high quality, constructive out of school activities has a preventative impact on alcohol use by young people’.

Through its ten year strategy for positive activities, ‘Aiming High for Young People’, the Government is working with local authorities to tackle the root causes of problems which may lead to drinking. The Youth , a pilot of 20 Intensive Intervention Projects, aimed at addressing the needs and wants of 1,000 young people, has been set up as well as Challenge and Support Projects in 52 areas to reach 15,000 families each year’.

The Action plan offers a multi-faceted strategy to reduce underage alcohol use. It is targeted predominantly at irresponsible parents and marginalised youth.

To view the report, please visit www.dfes.gov.uk/publications/youthalcohol/pdfs/7658-DCSF-Youth%20Alcohol%20Action%20Plan.pdf

Modest wine drinking may decrease non alcoholic fatty liver disease

A study published in *Hepatology* states that people at risk for coronary heart disease are often at risk for nonalcoholic fatty liver disease (NAFLD). The association of modest wine consumption with NAFLD has not been studied and the recommendation of wine for patients at risk for both diseases is controversial. The aim was to test whether modest wine consumption is associated with lower rates of NAFLD. The investigators included Third National Health and Nutrition Examination Survey participants who either reported no alcohol consumption or drank up to 10g of wine a day. Multivariate analysis was adjusted for age, gender, race, neighbourhood, income, education, caffeine intake, and physical activity. A total of 7,211 nondrinkers and 945 modest wine drinkers comprised the study sample.

Results showed that NAFLD was observed in 3.2% of nondrinkers and 0.4% of modest wine drinkers. The adjusted odds ratio was 0.15 (95% confidence interval, 0.05-0.49). Suspected NAFLD was observed in 14.3% of nondrinkers and 8.6% of wine drinkers. The adjusted odds ratio was 0.51 (95% confidence interval, 0.33-0.79).

The authors conclude that modest wine consumption is associated with reduced prevalence of suspected NAFLD. The current study supports the safety of one glass of wine per day for cardioprotection in patients at risk for both coronary heart disease and NAFLD.

R Curtis Ellison comments: Since heavy drinking is a major risk factor for cirrhosis of the liver, most physicians are reluctant to encourage

any consumption of alcohol among patients with any type of liver disease, including NAFLD.

NAFLD is a very common type of liver disease that may be present in up to one-third of Americans (associated with obesity). This paper is based on a very well done cross-sectional analysis from the NHANES study, which is a representative sample of the US population; hence, the results should be widely applicable to Americans. Instead of showing an increase in evidence of NAFLD among modest drinkers, the study showed no significant effect for beer and liquor drinkers and a marked lowering of prevalence of the disease among modest wine drinkers.

The authors adjusted for many factors, including income, education, and neighbourhood, that have been shown to relate to beverage preference in the US and many other countries. Even after taking all of these factors into consideration, the authors found that subjects reporting up to 10g of alcohol per day from wine showed an 85% lower prevalence of NAFLD; wine drinkers also showed a lower prevalence (49% lower) of having liver function test results above 95% of what is considered the “normal” range.

We agree with the authors’ conclusions: ‘The current study presents a paradigm shift that modest wine consumption may not only be safe from a liver perspective but may actually decrease the prevalence of NAFLD.’

Source: Dunn W, Xu R, Schwimmer JB. Modest wine drinking and decreased prevalence of suspected nonalcoholic fatty liver disease. *Hepatology* 2008;47:pre-publication release.

Teetotalers who begin to drink reduce their risk of cardiovascular disease

Researchers at the Medical University of South Carolina have found that middle-aged non-drinkers who began drinking in moderation experienced a 38% lower risk of developing cardiovascular disease compared to those who continued abstaining.

The medical researchers studied 7,697 people between 45 and 64 who were non-drinkers and who were participating in the Atherosclerosis

Risk in Communities (ARIC) study over a 10 year period. The investigators found that 6% began consuming alcohol in moderation (up to one drink per day for women and up to two drinks per day for men) during the follow-up period. After 4 years of follow-up, new moderate drinkers had a 38% lower chance of developing cardiovascular disease than did the non-drinkers. Even after adjusting for physical activity, Body Mass

Index, demographic and cardiac risk factors, this difference persisted.

This study is important in that it provides more evidence that the reduced risk of cardiovascular disease among moderate drinkers is a result of the alcohol itself rather than any differences in lifestyle, genetics, or other factors.

Source: King, Dana E., Mainous, III, Arch G. and Geesey, Mark E. Adopting moderate alcohol consumption in middle-age: Subsequent cardiovascular events. *American Journal of Medicine*, 2008 (March), 121(3).

Exercise, alcohol and heart health/fatal heart attacks

Researchers at the National Institute of Public Health in Denmark studied 12,000 men and women over a period of 20 years to see if exercise and moderate alcohol consumption are interchangeable as regards cardio protection.

The medical investigators found:

- The lowest risk of fatal heart disease occurred among those who both drank moderately and exercised. They had a 50% reduced risk compared to non-drinkers who didn't exercise. (Moderate drinking was defined as consuming an average of up to two drinks per day for both men and women of 12g).
- A higher risk was found among (a) those who abstained from alcohol but exercised and (b) those who drank in moderation but didn't exercise. In both cases the risk of heart disease dropped about 30% compared to abstaining non-exercisers.

- The highest risk was found among those who neither drank nor exercised. Their risk of dying from heart disease was twice as high as those who drank moderately and exercised.

- The medical research indicates that moderate drinking and exercising are not interchangeable but are cumulative in their positive effects on the cardiovascular system. Doing one is better than nothing, but doing both is the best choice of all and dramatically reduces the risk death from heart attack. The same was also found for all-cause mortality.

Source: Pedersen, Jane Østergaard, Berit Lilienthal Heitmann, Berit, Schnohr, Peter, and Grønbæk, Morten. The combined influence of leisure-time physical activity and weekly alcohol intake on fatal ischaemic heart disease and all-cause mortality.

Drinking alcohol daily reduces risk of prostate enlargement

About half of men 50 years of age suffer from benign prostate hyperplasia (BPH), a condition that causes frequent and often painful urination. The proportion of sufferers increases to about 80% at age 70.

Men who consume two or more alcoholic drinks per day are 33% less likely to develop BPH than are teetotalers or alcohol abstainers.

Those who consume at least four servings of vegetables per day also enjoy reduced risk of developing BPH. However, eating red meat daily increases the risk, as does consuming high levels of fat. Dietary supplements were found to have no effect on BPH risk.

Source: Kristal, Alan R. Arnold, Kathryn B., Schenk, Jeannette M., Neuhouser, Marian L., Goodman, Phyllis, Penson, David F. and Thompson, Ian M. Dietary Patterns, Supplement Use, and the Risk of Symptomatic Benign Prostatic Hyperplasia: Results from the Prostate Cancer Prevention Trial. *American Journal of Epidemiology*, February 2, 2008. doi:10.1093/aje/kwm389

Multiple ADH genes are associated with upper aerodigestive cancers

A genetic discovery could help explain why some people who drink too much develop cancers, while others do not. A European study, published in *Nature Genetics*, has found two gene variants which offer “significant” protection against mouth and throat cancers. It suggested that people who have them are much better at breaking down alcohol into less harmful chemicals.

Cancer Research UK said cutting down on the amount you drink is the best way to prevent cancer. More than seven out of ten people diagnosed with mouth cancers drink far more than the recommended sensible drinking guidelines of 2–3 units a day for women and 3–4 for men – and, alongside smoking, it is also a known risk factor for oesophageal cancer.

Previous research had identified a group of genes called ADH as clear candidates for a role in the development of these cancers. These genes make body chemicals which help break down alcohol, and, in theory, the more effective these are, the less opportunity alcohol has to damage the cells in the mouth and throat.

Led by the International Agency for Research on Cancer in Lyon, France, the research team spent five years studying 3,800 patients with oral cancers and cancers of the larynx and oesophagus, and 5,200 who were free of the disease at 23 centres throughout Europe and Central and South America.

The study discovered that people’s risk of developing cancers of

the mouth, larynx, pharynx and oesophagus is related to genes which regulate how fast or slow your body breaks down alcohol.

They found two variants in the group of ADH genes were linked to a lower chance of getting cancer. Looking only at study participants who admitted drinking heavily, the potentially beneficial effect of having one of the variants was even more pronounced, in line with the amount of alcohol consumed.

Dr Tatiana Macfarlane, Senior Lecturer in Medical Statistics at the University of Aberdeen’s Department of General Practice and Primary Care, was involved in the study which took place while she was at the University of Manchester.

She said: “The study showed that your risk of getting oral cancers is linked to genetics as well as lifestyle. We found that, in particular, the risk depends on how fast your body metabolises alcohol. The results suggest that the faster you metabolise it, the lower your risk... These results provide the strongest evidence yet that high alcohol consumption is strongly linked to oral cancers. The risk is particularly high if you also smoke or rarely eat fruit and vegetables.”

Source: ‘Multiple ADH genes are associated with upper aerodigestive cancers. *Nature Genetics* 40, 707 - 709 (01 Jun 2008), doi: 10.1038/ng.151, Brief Communications

Drinking alcohol dulls the brain’s ability to detect threats

A National Institute on Alcohol Abuse and Alcoholism’s (NIAAA) study has found that drinking reduces awareness of threats to personal safety.

Study author Jodi Gilman studied 12 people who were given intravenous infusions of alcohol and then monitored their brain activity using functional magnetic resonance imaging while they looked at pictures of frightened and neutral faces.

As expected, when people were given the placebo, their brains responded to the fearful faces.

“Our brains respond more to fearful stimuli ...They signal to us that we are in threatening situations,” Gilman explained. However, when the same people were given infusions of alcohol, this response was dulled, suggesting that while intoxicated, the brain can’t distinguish between the threatening and non-threatening stimuli.

The study found that alcohol increases activity in a reward center of the brain known as the striatum. The researchers also found a link between the level of activation in this region and how intoxicated people said they were feeling, which could help account for the addictive properties of alcohol.

“This is important because we think we can develop potential treatments for alcoholism,” Gilman said. People in the study were social drinkers, not heavy drinkers. The research team plans to conduct the study in heavy drinkers next.

Source: Why We Like to Drink: A Functional Magnetic Resonance Imaging Study of the Rewarding and Anxiolytic Effects of Alcohol *The Journal of Neuroscience*, April 30, 2008, 28(18):4583-4591

Patterns of alcohol (especially wine) consumption and breast cancer risk: A case-control study among a population in Southern France

The authors state that the association between alcohol consumption and breast cancer has been largely investigated, but few studies have investigated the effects of average intake when the pattern of drinking is taken into account. They sought to examine the association between drinking pattern of alcoholic beverages, particularly wine, and breast cancer using different statistical approaches. Their study included 437 cases of breast cancer, newly diagnosed in the period 2002–2004, and 922 residence- and age-matched controls.

Results showed that women who had an average consumption of total alcohol of less than 1.5 drinks per day had a lower risk (odds ratio [OR] = 0.58, 95% confidence interval [CI] = 0.34–0.97) when compared with nondrinkers. This protective effect was due substantially to wine consumption since the proportion of regular wine drinkers is predominant in their study population. Furthermore, women who consumed between 10 and 12 g/d of wine had a lower risk (OR = 0.51; 95% CI = 0.30–0.91) when compared with non-wine drinkers. Above 12 g per day of wine consumption, the risk of breast cancer increased, but the association was nonsignificant.

The authors conclude that although no association between the pattern of total alcohol consumption and breast cancer was found, the type of alcoholic beverage seemed to play an important role in this association. Their results support the hypothesis that there is a threshold effect that risk decreased or was not modified

for consumption under a certain threshold. Above that threshold, risk increased, however. The drinking pattern of each type of specific beverage, especially wine, seems important in terms of alcohol–breast cancer association. Low and regular wine consumption does not increase breast cancer risk.

R Curtis Ellison comments: Most of the initial studies showing an association between alcohol drinking and breast cancer were based on the amount of alcohol consumed by women. The present study had data on the pattern of drinking, and was also able to adjust for some of the known risk factors for breast cancer (e.g., breast cancer in a mother or sister, education, increased number of ovulatory cycles, physical activity, obesity).

We have some questions about the analysis. Most investigators use quadratic or cubic spline regression models to depict the dose–response relationship instead of free knot splines; we are not sure that the spline analyses as carried out add much to the paper, as similar results were seen when conventional categories of drinking were used to estimate breast cancer risk. Further, in the present study, some risk factors (e.g., age at menarche, age at menopause, oral contraceptive use, hormone replacement therapy) were not included in the final regression model because they did not show a certain level of significance in univariate analyses; we prefer that such potentially important factors be retained in final models.

In any case, the analyses found that, in comparison with lifetime

abstainers, there was no increase but a significant reduction of about 40% in the risk of breast cancer for women who consumed between 1 and 1.5 drinks/day. For wine consumption, there was an even a greater lowering of risk for women consuming approximately one typical drink/day. There was a trend towards an increase in breast cancer risk for women consuming more alcohol or wine, but there were too few heavy drinkers in the study to obtain good estimates of effect at such levels of drinking.

One of the key messages of this paper, which must be confirmed by others, is that there appears to be a threshold for alcohol leading to an increase in risk of breast cancer. The estimate from this paper is that this threshold is about 1.5 to 2 drinks/day. Frequent (6 or 7 days/week) drinking of any type of beverage did not show an increase in breast cancer risk. If similar results are found in other studies, they provide further reassurance to women who follow the USDA guidelines of no more than one drink/day of 14g.

Source: Bessaoud F, Daurés JP. Patterns of alcohol (especially wine) consumption and breast cancer risk: A case-control study among a population in southern France. *Ann Epidemiol* 2008;pre-publication internet release, 5/5/08.

Prospective study of alcohol consumption in the United States: Quantity, frequency, and cause-specific mortality

In a large study of a population-based cohort in the US (consisting of 20,765 current drinkers age ≥ 18 years at baseline), 2,547 had died by the end of 14 years of follow up; deaths among non-drinkers are not reported. For total mortality, the authors found that a higher number of drinks per occasion showed an increase in risk for both men and women, with the increase appearing at 4 or more drinks/day for both genders. On the other hand, increasing frequency of drinking had no significant effect

on total mortality risk for either men or women.

For cardiovascular mortality, increasing frequency of drinking showed an inverse association among men. One unexpected and unexplained result among women was that the risk of cancer showed no increase with a greater number of drinks/occasion, but was increased for women in the highest category for frequency (in this study, those drinking 3 or more days per week). The authors state that this association between frequency and

cancer risk has not been reported before for studies that adjusted for amount per drinking occasion or total alcohol intake. If confirmed, it might suggest that the effects of alcohol on heart disease and cancer differ in terms of whether transient effects or cumulative effects are more important. In the present study, there was no increase in total mortality with increasing frequency of drinking among women.

Source: Breslow RA, Graubard BI. *Alcohol Clin Exp Res* 2008;32:513-521.

Moderate drinking could strengthen bones

Moderate alcohol consumption appears to be associated with a lower risk of hip fractures and improved bone density although heavy drinking is a risk factor for osteoporosis and other bone-related problem according to the research of Karina Berg, MD of Montefiore Medical Center New York.

After reviewing 13 studies on alcohol and hip fracture risk, the study concluded that people who had less than 0.5 drinks a day had a 16% reduced risk of hip fracture, compared to people who didn't drink at all. When alcohol consumption increased to 0.5 to one drink per day, the risk of hip fracture was reduced by 20%. Those consuming one to two drinks daily had a 9% reduction in hip fracture risk, while those who drank more than two drinks a day increased their risk of hip fracture by 39%.

Source: Berg, K.M, *American Journal of Medicine*, May 2008; vol 121: pp 406-418.

Alcohol cuts risk of developing rheumatoid arthritis

Findings from two studies in Sweden and Denmark, suggest that alcohol has an anti-inflammatory effect which might protect against rheumatoid arthritis. Henrik Kallberg and colleagues of the Institute of Environmental Medicine at the Karolinska Institute in Stockholm, based their findings on more than 2,750 people in the studies who were assessed for genetic and environmental risks for rheumatoid arthritis.

All of the participants – half of whom had the disease – were questioned about their lifestyle, including how much they smoked and drank, and blood samples were taken to check for genetic factors. The arthritis sufferers were matched for age, gender and area of residence with controls. The heaviest drinkers consumed 24 units on average a week. The Danes consistently drank a third more than the Swedes.

In the Swedish and Danish studies, participants who had a moderate alcohol consumption were 40

and 45% less likely to develop rheumatoid arthritis compared with people who did not drink or drank only occasionally. Among those who had a high consumption, the risk was reduced by 50 and 55% respectively.

The biggest benefits were seen among smokers with a genetic profile known to make them vulnerable to the disease.

Researcher Dr Kallberg stressed the most important finding of the study was that smoking was a very significant risk factor for rheumatoid arthritis, reinforcing findings from previous studies.

However, he added: "In addition, it is important to know that moderate alcohol consumption is not deleterious and may in some contexts be beneficial concerning risk for future onset of rheumatoid arthritis."

Source: *Annals of the Rheumatic Diseases* Alcohol consumption is associated with decreased risk of rheumatoid arthritis: results from two Scandinavian case-control studies H. Kallberg et al.

AIM – Alcohol in Moderation was founded in 1991 as an independent organisation whose role is to communicate ‘The Sensible Drinking Message’ and to act as a conduit for information from the industry, its associations and relevant medical and scientific researchers, legislation, policy and campaigns.

AIM Mission Statement

- **To promote the sensible and responsible consumption of alcohol**
- **To encourage informed debate on alcohol issues**
- **To communicate and publicise relevant medical and scientific research in a clear and concise format via AIM Digest and the AIM Research Highlights**
- **To publish information via the ‘AIM Gateway to Responsible Drinking and Health’ on moderate drinking and health – comprehensively indexed and fully searchable without charge**
- **To communicate with consumers on responsible drinking and health via www.drinkingandyou.com and via publications based on national government guidelines**
- **To distribute AIM Digest without charge to the media, legislators and researchers involved in alcohol affairs**
- **To direct enquiries from the media and others towards full and accurate sources of information.**

AIM SOCIAL, SCIENTIFIC AND MEDICAL COUNCIL

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AIM Chairman

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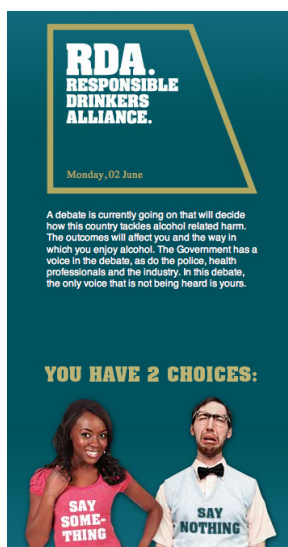
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The Australian Wine Research
Institute

Dr. Thomas Stuttaford,
Medical Correspondent to the
Times and Author

Dr. Elisabeth Whelan,
President American Council on
Science and Health

WSTA funds consumer website on alcohol



Consumers will be given the chance to air their views on the national debate around alcohol policy through a new initiative launched by The Wine & Spirit Trade Association. www.responsibledrinkersalliance.co.uk aims to encourage the public to participate in discussions and ensure their opinions are taken into consideration by politicians.

The website has a range of activities to increase consumer awareness. Content is intended to be user-driven, with forums taking centre stage, although additional information will include statistics on consumption, health and policing of alcohol-related crime.

WSTA chief executive Jeremy Beadles said the drive was inspired by the body's research, which shows consumers believe the political agenda fails to reflect their opinions.

Jeremy Beadles commented: "People might think this is a cynical approach, but we have done a lot of research and people are saying very different things to what the government, the health lobby and the police are."

Alcohol Units alcohol campaign launched

A new 'Units' campaign which aims to tell drinkers how many units are in their drinks and help them stick to their limits was launched in May by Public Health Minister Dawn Primarolo in England.

The Know Your Limits campaign kicked off its units strand with a series of adverts on TV, radio, billboards and in press, depicting the number of units in individual drinks. The Units campaign has an overall budget of £6 million for 2008/09. It will be followed by a £4 million anti binge-drinking campaign from the Home Office in June.

The units campaign uses iconic imagery to help people understand how many units are in typical alcoholic drinks, and how to stay within the recommended daily guidelines for regular drinking of 2-3 units a day for women, and 3-4 units a day for men. The campaign also warns people about how regularly drinking too much can damage their health.

Poll results from YouGov show that English drinkers don't know exactly how much they are drinking. 82% claim to know what a unit of alcohol is, yet 77% don't know how many units are in a typical large glass of wine. 35% did not know that an average pint of beer (ABV 4%) contains two units, while 58% did not know a double gin and tonic also contains two units.

The YouGov survey showed that while 64% of women knew that their recommended daily guidelines are 2-3 units, only half of the men surveyed knew their equivalent guidelines are 3-4 units a day. Unit awareness also appears to get worse

with age: 32% of drinkers aged 18-24 correctly said that a 250ml glass of 12 per cent ABV wine contains three units, compared to just 18% of drinkers over 55. And 69% of drinkers aged 18-24 correctly stated that a pint of 4% ABV beer contains two units, compared to 57% of drinkers over 55. The poll revealed that more than 52% of adult drinkers in England drink alcohol at least two to three times a week, and one in ten drink daily.



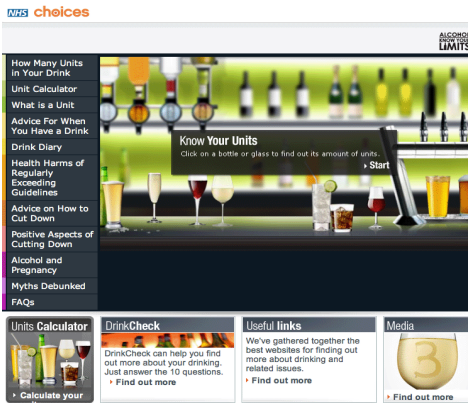
UK Trade body campaign to change way shops serve alcohol

The Stewards' and Licensed Trades' Association (SALTA) believes off-trade alcohol should be cordoned off from other products and sold at a separate till to make cheap alcohol less accessible.

Group secretary Christine Steer said: "Hopefully it would cut binge drinking and underage drinking. Something has to be done and we are willing to try anything."

The move has been backed by Dartford Labour MP Howard Stoate. Stoate said: "Not only would this reduce impulse alcohol purchases, but it would also help us to stamp out underage alcohol sales."

Know your limits consumer site moves from Home office to Department of Health



The Home Office-funded website promoting sensible drinking has been discontinued. New figures show the site www.knowyourlimits.gov.uk will have cost £86,000. A maximum of 323,157 people visited it from its launch in October 2006 until the end of March 2008. The figures were revealed by Home Office minister Liam Byrne in answer to a question in Parliament on costs and visitor numbers to the site.

Byrne said: "From the end of June 2008, the website will no longer exist, and visitors will be redirected to a new NHS units-awareness site funded by the Department of Health".

The NHS website gives advice on how many units are in a drink, what a unit is and a unit calculator. There is also information on the health risks of regularly exceeding guidelines, advice on cutting down and guidelines for alcohol and pregnancy.

Please visit <http://www.units.nhs.uk/>

The UK THINK! Summer drink drive campaign

The THINK! Summer 2008 Campaign will highlight the key message that a drink drive endorsement will remain on your licence for 11 years. The strapline used in the advertising materials is: '11 years is a long time to have a drink drive conviction on your licence. THINK! Don't drink and drive.'

The campaign includes in-pub adverts and creatives for TV and radio. Emphasis is given to how long 11 years is by illustrating what could have been done in that time. The campaign aims to increase awareness of the personal consequences of a drink driving conviction; to encourage the belief that 1 or 2 drinks are too many before driving; to reinforce and build the social stigma around drink driving and to highlight the 11 year endorsement.

The campaign targets 1-3 pint drink drivers, not drunk drivers, particularly young men, who are consistently over-represented in drink drive casualty figures and research shows they are more likely to admit to driving when over the legal limit or when unsure if they're over the legal limit.

Whereas previous campaigns have concentrated on the link between drink driving and crashing and the risk of killing other people, the current campaign focuses the more compelling personal consequences of a drink driving conviction. For these reasons the campaign centres on the 'moment of doubt' around the decision whether to have a second pint (as this is the moment that young men start to doubt whether they should drive or not) and highlights that a drink drive

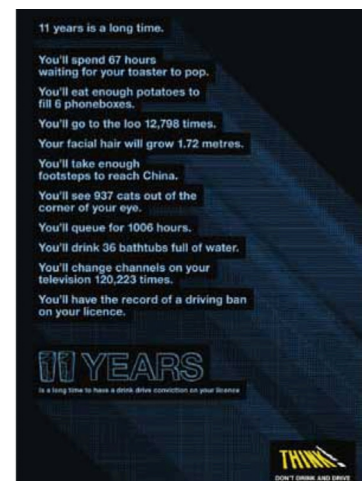
conviction has the potential to ruin your life.

The TV advert shows Matt, a young man out for a couple of quick drinks with some friends, as he's deciding whether or not to have a second pint before driving home.

As Matt is deciding what to order his world freezes and the barman he's about to order from suddenly transforms into a succession of characters that Matt would encounter if he's caught drink driving. Matt is powerless to do anything as he sees a police officer asking him to step out of the car for a breath test, a solicitor explaining that he's going to get a 12 month driving ban, his boss explaining that it's company policy not to keep employing someone who has a drink drive conviction, a used car dealer offering him a very low price for his car because he has to sell it quickly to pay a hefty drink driving fine and Matt's partner, angry and distressed that Matt has lost his licence, his job and his car.

Finally, the barman appears again and puts the question to Matt - "So, what's it going to be?"

To view the ad visit www.thinkroadsafety.gov.uk/campaigns/drinkdrive/download/0707dd.mpg



NHS statistics on alcohol report

The NHS has released a report Statistics on alcohol: England 2008, compiled from a range of previously published alcohol related information and data.

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 and school children, drinking related ill health and mortality, affordability of alcohol and alcohol related costs. Government plans and recommendations in this area are also summarised in the report.

Key facts:

- In England in 2006, 72% of men and 57% of women reported drinking an alcoholic drink on at least one day in the week prior to interview. 12% of men and 7% of

women reported drinking on every day in the previous week

- In Great Britain in 2007, 69% of people reported that they had heard of the government guidelines on alcohol consumption. Of these people, 40% said that they did not know what the recommendations were.

- In England in 2006, among pupils aged 11 to 15, 45% of pupils said they had never had a proper alcoholic drink (a whole drink and not just a sip), an increase compared to 39% in 2001. 15% of pupils thought it was okay to get drunk at least once a week, this figure was 30% for 15 year olds.

Drinking-related ill-health and mortality

In England in 2006/07, there were 57,142 NHS hospital admissions

with a primary diagnosis specifically related to alcohol. This number has risen by 52% since 1995/96. Of these admissions, 4,888 (9%) involved patients under 18 years of age.

In 2006/07, NHS hospital admissions per 100,000 population varied regionally throughout England. In 2006/07 the North West Strategic Health Authority had the highest rate of 170 admissions with a primary diagnosis specifically related to alcohol per 100,000 population, and the East of England Strategic Health Authority showed the lowest rate of 72 admissions per 100,000 population.

To view the report, please visit www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles/alcohol/statistics-on-alcohol:england-2008-%5Bns%5D.

Coors - latest drinks producer to include sensible drinking advice on its labels

Coors have confirmed that Carling will carry the UK government's sensible drinking message and a logo advising women not to drink during pregnancy alongside alcohol unit information and the Drinkaware website address. The new label information will be added to the labels of other brands over the next few months.

Rob Borland Coors director of marketing said: "Approximately 700 million cans of Carling are sold in the UK annually. We believe that this additional sensible drinking advice will have a significant impact on increasing public awareness of the Government's sensible drinking message".

Diageo expands DrinkIQ programme

Diageo is expanding its DRINKiQ programme – part of the company's 'Enriching Communities Policy'.

Developed by Diageo Australia as an induction tool for staff, DRINKiQ is being rolled out in 2008 to reach across the company and beyond. "Diageo is using the programme to engage with any third-party relationship, whether that's a customer, a distributor, or a sports team we may sponsor," said Diageo corporate relations director global travel and Middle East, Tim Rycroft.

DRINKiQ sits alongside Diageo's global campaigns against misuse of alcohol, drink-driving and underage drinking. The site gives information

on alcohol content and serving size. Nutrition and ingredients, allergens and responsible drinking.

For more information on the Diageo initiative, go to www.DRINKiQ.com.

Blossom Hill, California		
Alcohol by volume		
13.5%		
Allergens		
Sulphites		
Nutrition information		
	per 100ml serving	per 125ml serving
Energy	332 kJ	415 kJ
Energy	79 kcal	99 kcal
Protein	Trace	Trace
Carbohydrate	0.6 g	0.8 g
Fat	TBC	TBC
Ingredients		
wine		
Serve size		
125ml		

UK New health warning labels

It is reported that by the end of 2008 all alcoholic drinks sold in Britain will carry new health warning labels.

The labels are the result of a voluntary agreement between the government and the drinks industry and will clearly state the alcoholic units and recommend safe drinking levels.

Currently bottles and cans containing alcohol list percentages, but only some state what this equates to in terms of alcoholic units.

According to public health minister Caroline Flint exactly what the labels will say is as yet undecided, but the warnings will not be as strong as for cigarettes.

Although the labels were first proposed three years both the drinks industry and the government have had a problem agreeing on the format due to EU proposed regulations.

While the scheme is supported by the country's leading supermarkets several of the country's biggest

drinks manufacturers have refused to sign up but it is suggested legislation will be introduced to deal with non-compliers.

It is thought the warning labels will include words such as "know your limits" or "drink responsibly", plus the number of units each drink contains; they will also warn that drinking alcohol should be avoided if pregnant or trying to conceive.

They will also give the web address for www.DrinkAware.co.uk

UK Local Government Association call for calorie information on labels

Alcoholic drinks should display the number of calories contained in them to help tackle the growing obesity crisis, say council leaders.

They want bottles of wine and cans of beer to carry labels to help drinkers who may not realise how many calories are in their favourite tippie.

David Rogers, public health spokesman for the Local Government Association, which represents 400 local councils in England and Wales stated 'An average pint of beer has around 250 calories in it and yet most alcoholic drinks don't have to put any kind of ingredient labelling on cans and

bottles... There has been widespread publicity of how drink damages your health, but most people are likely to be completely unaware of the effect it can have on their waistline.'

The European Union is consulting on proposals to make nutritional labels mandatory on the ready to drink category and cider but not wine, beer and spirits.

National Licensing Conference

The National Licensing Conference will be held on 3-4 September 2008 at the MacDonal Aviemore Highland Resort.

The event includes representatives across the licensing field including Licensing Board Members and officials, Police, Licensing Standards Officers, Licensing Forum Members, Alcohol Action Team Members and others interested in licensing. Kenny MacAskill MSP, Cabinet Secretary for Justice will make the key note speech.

The theme this year is "What's Working?"

The Drinks Business responsible drinking award

Diageo has been awarded 'responsible drinking message of the year' in the drinks business 2008 awards

2007 saw the launch of the first ever national TV advertising campaign by a drinks company that was solely focused on promoting a responsible drinking message. The adverts "Many Me" and "Mirror" with the strapline "Don't See a Good Night Wasted" confronted the issues of alcohol and losing your social currency in a party or on-trade outlet environment.

In addition to this, "The Choice Is Yours" campaign also launched to address social responsibility issues to a wider audience and included activities with Tesco, the National Union of Students, a programme tackling underage drinking among adolescents and educational initiatives. Diageo has reached over 17 million via its work with Tesco, a further eight million through radio campaigns and nearly half a million young people via education and work with the NUS.

HSE launches new alcohol awareness campaign in Ireland

The Health Service Executive in Ireland has launched a new alcohol awareness campaign aimed at delaying the age at which young people start to drink. The campaign features a TV advert depicting a number of young people in situations where they are exposed to and gain access to alcohol. The aim of the campaign is to increase awareness in adults about the extent of underage drinking, the ease of access which young people have to alcohol and the benefits in delaying the age at which young people start to drink.

The campaign has been launched as preliminary results of research carried out by the HSE reveal that:

- 91% of adults agree that underage drinking is a problem in Ireland today
- 50% of those questioned believe there is nothing they can do to

stop young people from drinking alcohol

- Just 15% believed their own drinking habits influence the drinking habits of young people around them
- 81% of those questioned believe that it's easy for under 18's to access alcohol in pubs and off licences
- Just 40% of those questioned would drink less if they thought it would discourage young people around them from drinking alcohol.

Mary Wallace TD, Minister for Health Promotion and Food Safety said, **"We need to take responsibility both collectively and individually on the need to protect children and young people from the harms caused by alcohol misuse. I intend focusing on alcohol policy as a priority in my new role as Minister for Health Promotion."**

The HSE has made available a number of alcohol awareness booklets to help parents discuss the issue of alcohol with their teenagers and assist adults in reflecting on their own alcohol use. 'Straight Talk - a guide for parents on teenage drinking' and 'Less is More', both of which can be accessed at www.hse.ie



Ireland new codes for alcohol advertising

The Department of Health in Ireland endorsed "strengthened" new codes on alcohol advertising. At the heart of the new code is an effort to restrict the overall prevalence of alcohol ads and target the remaining ads at "appropriate" audiences.

Under the new rules, alcohol ads will be restricted to 25% of all advertising on any medium at any time, down from a previous 33% threshold across some media.

Drink ads will also be frozen out of "breakfast time" TV slots between 6am and 10am and will be banned from media where more than 25% of the audience are under-age, down from a previous 33% total.

Meanwhile, outdoor drinks ads will be banned from anywhere

within 100 metres of a youth club or scouting hall, building on an existing ban on ads near schools.

The link between alcohol and sport will also be curbed, with the new rules prohibiting drinks sponsors from using "stings" before and after sports shows and matches they sponsor.

"This is one of the most severe codes around, and it'll have a major impact," said Sean McCrave, head of the Institute of Advertising Practitioners in Ireland.

The Alcohol Beverage Federation of Ireland's Rosemary Garth said the move to ensure alcohol makes up no more than 25% of ads across all media was "particularly significant", since it brought print into the regulatory arena for the first time.

Ireland gets tough on drinking laws

Justice Minister Dermot Ahern has resisted calls to save the "early houses" which have served drinkers in Ireland for the past 80 years in the early morning, when the Intoxicating Liquor/Public Order bill due to come into force this summer in Northern Ireland.

The new bill, which was published on 4th June, is identical to the draft version which was unveiled by former Justice Minister Brian Lenihan in April to tackle the issue of binge drinking and excessive availability of alcohol.

The bill contains new measures to restrict off-licences, theatre licences and alcohol promotions. Gardai will be allowed to seize alcohol products from teenagers under 18 or from those over 18 if they believe they are a threat to public order.

Supermarkets will only be allowed to sell alcohol from 10.30am (instead of 7am) and all off-licences will have to close at 10pm (instead of 12.30am).

Patients face quiz over drink habits in Scotland

A multi million pound scheme launched by NHS Health Scotland targeting drinkers who are unaware they are exceeding safe limits. Doctors, nurses and dentists across Scotland will be trained to question thousands of patients about their drinking habits and offer counselling to those breaching safe levels.

The move, part of an £85m three-year Scottish Government alcohol strategy, will see Scots 'screened' for their drinking habits during routine appointments with GPs, dentists and nurses. Health boards have a target of offering up to 150,000 Scots identified as 'hazardous drinkers' help ranging from leaflets and guidance to extensive counselling.

For women, a trigger point for counselling will be admitting regularly drinking three units or more a day – which is the equivalent of any more than two 125ml glasses or one 250ml glass of wine. For men a trigger point would be five units – any more than half a bottle

of wine or two pints of lager. Other triggers would be admitting weekly 'binges' of more than six units in one evening for women and eight units for men.

Initiatives to target potential hazardous drinkers include:

- Training NHS staff to carry out 'brief interventions' during which they ask patients about drinking and challenge them to change bad habits;
- Paying GPs up to £200 a patient to carry out brief interventions and monitor progress;
- Training NHS dentists to quiz patients on their alcohol consumption and monitor their progress at six-monthly check-ups or refer them to counselling services via GPs;
- Asking NHS 24 callers phoning about problems such as stomach pains or indigestion about their drinking and referring them for help to specialist telephone nurses or their GP.

Diageo steps up F1 responsible drinking campaign

Lewis Hamilton and Mika Häkkinen unveiled Johnnie Walker's latest campaign in their Responsible Drinking programme. The Monaco Grand Prix weekend was the setting for the announcement of the European launch of 'The Pact', aimed at encouraging consumers to make a commitment not to drink and drive. The programme will be formally launched across Europe later this year.

The announcement also saw the unveiling of The Pact Simulator. This futuristic pod will provide consumers with a practical demonstration to remind them of the dangers of driving under the influence of alcohol. The prototype software, developed by US company Systems Technology, is still in development and will allow consumers to experience in a virtual world the negative effect of alcohol on the ability to drive.

New French law requires breathalysers in nightclubs and bars

From early next year, breathalysers must be provided in nightclubs and bars in France as part of a law that includes a ban on the sale of alcohol at petrol stations and promotes the use of automatic breathalysers for drivers of school buses.

Announcing the law Jean-Louis Borloo, the Environment Minister, said bar and nightclub management would have to offer a police-standard electronic breath-test to departing customers. The scheme is supposed to alert drivers who have more than 0.5 grammes of alcohol per litre of blood, but landlords and

safety organisations have questioned whether it would deter intoxicated customers from driving.

The Government has been running a "blow and you'll know" campaign in recent months, encouraging self-testing with kits that are available in supermarkets. A police campaign and the arrival of thousands of speed cameras halved the 9,000 annual road death rate from 2000-2007 but the decrease has now slowed.

About 2% of drivers on French roads are estimated to be over the alcohol limit, under the influence of cannabis or both. They cause

more than a third of road deaths, studies show.

Nightclub and bar management gave a mixed welcome to the breath-test law, complaining about the price (up to £2,000) for the appliances and that these regulations follow the implementation of a smoking ban from January 1.

Bernard Cartier, the head of the national federation of bars, cafés and discos, said that the Government should focus on supermarkets, where young drinkers obtain most of their alcohol.

Dutch website gives support and advice for parents

The Netherlands Institute of Mental Health and Addiction (Trimbos Institute) in collaboration with the Netherlands Institute for Health Promotion and Disease Prevention (NIGZ) are targeting parents with

their national parenting campaign ‘prevent alcohol damage in your teenager’. Parents can visit the website www.alcoholinfo.nl to ask questions and get concrete parenting tips to limit alcohol use in their children.

They find talking to their child more effective in limiting alcohol use. However, the latest research findings show that talking about alcohol is only effective if it is accompanied by establishing clear rules and enforcing them.



The first phase of the campaign (late 2006) showed that there is a difference between what parents consider to be effective strategies and recent scientific insights about dealing with alcohol within the family. Parents find that setting rules is difficult and ineffective.

Furthermore, the research shows that even though the vast majority of parents are against alcohol use by the under 16s, youngsters who drink report that it is their parents who are the main providers of alcohol. Visit www.stiva.nl for more information.

Éduc’Alcool launches an ‘Evening planner’ and a campaign on pregnancy and drinking in Canada

The Éduc’alcool website now features an “Evening Planner” that allows people to anticipate their blood alcohol content (BAC) based on how much they plan to drink, so that they can make the most responsible decisions. The easy-to-use calculator factors in sex, weight, the number of hours over which the alcohol is absorbed, how much the person drinks and what kind of alcohol is being consumed.

The Evening Planner was developed in response to a need clearly expressed by almost two-thirds of drivers in Québec. In “Quebecers and Alcohol,” a 2007 CROP poll, two out of three respondents said they wanted tools for calculating their BAC. The same percentage of respondents said they wanted to know more about how much they could safely drink before driving.

The goal is to help Quebecers gain more control over their drinking, whether or not they

drive. All the research shows that drivers tend to underestimate their BAC, and drinkers systematically underestimate how much they drink. It is hoped that this tool will make people aware of the importance of moderation, and will urge drivers to make sure they are absolutely sober before they start their engines.

Éduc’alcool also launched a new advertising offensive in March 2008, urging women not to drink if they are pregnant or planning to be. The other part of the message: respect a pregnant woman’s decision not to drink.

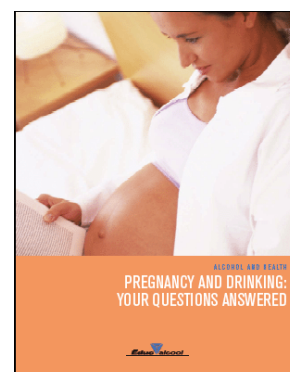
The tone is light, friendly with a supportive nod to women who have chosen to abstain. The campaign also invites women to obtain a copy of the brochure published jointly by Éduc’alcool and the Collège des médecins du Québec. Pregnancy and Drinking: Your Questions Answered addresses all kinds of practical issues involving alcohol,

pregnancy and breast-feeding in easy-to-understand language.

A radio ad was broadcast on major English and French stations across Québec. The print portion of the campaign ran from March to May in nearly 20 magazines with a primarily female readership, 18-44.

More than 25,000 copies of the brochure were ordered in less than a month by hospitals, clinics, community organizations (particularly those serving aboriginal populations), pregnant women, fathers-to-be, and others.

For more information visit <http://www.educalcool.qc.ca>



US high school students showing overall improvements in health-related behaviours

Current US high school students are less likely to engage in many health risk behaviours than high school students in the early 1990s, according to the 2007 National Youth Risk Behaviour Survey (YRBS), released in June by the Centers for Disease Control and Prevention (CDC). Although the study documents substantial improvements over time in many health risk behaviours among all high school students, Hispanic students remain at greater risk for certain health related behaviours and have not matched the progress made over time by black students and white students in reducing some sexual risk behaviors.

The 2007 National YRBS found that Hispanic students were more likely than either black students or white students to attempt suicide, use cocaine, heroin or ecstasy, ride with a driver who had been drinking alcohol, or go 24 hours or more without eating in an effort to lose weight or to drink alcohol on school property.

National, state and local YRBS studies are conducted every two years among high school students throughout the United States. These surveys monitor health risk behaviors that lead to unintentional

injuries and violence; tobacco, alcohol and other drug use; and sexual behaviors that can lead to unintended pregnancy or sexually transmitted diseases, including HIV infection. The surveys also monitor high school students' dietary behaviors, physical inactivity, and the prevalence of obesity and asthma.

More than 14,000 U.S. high school students participated in the 2007 National YRBS. The 2007 report includes national data and data from surveys conducted in 39 states and 22 large urban school districts.

The National YRBS is one of three US Department of Health and Human Services (HHS) sponsored surveys that provide data on substance abuse among youth. The others are the National Survey on Drug Use and Health (NSDUH), and the Monitoring the Future (MTF) Study funded by the National Institute on Drug Abuse and conducted by the University of Michigan's Institute for Social Research. MTF tracks substance use among students in the 8th, 10th and 12th grades.

The 2007 Youth Risk Behaviour Survey data are available at www.cdc.gov/yrbs

The Brewers of Europe publish commitments delivered to Alcohol and Health Forum

The Brewers of Europe which includes 25 national brewing associations, Over 3000 brewers and 95% of the beer in Europe was a founding member of the Alcohol and Health Forum.

Building upon its experience, The Brewers of Europe is supporting its Members in optimising the effectiveness of their self-regulatory systems. In relation to this commitment, national brewing associations have made and will be making national commitments to the Forum including Bulgaria, Denmark, The Netherlands, Portugal, Romania and Sweden.

The publication also demonstrates some of the consumer initiatives commitments being delivered including: Finland: 'Drunk you're a fool!'; Germany: 'Beer. Sorry. Only after 16.'; Italy: 'If you're expecting a child, alcohol can wait!'; Netherlands: Promoting responsible drinking; Poland: Underage drinking; Romania: 'Alcohol does not make you grown up!'; Spain: 'The road demands you alcohol free'.

To view the publication, please visit http://www.brewersofeurope.org/docs/publications/20080415_commitments.pdf

Trends in the Prevalence of Alcohol Use - National YRBS: 1991—2007

1991	1993	1995	1997	1999	2001	2003	2005	2007	Changes from 1991-2007 ¹	Change from 2005-2007 ²
Lifetime alcohol use (Had at least one drink of alcohol on at least 1 day during their life.)										
81.6 (79.4-83.7) ³	80.9 (79.4-82.3)	80.4 (78.3-82.2)	79.1 (77.0-81.1)	81.0 (78.8-83.0)	78.2 (76.5-79.9)	74.9 (72.0-77.7)	74.3 (71.0-77.4)	75.0 (72.4-77.4)	Decreased, 1991-2007	No change
Current alcohol use (Had at least one drink of alcohol on at least 1 day during the 30 days before the survey.)										
50.8 (47.9-53.7)	48.0 (45.9-50.2)	51.6 (49.2-54.1)	50.8 (47.9-53.6)	50.0 (47.4-52.7)	47.1 (44.8-49.3)	44.9 (42.5-47.4)	43.3 (40.5-46.1)	44.7 (42.4-47.0)	No change, 1991-1999 Decreased, 1999-2007	No change
Episodic heavy drinking (Had five or more drinks of alcohol in a row within a couple of hours on at least 1 day during the 30 days before the survey.)										
31.3 (28.7-34.1)	30.0 (28.2-31.9)	32.6 (29.5-35.7)	33.4 (31.2-35.6)	31.5 (29.6-33.5)	29.9 (27.8-32.0)	28.3 (26.3-30.4)	25.5 (23.3-27.9)	26.0 (24.0-28.0)	No change, 1991-1997 Decreased, 1997-2007	No change
Drank alcohol on school property (At least one drink of alcohol on at least 1 day during the 30 days before the survey.)										
NA ⁴	5.2 (4.5-6.1)	6.3 (5.5-7.2)	5.6 (5.0-6.3)	4.9 (4.1-5.7)	4.9 (4.4-5.5)	5.2 (4.3-6.2)	4.3 (3.7-4.9)	4.1 (3.5-4.8)	Decreased, 1993-2007	No change

¹ Based on trend analyses using a logistic regression model controlling for sex, race/ethnicity, and grade.
² Based on t-test analyses, p < .05.
³ 95% confidence interval.
⁴ Not available.



Australian Government target RTD's with tax increases, Distilled Spirits Association calls for balance

Research released on June 3 by the Distilled Spirits Industry Council of Australia (DSICA), shows the number of binge-drinking young women had almost halved to 55,800 in the four years to 2007. However, 865,800 men aged 40 or over are drinking heavily, based on their consumption of more than 100 drinks over a month.

DSICA information and research manager Stephen Riden stated that the study showed the Government's fixation on alcopops would do little to solve problem drinking in Australia.

"Teenage binge drinking gets a lot of attention, but 50% of heavy drinkers are men over 40," he said. "It's missing the mark."

The Government's focus on binge drinking among girls is at odds with the research's findings that problem drinking has a male bias especially among the so-called blue-collar "ute man". The data forms part of the spirit industry's counter-offensive against the contentious 70% hike in alcopop excises that will earn Treasury \$3.1 billion over five years.

Labor announced the tax increase in April, claiming higher price tags on the flavoured, pre-mixed drinks would help cut binge-drinking rates among young women. The Roy Morgan research confirmed alcopops remained the preferred tittle for 18- to 24-year-old women, despite a decline in their consumption of them. But it also showed young women accounted for just 3.1 per cent of heavy drinkers last year, compared with 5.8 per cent in 2004.

Beer-drinking men posed a bigger problem, with rates of heavy drinking high among 40-plus men and rising sharply among 18- to 24-year-old men.

Beer accounted for three in four alcoholic drinks consumed by Australians who drank at risky and dangerous levels.

The industry is seeking a review of all alcohol taxes. The Government is yet to rule on the option, leaving it to a preventative health task force to report on next year.

A spokesman for Health Minister Nicola Roxon yesterday repeated the Government's defence of the alcopops measure as a way of curbing excessive drinking among young women.

But she said the binge-drinking campaign would extend to older as well as younger drinkers via programmes, for example, that targeted sporting clubs.

New South Wales Police Commissioner Andrew Scipione says taxes should be reduced on drinks with lower alcohol content to help promote more responsible drinking.

The idea is one of several Commissioner Scipione has discussed with his counterparts in other states, territories and New Zealand as they focus on how to curb alcohol-related crime.

The Commissioner backs the Federal Government's plan to increase taxes on RTDs by 70% but has suggested it should also lower the taxes on drinks with a low percentage of alcohol.

"We believe that it would make it more attractive to purchase drinks that have a lower alcohol content," he said. "I think it's probably important here that we concentrate more on the positives by looking at tax incentives for low-alcohol equivalents."

Australia's seven police commissioners nationwide are urging a review of licensing laws to consider the abolition of 'happy hours', the drinking of 'shooters' and 24-hour licensing of venues. It is the first time all the police commissioners have combined to target public drunkenness and alcohol-related crime.

Urging the public to 'Think before you drink'

A team of health psychologists at The University of Nottingham plan to discover whether using the workplace to supply information on the health effects of heavy drinking and asking employees for a small commitment to reduce the amount they drink in a single session could change people's binge drinking behaviour in the long term.

Dr Martin Hagger, of the Risk Analysis, Social Processes and Health Research Group in the University's School of Psychology, said: "The workplace offers an existing network that could allow us to get the message about binge drinking out to as many people as possible".

(Continued on page 20)

WHA - WHO draft resolution on reduction of harmful use of alcohol

More than 2,700 delegates from 190 countries passed a resolution on the 22nd May calling upon the World Health Organisation (WHO) to develop a global strategy to reduce alcohol harm, which, the NGO claims is the fifth leading risk factor for death and disability in the world and accounts for 3.7 percent of global mortality.

Some 36 member states took the floor and the resolution adopted is essentially the version that was submitted to the Assembly. Following informal consultations with Thailand, India and African groups, New Zealand proposed an amendment to paragraph 2.4, which member states agreed to by consensus. The amended paragraph reads as follows: "To collaborate and consult with Member States, as well as consult with intergovernmental organizations, health professionals, non-governmental organisations and economic operators on ways they could contribute to reducing

harmful use of alcohol." It seems likely that alcohol producers, including the The Global Alcohol Producers Group (GAP Group) - a coalition representing international beer, wine and spirits companies, who have already participated in two forums on the harmful use of alcohol organised by the WHO - will be consulted.

It is thought the strategy will be presented to the WHA in 2010 and will contain a blueprint of alcohol guidance on the marketing, pricing and distribution of alcoholic drinks.

The health ministers said the WHO strategy to reduce harmful use of alcohol should be "based on all available evidence and existing best practices...taking into account different national, religious and cultural contexts."

The blueprint, to be presented in two years, should include a set of recommended national measures for states. These could cover

guidance on the marketing, pricing, and distribution of alcoholic drinks and public awareness campaigns. The exact form and content of the draft global strategy was undecided, but no states had proposed a strict convention comparable to the one adopted by WHO against tobacco in 2005.

Chris Swonger, Senior Vice President, Corporate Affairs, Beam Global, a member of GAP Group commented: "Although alcohol is enjoyed responsibly and in moderation most of the time by most consumers who choose to drink, a minority of individuals misuse alcohol products. For this reason, we support the WHA resolution on 'strategies to reduce the harmful use of alcohol'. Combating the harmful use of alcohol by this minority who put themselves or others in harms way will ensure that the global strategy targets the problems at the point where they can most efficiently be tackled."

Urging the public to 'Think before you drink' (continued from p. 19)

"That could include people who are regularly going out for a few post-work pints, having one too many at the weekend or are simply unaware of the actual units of alcohol they are consuming at home."

Initially, staff working for organisations participating in the study would be given a leaflet highlighting the harmful health effects of binge-drinking, guidance on the recommended daily units (3-4 for men and 2-3 for women) and some helpful strategies for

reducing alcohol intake. Employees will be asked to spend five minutes engaging in a mental exercise that will encourage them to run through the benefits of reducing their binge drinking and help them to develop a basic plan for achieving their goal.

The researchers will then follow up with the employees by telephone one month and three months later to find out how successful they have been to sticking to their strategy.

The one-year project has been awarded more than £85,000 from

the European Research Advisory Board, a foundation which researches drink-related issues.

The team will also replicate the study at a number of public and private organisations in cities in Estonia, Finland and Sweden, which have comparable levels of binge drinking to the UK. The researchers are hoping to establish whether their approach could be successful in helping these nations tackle the adverse effects of binge drinking.

The impact of alcohol sales on risk of serious assault in Canada

with comments from Dr Geoff Lowe, Honorary Senior Fellow in Clinical Psychology, Post-Graduate Medical School, University of Hull

In a new study published in the May issue of *PLoS Medicine*, Joel Ray and colleagues establish the relative risk of assault per volume of alcohol sales from retail outlets in Ontario. The study focuses specifically on adult victims of assault.

In a population-based case-crossover analysis, Joel Ray and colleagues find that the risk of being a victim of serious assault increases with retail alcohol sales, especially among young urban men.

Ray and colleagues sought to add to the existing evidence on the link between alcohol sales and risk of assault. Survey data have been the preferred source of many previous studies, and the authors state that such methods tend to lack adequate controls. For this reason the authors used computerised medical records and accurate sales data from Ontario, Canada. Using an empirical case-crossover method seldom used in studying alcohol and violence, the authors aimed to elucidate further the link between alcohol sales and risk of being a victim of assault.

The authors chose a case-crossover design as a way to address a number of concerns regarding potential bias in previous studies. The case-crossover method is used to address the high likelihood of between-person confounding in previous empirical work, where uncontrolled differences among individuals can affect results. Epidemiologists have long favoured such a study design, whereby a case's exposure prior to or during the event in question is compared with that case's exposure at other times. This essentially allows a case to act as his or her own control.

In Ray and colleagues' study, the exposure period was the day before an assault case's hospitalisation and the control period was seven days earlier. The volume of alcohol sold at the store in closest proximity to an assault victim's home on the day before the assault was compared to the volume of alcohol sold at the same store seven days earlier.

The authors found that increasing alcohol sales were associated with a 13% (95% confidence interval [CI] 2–26) higher relative risk of hospitalisation for assault, for every 1,000 litres more alcohol sold per store per day. A 1,000 litre rise in alcohol sold per day equates to an approximate doubling in the level of usual daily sales. The relative risk was highest for spirits and lowest for beer. While a 1,000 litre rise in the daily sales of all alcohol proved significant for the relative risk of males being hospitalised (relative risk 1.18, 95% CI 1.05–1.33), this was not found for females (relative risk 0.89, 95% CI 0.68–1.18).

Source: Ray JG, Moineddin R, Bell CM, Thiruchelvam D, Creatore MI, et al. (2008) Alcohol sales and risk of serious assault. *PLoS Med* 5(5): e104. doi:10.1371/journal.pmed.0050104t

Dr Geoff Lowe comments:

This research/study shows that the risk of being hospitalized from a violent assault increases shortly after periods of higher alcohol sales near the victims' homes, and that young men seem to be particularly vulnerable.

One of the main strengths of this study is the use of a population-based, case-crossover analysis, accessing detailed data from comprehensive records provided by

Ontario's remarkable monitoring systems.

There is already evidence regarding the link between alcohol sales and risk of assault. For instance, in Norway researchers found increasing rates of violence in those areas with greater density of licensed premises (1). However, another study in Sweden noted slightly increased alcohol sales following increased availability in alcohol retail shops, but no increases in assault cases (2). More recently, researchers in Australia observed that the increase in number of alcohol outlets was linked with increases in alcohol-related violence and assault in the local area (3). Somewhat unexpectedly, however, most of this increased violence occurred in private homes rather than at licensed premises. (The location of assault was something that the Ontario study did not address).

In some other countries, where alcohol is sold in far more locations (than in Ontario, Canada), any specific links between alcohol sales and violent assault would be much harder to identify.

The Ontario study certainly adds to our knowledge and understanding of these potential links. It does so in a methodologically impressive way – despite some limitations. For instance, although alcohol sales may be high shortly before hospitalization, the researchers provide no evidence that blood-alcohol-levels are high.

The authors acknowledge one anomaly occurring around Christmas – with sales of alcohol increasing (as expected), but accompanied by a relative decline

in assault cases. This suggests that social context and expectancies may well be important influences.

Other commentators have suggested that the observed increases in alcohol sales might be part of the 'pre-loading' phenomenon, whereby drinkers consume more at home before going out to pubs or clubs. At the end of the night their intoxication levels are likely to be higher (than 'non-pre-loaders'), and it's this excessive consumption, rather than alcohol per se, that contributes to violence and aggression.

Many studies have shown that links between alcohol and aggression are complex, with aggressive traits likely to be more problematic than alcohol itself. It is generally acknowledged that certain individuals are more prone to violence under the influence of alcohol (and many studies highlight the susceptibility of young, urban men). So questions still remain about what kinds of individuals end up being violently assaulted. In what sorts of places do these assaults occur, and under what conditions (e.g. sporting events, nightclubs, neighbourhood rivalry, etc)?

There is still a long way to go, but gradually, by pulling together all the various methodological approaches, we are gaining further insights into the links between increased alcohol consumption and violence.

(1) Norström, T. Outlet density and criminal violence in Norway, 1960-1995. *J.Stud.Alcohol* (2000), 61, 907-911.

(2) Norström, T. & Skog, O-J. Saturday opening of alcohol retail shops in Sweden: An impact analysis. *J.Stud.Alcohol* (2003), 64, 393-401.

(3) Livingston, M. Alcohol outlet density and assault: A spatial analysis. *Addiction* (2008), 103, 619-628.

Just what is a binge drinker and how to get through to them

Research from the University of Bath suggests that current UK government campaigns warning about the harmful effect of excessive alcohol consumption fail to work because they are widely ignored, in particular by young people who consider the number of units recommended to be 'unrealistically' low. The researchers suggest that a continual and constant emphasis by authorities on the dangers of drunkenness has failed to change people's behaviour. They say public health messages instructing people to drink in moderation are widely ignored and attempts to shame heavy drinkers by labelling them 'binge drinkers' had also failed.

Dr Andrew Bengry-Howell, sociologist and an expert in young people's behaviour who led the research, says the problem is that the definition of a binge drinker as someone who drinks to get drunk could include the majority of people at some time in their lives. He calls for different public health messages to be devised which accept the reality that many people enjoy getting drunk from time to time and he likens current health messages regarding alcohol to the 'just say no' message about drugs in the 80's which failed to stop the use of heroin and cocaine.

Instead he advocates an approach which would say 'we know you are going to drink to get drunk, but just make sure it is not too often'.

He suggests that lecturing about the number of units, because the guidelines are so low will not help,

whereas helping to plan a safe night out or suggesting alternate soft drinks with alcoholic ones might.

Dr Bengry-Howell says as a 'binge' is often qualified as consumption above three to four drinks, many people are doing it and if the government message categorises everyone as a binge-drinker the message speaks to no one and most people just ignore it.

The Department of Health insisted that its approach was realistic. 'We do [already] acknowledge that people drink and that they do sometimes drink too much,' said a spokeswoman. 'But the new campaign will say that if you regularly drink more than the recommended limits, that's when you start to damage yourself. So it's a realistic message.'

Ama Uzowuru, vice-president of the National Union of Students, said: 'The NUS acknowledges that it is unrealistic to expect students never to drink to excess, but we can provide people with good advice on reducing the harm caused by binge drinking...Students' unions focus their efforts on responsible drinking - for instance, our members voted to outlaw dangerous "initiation ceremonies", and unions issue guidance to students on making sure they and their friends are safe when they are on a night out.'

Dr. Bengry-Howell presented his findings in May at a conference on young people's health hosted by the Institute of Education in London.

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