

Under Pressure

The first two months of 2004 has seen an unprecedented level of activity by the industry in reaction to a series of lawsuits or government measures and proposals in many countries. The issues reflect the increasingly difficult environment that the alcoholic drinks industry is working in to promote, market and sell its legitimate products.

The UK spirits industry has been up in arms in the UK due to the Chancellor's proposal to introduce tax stamps in the UK as a measure to tackle spirits fraud. The Treasury believes one in six bottles of spirits sold in the UK is without duty being paid - £250 million of lost revenue for the government. The industry disputes these figures and whilst the trade has been fighting hard to tackle bootlegging and fraud, it believes the introduction of tax stamps will cost millions and be easy to fake. Examples have been drawn on of the Ukraine, which has such a system, where 60,000 bottles with fake seals were seized in three weeks, Greece has thrown out the system as ineffective and in Hungary where tax stamps are used it is estimated that between 15 and 20% of spirits are still sold duty unpaid. The industry believes a tighter system of guarantees, strengthened warehouse and licensing controls plus effective 'track and trace' systems would work better. The industry would also like to work closely with Customs and Excise to identify high risk places of storage, shipments, sale and stock movements. Interestingly, Diageo have developed a hand held device which can identify counterfeit whisky, this could have great benefits in time. The root of the problem however, is the great differentiation of duty rates across Europe which invites smuggling - if equalisation was achieved much of the problem would disappear.

The US is seeing a spate of lawsuits against producers for targeting underage drinkers. Most recently a suit has been filed against Miller and Anheuser Busch

for 'promoting and facilitating underage drinking with reckless disregard for human life and the well being of the public' by parents who lost their daughter in a drink drive accident. The suit is based on RTD's hard lemon and hard cola which are said to resemble soda pop with sweet flavours and bright packaging. Francine Katz of Anheuser Busch commented 'we are deeply committed to fighting under age drinking and drunk driving. Our marketing and advertising is directed at adults and is placed in programming that is watched overwhelmingly by adults'. This follows the legal case filed in Washington in November claiming that advertising by seven major producers was 'deliberately and recklessly' aimed at underage drinkers.

In France the Bordeaux wine Federation is being taken to court in March by the alcoholism prevention group (ANPAA) over a slogan 'drink less, drink better' (which has been running for three years and was approved by the French advertising authorities) said to contravene the Loi Evin, a Burgundian generic campaign was banned by the Paris High Court in January. 2000 protesters took to the streets of Chalon in the last weekend of February, the organisers believe the wine business is being unfairly targeted in the government campaigns against alcoholism and drink driving. Wine industry leaders met 100 MP's the following week to discuss the crisis, as French wine exports fell by 10% last year and sales in France by 5%.

In South Africa, the wine and spirits industry are facing an increase of excise duties of up to 30%. Spirits face a 13% increase and sparkling wines 28%. Distell, South Africa's biggest wine and spirits producer believes the increases will be felt all down the line to producer level and could impact on job growth when coupled with the strong rand.

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Sweden

In 2003 cross border shopping increased by 20 % compared to 2002. Spirits recorded the largest increase of 42 %. Beer was up 16 % and wine 8 %, with particularly high increases in November and December. The estimated total consumption of pure alcohol per person over 15 years of age is 10.18 litres.

The trade is set to increase, with Finnish tax cuts applying on 1 March 1st in response to Estonia's EU accession in May.

Mrs Maria Renström Törnblom will lead the European Commissions work to create a common strategy to cope with alcohol related harm. The strategy was decided during Sweden's presidency in 2001. Mrs Renström has experience of alcohol and drug policy issues.

Switzerland

A new tax regulation on RTDs has come into force. The Swiss alcohol board, a body at the Financial Department of the Swiss Confederation, has increased tax on a 0.275 litre bottle of RTD with an alcohol content of 5.6% to 1.8 Swiss francs (US\$1.4) from 0.45 francs. The tax on a 0.3 litre bottle has been increased to 2.0 francs from 0.5 francs. The retail price of a bottle of RTD now averages 4.10 francs, when previously the average price stood at 2.30 francs. The move, which came into effect on 1 February, is designed to decrease the consumption of the drink among young Swiss. It will also add to budget revenue to the tune of 50m francs per year.

Russia

Russians are going off vodka. Figures released by the National Alcohol Association show a decline in the production of vodka in 2003. It is the second year in a row that production has fallen. According to the NAA, the manufacture of vodka and vodka-related products decreased by 3.3% compared to 2002.

The market share for whisky, brandy and tequila increased, as did consumption of wine and beer

EU

Binge drinking is on the increase amongst young people in the existing European Union (EU), the European economic Area and countries that are becoming members in May, according to the European Monitoring Centre for Drugs and Drug Addiction.

The EU agency noted that the proportion of 15- to 16-year-olds indulging in binge drinking (consuming five or more drinks in a row) rose from 47 to 57% in Ireland during the late 1990s and from 37% to 50% in Norway.

The report added that binge drinking was also common amongst this teenage group in the 10 eastern and southern EU accession countries, where "laws intended to protect young people are poorly enforced."

In almost all these countries, nearly two-thirds of 15- to 16-year-olds admit having been drunk at least once. In the existing EU, between 36% (Portugal) and 89% (Denmark) of this age group said they had been drunk.

Uruguay

Annual wine consumption is on the rise. Figures released 1 show the amount of wine drunk in Uruguay rose to 34 litres per capita, compared to 25.4 litres in 1991 and 31 litres in 1997.

Uruguay annually produces between 120,000 tonnes and 130,000 tones of grapes, according to the Uruguayan national wine institute INAVI, with 96.5% of this amount being used for wine -making.

Uruguay exports only 1.1% of its total wine production.

Finland

On 1 March Finland reduced its alcohol taxes. The spirits tax was lowered by 44 %, the tax on ntermediates by 40 %, the wine tax by 10% and the beer tax by 30 %. The reason is Estonia's EU accession in May. Alcohol is very inexpensive in Estonia. Even after the Finnish tax cut, the Estonian taxes are much lower.

Lawsuit Against Brewers Advertising to Minors

Brewers Anheuser-Busch and SABMiller have been confronted with a \$4 billion lawsuit alleging they target their advertising at minors.

The suit, filed by a class-action lawyer from Seattle, Steve Berman, seeks to exploit two Californian laws. The first forbids advertising intended to encourage underage drinking; the second allows individuals (as opposed to just the state's attorney general) to sue on the state's behalf for violations of California consumer protection laws.

Berman has successfully sued tobacco makers in thirteen states with charges that include targeting minors. He filed the suit because of recent studies pinpointing a relationship between teenage beer consumption and

advertising. He believes that the brewers are "inflating their profits" through underage drinkers.

The suit cites the marketing to underage drinkers of 'alcopops' and malt beverages that are "disproportionately advertised" in youth-oriented magazines; on youth-targeted radio; by running college events; and distributing free toys and products.

The brewers are dismissing the action as "without merit". Anheuser-Busch VP Francine Katz said "Our advertising and marketing is directed at adults and is placed in programming that is watched overwhelmingly by adults." She also cites a 2003 review of industry marketing activities by the Federal Trade Commission confirming "our practices are responsible."

Health Warning Labels Avoided in France..For Now

Alcohol producers, for now, have escaped two changes to legislation which would have had a major impact on their marketing in France. A draft bill which was put before the Senate in mid-January, carried two amendments aimed at introducing a warning label on bottles of wine, beer and spirits and modifying the current mandatory statement on all drinks advertising 'l'abus d'alcool est dangereux pour la santé, consommez avec modération' (Alcohol abuse damages your health, drink in moderation).

The statement would have been dictated by the Health and Agriculture ministries and the French industry feared that instead of emphasising the negative impact of alcohol abuse, a new statement would have introduced much lower thresholds. The second amendment, submitted by a senator from the French Reunion Island where alcohol abuse is a big problem, would not only have made it compulsory for the mandatory health statement to appear on bottles, it would also have introduced a further statement warning about the risks of drinking during pregnancy. Although senators

voted against these changes, the bill now returns to the French national assembly for further debate.

The alcohol industry thus has to remain on its guard, especially in the light of recent developments limiting the freedom of advertising for wine - illustrated by the ban on Burgundy wine adverts and the reported threats of a review of taxation policy.

Sharon Nagel of La Journée Viticole comments on a potential tax review: 'the high council mentioned in the report actually denied proposing an increase in tax on alcohol. It said that newspaper reports had inferred the proposal on reading a then unpublished report by the council and made a public statement to say that was not its official position as it had no authority to make such a proposal. However, the issue of alcohol taxation is definitely being promoted by various authorities, not least of which is the MILDT, whose chairman claimed that it would comment on it in a forthcoming report. The wine industry most certainly has fears that taxation will come to the fore again very soon, as has the issue of advertising and the limitations imposed on wine'

Mis Reporting Of Drink Driving Figures in UK for 2003

The British Beer and Pub Association (BBPA) is backing the Royal Society for the Prevention of Accidents' (RoSPA) call for the introduction of random breath testing but questions their analysis of the UK Christmas drink drive statistics.

"This year's figures clearly show fewer accidents, fewer injuries and fewer drink drive offenders," said Mark Hastings, BBPA Director of Communications. "This is positive news but we need stronger enforcement by random testing to help the number of offenders keep falling. We fully support RoSPA's call for random testing but challenge their interpretation of the official accident statistics which actually show a 4% fall in drink drive offences. It's an indisputable fact that the number of collisions reported to the police fell by 6% from 12,402 to 11,622. And, of those, 8.9% failed a breath test compared to 8.7% in 2003, which means 1,035 drink drive offenders this year compared to 1,080 for Christmas 2002 - 45 fewer."

The Association of Chief Police Officers (ACPO) also shows that the number of collisions causing injury totalled 5002, a drop of 4.58% on 2002-3, while drink related collisions fell by a 'significant' 4.17% on last year - 25% less than in 1997.

"Drink-related road accidents have declined steadily since the 1970s which shows that responsible drinking campaigns are working and random testing could add to their effectiveness," Hastings added.

Phytochemicals May Protect Against Breast Cancer

Scientists at City of Hope Cancer Center in Los Angeles isolated the wine phytochemical, procyanidin B dimer, that when given to mice with breast cancer reduced the size of their tumours. The investigators explain, "While there are already drugs on the market that can control estrogen-dependent breast cancer development in post-menopausal women, this is the first naturally occurring phytochemical that appears to have the same effect." It is explained that the phytochemicals work in the same way as these drugs, but have the advantage of naturally occurring in grape skins and seeds.

The scientists caution that the research is based on an animal study, and that clinical trials on post-menopausal women are needed to confirm any benefit to humans. The lead researcher expressed concern about misinterpretation of the data cautioning that people should not consume a lot of red wine, as alcohol is a risk factor for breast cancer. In fact, the study found that for women to ingest the comparable amount of procyanidin B dimer given to the mice, they would have to drink a half bottle of red wine daily. However, he adds, for normal,

healthy women, one glass of red wine a day or eating grapes with skins and seeds may just reduce the overall circulation of estrogen in the body.

Overall, it is emphasized that this research points to the importance of a healthy well balanced diet that includes naturally occurring phytochemicals. Ref. <http://cancerres.aacrjournals.org/>

A second study by French researchers reported alcohol's potential beneficial effects with respect to total mortality and cardiovascular health but point out the still inconclusive data with respect to cancer risk. They refer to evidence that wine may be associated with cancer risk reductions due to the polyphenol resveratrol but emphasize that we are lacking data on its availability in vivo. They conclude, "Although regular consumption of one or two glasses of wine seems reasonably safe from a health point of view, a recommendation to the general population for low wine consumption is not justified."

Reference: Bianchini F et al, Wine and Resveratrol: Mechanisms of Cancer Prevention? European Journal of Cancer Prevention, Vol. 12, 2003

Female Heavy drinkers Risk Heart Disease

A study by University College London found women who drank more than the recommended safe limit 2-3 units of 8g a day or 21 units a week increased their risk of heart disease by 57%.

Overall death rates were seven times higher among women who drank two or more drinks a day than in those who drank less than three drinks a week. The research, based on data on 3,374 women, is published in *Addiction*. The difference in death rates among men was much smaller - with those drinking more frequently just two and a half times at greater risk. But being teetotal was also associated with an increased danger those who did not drink at all had an 80% increased risk of heart disease compared with those who had a couple of drinks a week. Lead researcher Dr Annie Britton said: "Little and often is probably the best method for drinking but we certainly wouldn't endorse people who don't drink to go out and start as a result of this and other studies. The best advice is not to drink more than the government's guidelines of around 21 units for women a week".

"Many previous studies have focused on the risks experienced by middle-aged men, but we are becoming increasingly aware that alcohol consumption among women is a real health issue."

Dr Britton commented. "The large amount of drinking among young women seems to be quite a new phenomenon. We are not yet seeing the long-term effects and it could be 20 years before we know what effect it has had. Our study is a snapshot of what could happen."

SOURCE: Britton A, Marmot M. Different measures of alcohol consumption and risk of coronary

Preserving Antioxidants in White Wines: Good News!

By Gordon J. Troup, G.J. Troup, School of Physics & Materials, Engineering, Monash University, Victoria 3800, Australia.

When an air press is used to extract the juices from white grapes (so as not to crush the skins, and thus release their polyphenols), the oxygen in the air oxidises ~2/3 of the single ring phenols, the cinnamates. White wines without a reasonable concentration of antioxidant phenolics can cause health problems for people who drink only such white wines.

In San Michele al Adige, close to Trento in Italy, there is winery (Pojer & Sandri) where one of the partners (Marto) reserves a section for researches on wine production: the results are monitored by

Dr. Fulvio Mattivi; a wine scientist, who works at a nearby Italian research institute - also responsible for verifying the DOC applicability to Italian wines.

Marto has developed a recycling gas press, using Nitrogen, which allows the preservation of the majority of the white wine antioxidants. Such a wine has ~3 times the concentration of the phenolics in airpressed wine. The good news is that his first wine produced with this technique is very good indeed. As seniorially evaluated by Dr. Mattivi, this author and his wife. Other wine makers should note!

Alcohol and Preterm Pregnancy

This study, based on data from 40,892 pregnant women in Denmark evaluated the association between amount and type of alcohol consumed during pregnancy and the risk of preterm delivery. It assessed whether the relation differs among very (<32 completed weeks) and moderate (32-<37 completed weeks) preterm delivery.

Preterm birth is one of the main causes of neonatal mortality, neonatal morbidity, and functional impairments. Previous studies on alcohol consumption during pregnancy and preterm delivery have revealed conflicting results. Compared with those who abstained during pregnancy, the relative risk for preterm delivery among women who consumed from 4 to 7 drinks and seven or more drinks per week during pregnancy were 1.15 and 1.77, respectively. Below these levels, no increased risk of preterm delivery was found. Among women who consumed seven or more drinks per week, the relative risk of very preterm

delivery was 3.26 compared with that of nondrinkers. There were no differences in the associations between type of beverage and preterm delivery.

The study showed that alcohol consumption below four drinks per week did not increase the risk of preterm delivery; in fact, women in this study consuming 2-3.5 drinks per week had a 20% reduction in risk of preterm delivery that was statistically significant. The estimates of risk for greater amounts of alcohol were above one, indicating some increase in risk for preterm delivery, although it should be noted that none of these estimates suggesting increased risk were statistically significant.

In the US women are generally advised to not drink at all during pregnancy, whereas in the UK one or two drinks (8g) once or twice a week are deemed safe by the government guidelines. Since there are many adverse outcomes to alcohol consumption during pregnancy, and “safe

level” have not been determined for many outcomes, the present study authors state that their findings should not be used to encourage alcohol consumption during pregnancy. However, the fact that drinkers of up to 4 drinks per week did not have an adverse outcome suggests that women who have an occasional drink during pregnancy should not be concerned about increasing their risk of preterm delivery. Neither did the findings support the belief that women hoping to conceive should abstain altogether, as their findings showed women who abstained from alcohol prior to pregnancy and did not drink during pregnancy actually had a higher risk of preterm delivery than women consuming small amounts of alcohol.

Source: Albertsen K, Andersen A-M N, Olsen J, Gronbaek M. Alcohol consumption during pregnancy and the risk of preterm delivery. Am J Epidemiol 2004;159:155-161.

Red Wine Acts As Antibiotic

Findings from a team at the University of Illinois, published in *New Scientist* magazine, conclude that red wine acts as an antibiotic in the body. The scientists tested the effects of concentrated extracts from Pinot Noir wine and resveratrol – a chemical found in the wine – on certain bacteria, and found that both compounds stunted the growth of colonies of bacteria.

One strand of bacteria that wine was found to kill is chlamydia pneumoniae, which scientists say can aggravate inflammation and slow arteries by leaving fatty deposits. Wine kills potentially fatal bacteria, scientists have discovered.

Addiction and Eating Disorders are Linked

A report issued by the National Center on Addiction and Substance Abuse (CASA) at Columbia University in New York reveals that parents of girls with eating disorders should take special note (web site www.casacolumbia.org)

“Individuals with eating disorders are up to five times more likely to abuse alcohol or illicit drugs, and those who abuse alcohol or illicit drugs are up to 11 times likelier to have eating disorders,” said Joseph Califano, CASA president and former Secretary of Health, Education and Welfare. “Both problems afflict the very young and quickly spiral out of control. High school girls with eating disorder symptoms are much likelier to smoke cigarettes, drink alcohol or use drugs than those without such symptoms,

..Even middle-school girls — typically age 10 to 14 — who have dieted in the previous month and evidence no eating pathology are almost twice as likely to become smokers as non-dieters.”

CASA collected information from federal government health data, and 500 books, reports and articles for its analysis. Patients with anorexia and bulimia may share certain characteristics with substance abusers such as brain chemistry imbalances, low self-esteem or depression, CASA said. They may also have unrealistic body images. The report found that while only 15 percent of girls under 18 were overweight, 40 percent of girls in grades one through five and 62 percent of teenage girls said they were trying to lose weight.

Global Authoritative Drinking Guidelines on Moderation: Understanding Potential Risks and Benefits for the Individual and Public at Large

by Elisabeth Holmgren, AIM Director of U.S. Operations

At the centre of the ongoing social policy debate is the fundamental concern that the public should be made fully aware of the risks of alcohol misuse. Experts emphasize that a better understanding of the potential risks and benefits of drinking will reinforce the sensible and responsible consumption of the individual and the public at large. This document is intended to reinforce the importance of sensible consumption for those who choose to drink by giving an overview on some of the most prominent authoritative statements from around the globe.*

Taking a close look at public health policy positions on alcohol in the US and abroad reveals interesting trends on what experts agree on and what they believe the public should be told. Most of the reviews are done by distinguished panels of experts often appointed by the government to review both the biomedical and psychosocial evidence. In fact, while most guidelines acknowledge the developing scientific consensus on moderate drinking and a reduced risk of coronary heart disease, the overall messages remain cautious and generally non drinkers are advised not to start drinking. Overall, the messages differ especially with respect to the discussions on any potential health advantages and the general advice on women's health, underage drinking, and the elderly.

While at first glance, official moderation messages are much more positive than even ten years ago, it is increasingly apparent that policy bodies prefer to err on the side of caution because there is no clear scientific finding that can uniformly apply to every segment of the public. Furthermore, guidelines acknowledge that while there may be certain benefits, these are mainly evident in middle-aged individuals and need to be adequately weighed against certain risks. Many public health policy leaders stress that these facts should be highlighted and that people should be urged to obtain more individual advice from their physician or healthcare

provider rather than relying on broad public messages.

The excerpts below, from some of the major international moderation guidelines, offer an overview of current official alcohol-related policy around the globe.*

THE DIETARY GUIDELINES FOR AMERICANS

The Dietary Guidelines for Americans are published every five years by the Departments of Agriculture and Health and Human Services with the most recent edition released in 2000 but a revised one to be upcoming in late 2004 or early 2005. The alcohol guideline is presented as part of several nutrition messages intended to promote healthy lifestyles and eating patterns by emphasizing, "Eating is one of life's greatest pleasures...you can enjoy all foods as part of a healthy diet as long as you don't overdo it on fat, sugars, salt, and alcohol."

The alcohol guideline not only outlines the risks of abuse but also some of the potential benefits from moderation and emphasizes the following three messages in the "Advice for Today" section:

Ø If you choose to drink alcoholic beverages, do so sensibly and in moderation.

Ø Limit intake to one drink (14g) per day for women or two per day for men, and take with meals to slow alcohol absorption.

Ø Avoid drinking before or when driving, or whenever it puts you or others at risk.

The message also cautions about additional calorie intake from alcohol and defines a drink as a 12 oz of regular beer, 5 oz of regular wine or 1.5 oz of 80 proof distilled spirits. Groups of individuals "who should not drink" include the young, the elderly, pregnant women, and those who operate machinery or take medication. Different from any other nation's guidelines, the US message also states, "Risk of alcohol abuse increases when drinking starts at an early age."

The lead paragraph warns about abuse and several potential health risks by underscoring, "Excess alcohol alters judgment and can lead to dependency and

a great many other serious health problems. ... Even one drink per day can slightly raise the risk of breast cancer." In fact, any amount over the moderation definition is portrayed as potentially increasing the risk of several social and medical problems such as violence and high blood pressure.

At the same time, the potential positive effects are presented in the following way, "Drinking in moderation may lower the risk for coronary heart disease, mainly among men over age 45 and women over age 55. However, there are other factors that reduce the risk of heart disease including a healthy diet." In this context it is further explained, "Moderate consumption provides little, if any, health benefit for younger people." The concluding sentence on the subject of moderate consumption and health also cautions, "Some studies suggest that older people may become more sensitive to the effects of alcohol as they age."

In summary, while it is significant that messages on the potential health benefits associated with alcohol are highlighted in the Dietary Guidelines for Americans, it should be recognized that their mention is still very limited. However, these Guidelines are very unique in that the importance of sensible consumption with meals and as part of a well balanced diet is underscored. Other important US sources on drinking and health include recommendations by the National Institute on Alcohol Abuse and Alcoholism as well as public health groups such as the American Heart Association. (See table III)

UK SENSIBLE DRINKING GUIDELINES

The UK Sensible Drinking Guidelines were published in 1995 by an appointed intergovernmental group and are also being revised in the near future. These guidelines do not address any diet or lifestyle issues but they were designed as a review of medical evidence on alcohol to develop alcohol use policies that foster responsible non abusive behaviour.

Like the US Dietary Guidelines message, the UK Sensible Drinking Guidelines caution about misuse and explain who should not drink for both medical and social reasons. The guidelines also address the “possible risk of breast cancer” but do not specify abstinence for pregnant women or those who are trying to conceive (one to two units of 8g a week is deemed safe if pregnant in the guidelines). On the other hand, the guidelines provide more detailed advice for individual situations. The specific messages strongly discourage binge drinking, recommend drink-free episodes and provide advice on drinking patterns. For example, they suggest possible changes in drinking customs for those who do not drink, those who drink very little, or are in an age group with a high risk for coronary heart disease.

In the UK levels of alcohol consumption “unlikely to cause health damage” are defined as below “3 to 4 units per day for men/”, and “2 to 3 units per day for women”. A unit or drink contains, however, only 8 g of alcohol. The UK message is unique in that it also gives a guideline or limit for weekly consumption, which are 21 units per week for men and 14 units per week for women. In line with the US Dietary Guidelines, it is emphasized that there are some people who on medical grounds should not take up drinking as they can “make other changes to their lifestyle to lower the risk of coronary heart disease and improve their health in general.” With respect to moderate consumption and health, all cause mortality is noted to be “at its lowest at modest drinking levels (at about one unit a day for men and women).” In addition, a maximum health advantage of between one and two daily units is noted, and it is emphasized that a significant health risk will not accrue up to four units a day for men and three units a day for women. The guidelines also discuss that “the health benefits are more evident from regular daily drinking.” Specifically, men over age 40 and postmenopausal women are emphasized as recipients of a “significant health benefit in terms of reduced coronary heart disease mortality and

morbidity.” Furthermore, the guidelines explain that middle aged or elderly non-drinkers or infrequent drinkers and especially those at risk for heart disease “may wish to consider the possibility that light drinking may be of benefit to their overall health and life expectancy.”

In summary, the UK guidelines are much more specific in addressing potential positive health outcomes with respect to moderate consumption. Most noteworthy, the Sensible Drinking Guidelines clearly suggest that for certain individuals; the benefits of moderation may outweigh the benefits of abstinence. They are also unique in that they provide both daily and weekly drinking limits for men and women.

THE AUSTRALIAN DRINKING GUIDELINES

The Australian National Health and Medical Research Council released “Drinking Guidelines” in 2003. These provide more comprehensive messages for the general population than either the US, UK or Canada. It is explained that the guidelines are intended to “provide Australians with knowledge and understanding that will enable them to enjoy alcohol, if they choose to drink, while avoiding or minimizing harmful consequences.” This overall opening message reflects a positive and balanced attitude that is further underscored by the statement, “Alcohol is widely used and enjoyed throughout our society, and for many people it forms part of an enjoyable and generally healthy lifestyle that includes good diet and exercise.”

The first guideline of 12 in-depth messages states, “Everyone who drinks alcohol should control their pattern of drinking to minimize both longer-term and short-term risks.” In addition, the guideline states, “To minimize risks and gain benefits in the long-term men should not exceed an average of four standard drinks per day or 28 drinks a week and women should not drink more than two drinks a day or 14 standard drinks per week”.

A standard drink is only 10 g of ethanol vs. 14 g in the US or 8 g in the UK. As in the UK, the Drinking Guidelines in

Australia give both daily and weekly limits. Furthermore, men and women are also advised to have one to two alcohol-free days a week, which is not addressed in the US guidelines but advised in the UK guidelines.

THE CANADIAN LOW RISK DRINKING GUIDELINES

The Canadian Low Risk Drinking Guidelines were endorsed by the Addiction Research Foundation and the Canadian Center on Substance Abuse in 1997. These alcohol guidelines were developed for health promotion in the general population and are specifically intended to assist physicians in providing best advice to individuals.

The Low Risk Drinking Guidelines “express current best advice about the health benefits and negative effects of alcohol use.” The different risks and benefits from moderate consumption are explained in similar ways to other governmental guidelines and it is stated that “men and women consuming up to 14 and 9 standard drinks per week, respectively, have a lower risk of early death than abstainers.”

One standard drink contains 13.6 grams of ethanol. Furthermore, it is explained that alcohol “has a protective effect over a wide range of intakes” but when abused, “benefits are counterbalanced by increased risks of other chronic conditions and injuries.” Additional advice in a slightly modified guideline has been endorsed by the Canadian Centre on Substance Abuse, that is not increasing alcohol consumption for abstainers or infrequent drinkers and reducing risk of dependence by abstaining one day a week. The guidelines also explain, “In certain circumstances and for certain individuals, the use of alcoholic beverages is contraindicated.” They include this cautious or non drinking advice for those who are pregnant, have certain physical or physiological illnesses, take medications, operate vehicles or machinery, are unable to control drinking, are responsible for public order or safety, or are legally prohibited from drinking such as underage people.

These guidelines also emphasize the general rule of no more than two standard drinks a day.

The Canadians stress, “People considering increasing their drinking for any health reasons should consult their physician before doing so.” This is in keeping with the general message that individuals should not drink to “reduce their risk of health problems,” which is strikingly different from the UK advice. In summary, the Canadian Guidelines are unique in that the important role of the physician or health care provider in giving advice to individuals is emphasized. While these guidelines in no way recommend drinking for non drinkers for potential health benefits, they clearly acknowledge that some individuals should be given advice on the subject.

THE CHALLENGE OF VARIOUS DEFINITIONS OF MODERATION

Along the lines of other official guidelines, the report also highlights, “The protection that alcohol provides against heart disease is of importance only for people in age groups where heart disease is a risk, generally from about age 40 onward.” With respect to cancer it is emphasized, “There is clear evidence that alcohol is associated with an increased risk of cancer overall.... In particular, further research is needed to clarify the possible role of alcohol in relation to breast and bowel cancer.” However, different from any other official message, it is explained that there may be lower risks observed for certain cancer types if alcohol is taken with meals. The report encourages responsible drinking, warns against drinking when undertaking activities that involve risk, and details certain groups that should not drink or who should use caution similar to other governmental guidelines. In contrast to other governmental statements, there are more detailed recommendations related to the elderly and the young who are urged to drink rather less than the general limits if they choose to drink at all. In sharp contrast to any other guidelines, the issue of underage drinking is addressed with the statement, “To

become responsible adult drinkers, a gradual supervised introduction to alcohol is recommended.” In addition, pregnant women are advised not to drink or to “reduce their drinking to a minimum” as in the UK’s advice. In summary, the Australian Guidelines provide the most specific recommendations for certain groups and discuss both the potential risks and benefits in much more detail than the US Dietary Guidelines. However, in contrast to the UK Guidelines, non drinkers are not encouraged to start drinking to gain any potential health benefits even if they were at risk for heart disease. Most significantly, the guidelines show a more open approach on how to deter underage drinking problems.

To date the above guidelines are the most comprehensive in the world and have been acknowledged by major research and policy organizations. There are around a dozen additional countries that provide authoritative definitions of moderation. However, all these differ in their advice on the most appropriate drink sizes and unit messages to the public. (See table I and II)

When moderate drinking guidelines are approached in a standardized way with respect to ethanol content, several interesting differences emerge. For example, a drink in the US is 75% larger than a drink in the UK. When the respective upper limits are compared, the sensible consumption limits are much higher in the UK. Most strikingly, the limits “deemed safe” for women are 70% higher and for men are 17% higher than those in the US. The Australian limits are about 40% higher for both women and men. Therefore, research and policy leaders have stressed that socially responsible education messages need to highlight the appropriate drink sizes and units for a particular population. Ultimately, that may also hold true for any of the health related messages which may also vary due to cultural differences.

SUMMARY PERSPECTIVE

In conclusion, public health and nutrition policy-related positions on alcohol are much more favorable than only a decade

ago in that the differences between use and abuse are acknowledged. Most significantly, moderation guidelines discuss certain health benefits but caution about individual differences, women’s health concerns, as well as effects on the elderly and underage individuals. Except for the UK guidelines, messages around the globe do not present the option for a non drinker (at risk for coronary heart disease) to start drinking for health reasons and overall it is becoming evident that healthcare providers will be increasingly urged to address these health issues with their patients.

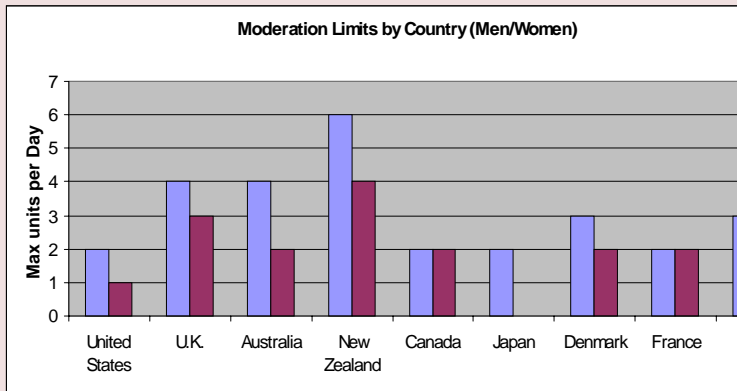
While guidelines around the world may differ in certain respects, they all are cautious because of fears that incomplete or too favourable messages may be misleading or encourage abuse. Governmental moderation guidelines may become more complicated as science more narrowly specifies different alcohol effects for different population groups and individuals. We can foresee that all these issues will be debated over the months and years to come as positions in several countries will be revised.

As the moderation guidelines debate moves forward it appears to be most responsible to support education messages that emphasize an overall healthy diet and lifestyle for those adults who choose to enjoy moderation and tailor these messages so that they are in line with each country’s official guidelines and statements. AIM has long expressed concerns about alcohol misuse and advocated sensible consumption messages. Towards this end, AIM’s executive has worked with several members of the Medical and Scientific Council to prepare a draft “Science and Social Responsibility Education Message” that can be viewed at drinkingandyou.com

This paper is based on an article by Elisabeth Holmgren that was first published in *Wines & Vines*, March 2003. For key references, please visit www.aim-digest.com. For additional information on authoritative international guidelines visit www.icap.com

Moderation Figures:

Table I: Moderation Limits by Country -

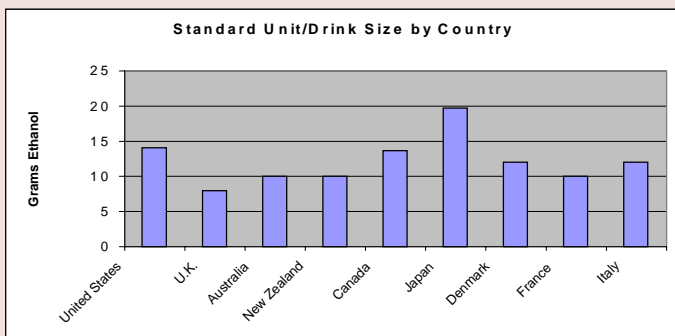


Most countries have different drink unit sizes (see table II.) These countries also specify a weekly limit for both men and women respectively as follows —United Kingdom (21/ 14 units); Australia (28/14 standard drinks); New Zealand (21/ 14 units); and Canada (14/9 units). The US is not listing a weekly summary limit but emphasizes consumption with meals as an additional recommendation.

In contrast to the above, Denmark’s Guidelines only emphasize weekly limits as 21 units per week for men and 14 units per week for women.

Source: Based on published official guidelines and ICAP summary report, December 2003

Table II: Standard Unit or Drink Sizes by Country



The amount for France is an average as they list 12 g for beer and 8 g for wine

Source: Based on published official guidelines and ICAP summary report, December 2003

Table III: Major Authoritative Statements Address the Importance of Moderation

The following selected website sources help to clarify the potential risks and lifestyle advantages of alcohol:

Dietary Guidelines for Americans visit at <http://www.health.gov/dietaryguidelines/>

National Institute of Alcohol Abuse and Alcoholism at <http://www.niaaa.nih.gov/faq/faq.htm>

UK Sensible Drinking Guidelines at <http://www.dh.gov.uk/AboutUs/fs/en>

Australian Alcohol Guideline at <http://www.alcoholguidelines.gov.au/>

Canadian Center for Addiction and Mental Health at http://www.camh.net/about_addiction_mental_health/low_risk_drinking_guidelines.html

NZ Target the Repeat Drink Drivers

Since 1989, alcohol-related fatalities on New Zealand roads have dropped by a massive 66%, suggesting that most drivers have taken on board the message about drinking and driving. However the Beer Wine and Spirits Council of New Zealand is not being complacent in their efforts to curb drinking drivers.

Of those drinking drivers, who were killed on our roads, about two thirds were hard core drinking drivers (with a blood alcohol level of above 1.50) and about half of them were repeat offenders with one or more prior convictions.

The Council argues that if such people are not taking any notice of the current blood alcohol limits, they are unlikely to change their attitude if it is lower. Research carried out in Australia showed that the severity of the penalty has little effect on the behaviour of people when it comes to breaking the law; rather it is the expectation of getting caught that is the deterrent. If it is high then this modifies people’s behaviour positively, if they have a low expectation of getting caught, then they take more risks.

The technology is now available to target these people that are repeatedly getting in a car and driving it while they are under the influence of considerable amounts of alcohol. There are Interlock devices that can be fitted to repeat drink drivers cars. The device prevents them starting the car until they have passed a breath test for alcohol levels. These devices are used across the USA, Canada, Sweden and in several Australian States. Rehabilitation and education programmes combined with the Interlock technology is proving to be very effective in the Countries using them.

ICAP “International Drinking Guidelines” Summary

This study of international drinking guidelines gives an analysis of the varying advice from governmental and medical bodies across the world. The report highlights the fact that although all such guidelines aim to offer the best advice to individuals for ‘safe’ drinking, there is considerable inconsistency in the actual levels of alcohol that are considered safe. These inconsistencies are explained from a historical and cultural perspective, and the report acknowledges that guidelines may also reflect the view of current governments as to how information on health and risk should be shared with the public, and the decision of some to err on the side of caution.

Most guidelines provide average recommendations which can be applied to the majority of the population. However, differences in physiology and the ability to metabolise alcohol between men and women has led to some countries such as the UK, France, Australia and US recommending different thresholds for men and women. In the Netherlands, women with a lower body weight are advised to drink less than the recommended daily limit. Other countries such as Italy, Spain, Switzerland

and the Netherlands currently make no such distinction between recommendations for men and women.

Some countries offer specific advice for ‘special populations’ such as pregnant women, the elderly, or individuals who are alcohol dependent. Advice to pregnant women generally is to not drink, although some countries may only recommend caution and a decreased level of consumption.

Public guidelines are often presented in terms of ‘standard drinks’. The measurement of a ‘standard drink’ covers a broad range from 8g of ethanol (Ireland and the UK) up to 14g (USA and Portugal) and 19.7g in Japan. Other guidelines give daily thresholds directly in grams of ethanol. These vary for women from 10g in Poland to 50g in Catalonia, and for men from 20g in Poland to 70g in The Basque Country.

About a third of countries give an additional threshold for the week, which is less than 7 times the daily threshold, ranging for women from 50g in Poland to 140g in New Zealand, and for men from 100g in Poland to 252g in Denmark.

Some countries give only a weekly threshold. Knowing how many drinks per week may be ‘safe’ does not answer the question of how many drinks an individual can safely consume in a given day.

A minority of guidelines recommend one or two days free from alcohol per week. Further guidelines are situational suggesting that individuals should avoid alcohol in the workplace or during work time (Italy), when driving (Luxembourg, Norway, US), while operating machinery (The Netherlands, Switzerland), while engaging in sport (Switzerland), on an empty stomach or whilst in the company of young children (Norway).

Not all advice is discouraging drinking: The UK Sensible Drinking guidelines recommend that individuals who do not drink, drink very little, or are in an age group at high risk from CHD, might ‘consider the possibility that light drinking might benefit their health’. The Swedish Research Council also include recognition that ‘a moderate alcohol intake may have positive medical effects’.

To view the report visit www.icap.org

Global Social Responsibility Initiatives By The Worldwide Brewing Alliance

This booklet has been put together by the Worldwide Brewing Alliance, which involves brewing trade associations in the UK, Australia, Canada, New Zealand, the USA and the Brewers of Europe (17 European brewing trade associations), and focuses on demonstrating the efforts made by the brewing industry to ensure its products are used responsibly.

The number and diversity of the initiatives listed recognise the cultural and legal differences in different countries and show the need to tailor activity to local needs. More than 360 initiatives from 34 different countries are described. These have been grouped under 6 main sections: ‘Campaigns and educational material’, ‘Campaigns and initiatives designed to discourage people from drinking and driving’, ‘Research and publications’, ‘Codes and practice for

responsible commercial communications’, ‘Server training’, and ‘Workplace initiatives and company responsibility campaigns’.

Brewers worldwide produce 1,500 million hectolitres of beer every year and support an estimated 17 million jobs both directly and indirectly the production and sale of beer. In the introduction the WBA say: **“Beer is a social drink. When consumed responsibly, it provides pleasure, brings people together and encourages them to socialise. Tens of millions of people throughout the world enjoy drinking beer and do so safely and responsibly.”**

Editor Janet Witheridge of the British Beer & Pub Association says: **“Beer is regularly enjoyed by people the world over and has been an integral part of**

society for centuries in many cultures worldwide...What does not vary is the brewing industry’s commitment to discouraging misuse of its products as shown by the initiatives described.”

This report is well-designed and very comprehensive, providing an excellent overview of initiatives around the world. The inclusion of the numerous posters and publicity material adds visual interest and makes report colourful and cultural fascinating, as one can see the varying strategies around the globe.

A website directory and address list completes this report which is available from: British Beer & Pub Association, Market Towers, 1 Nine Elms Lane, London, SW8 5NQ Email: enquiries@beerandpub.com Website: www.beerandpub.com

Binge Drinking: Causes, Consequences and Cures By Adrian Furnham

Alcohol use and misuse is as old as man (alcohol having been drunk in Mesopotamia 5000 year ago), with clear associations with celebrations and pleasure, which in part explains its popularity. However concern over binge drinking in young people is growing and overall alcohol consumption appears to be increasing in some sectors of the population in many countries with associated problems.

In *Binge Drinking: Causes, Consequences and Cures*, Adrian Furnham defines Binge drinking as the consumption of a large quantity of alcohol in a short space of time. The study finds binge drinking becomes especially problematic when associated with criminal, licentious or risky activities and may also be associated with illegal drug taking. Social costs associated with excessive drinking range from driving accidents to absenteeism from work as well as opportunistic, and violent crime. There is considerable disagreement among researchers as to what constitutes *binge drinking* and its quantitative and qualitative definitions (for some it is 5 drinks per session for others it is 8.)

In the report, Adrian Furnham, the author, explores factors that influence young people in Western, developed countries to use and abuse alcohol. The cultural, historical and sociological factors that shape a nation's patterns are examined. Research clearly shows that there are cultural and national forces that lead to significantly different drinking patterns in different countries. Southern Europeans may consume as much if not more alcohol than Northern Europeans but they have healthier patterns of drinking. In Britain it is estimated that 6.4 million people can be classified as a moderate to heavy drinker and a further 1.8 million people heavy drinkers. Britain is pretty well in the European average for consumption (Luxembourg, Ireland and Portugal being highest, Finland and Sweden being lowest). Alcohol consumption was shown to be multi-determined by cultural, economic, legal, sociological and psychological factors and alcohol consumption is as much a consequence of these factors as a cause.

The report also takes a psychological approach in attempting to understand what turns a young person into a non-drinker or a modest, moderate, heavy, secretive or abusive drinker. Alcohol dependence and abuse are among the most prevalent mental disorders in the general public according to the study. A community study conducted in the US between 1980-1985 using DSM-III criteria found that about 8% of the adult population had Alcohol Dependence and about 5% abused alcohol at some time in their lives.

The report also looked at how social norms, national customs and legal regulation attempt to specify who can and cannot drink alcohol, where and when. Countries who believed in draconian legislation are now turning to more liberal policies to encourage healthy drinking. A particular focus of the study looks at attempts to control unhealthy drinking and specifically how to prevent it, with recent research on binge drinking being reviewed. Two clear findings came from the various studies, the first being that unhealthy drinking is caused by a multitude of different factors (personal, social, cultural and economic) that interact to produce individual and national drinking habits.

The second finding being that efforts to reduce, regulate and control alcohol intake by governments often ignores the complexities of the issues and attempts to reduce misuse by increasing taxation, limiting licensing or banning advertising can have unanticipated and paradoxical effects, sometimes having the opposite effect to that intended.

Cultural tradition, much more than advertising, alcohol pricing and availability were predictors of consumption (what is consumed, where and by whom). Therefore the alcohol industry: brewers, distillers and vintners have a role to play in the education and supply to young people.

The report concluded that prevention and cure through education in schools, home

and college clearly helped young people understand what it means to drink well and derive pleasure and benefit from drinking. The most powerful agent in determining young drinkers' habits was shown to be parents, teachers and other role figures that discuss and model drinking patterns. Those primarily responsible for sensible drinking are first and foremost the young people, their friends and parents. For a copy of this study, please contact Helena.Conibear@Aim-Digest.com

IREB report on 13-20 year olds drinking in France

IREB has 30 years experience of surveying the consumption of alcoholic beverages by various populations. Their surveys seek to better understand a population's specific attitudes and behaviours towards alcohol, measuring and analysing the frequency, context, motives and factors associated with alcohol consumption.

The 2001 cross-sectional survey involved 1028 teenagers between the ages of 13 and 20, recruited from the general population. The population is identical to the census population and includes young people not enrolled in school.

The survey looks at the prevalence of alcohol consumption by gender and age, but above all it highlights the association between alcohol consumption and socio-demographic, academic, behavioural, relationship, and psychological factors. The survey gives estimated quantity of alcohol consumed and places consumption in a much broader perspective, including modes of drinking, lifestyles, opinions and values. The survey shows a light decrease in alcohol consumption, both in consumer numbers and in alcohol intake.

To obtain a copy visit www.ireb.com

Profile: Francois Booyse



Francois Booyse is a Professor at the Department of Medicine at the University of Alabama. He is a Director of Molecular Cardiology, Director of the UAB Center for Wine and Cardiovascular Health, and Associate Director of Research, Division of Cardiovascular Disease.

He graduated from the University of Pretoria, Republic of South Africa, where he also completed post graduate training

in Organic Chemistry and Biochemistry. Dr. Booyse received his Ph.D. in biochemistry from the University of Illinois College of Medicine in Chicago. His research concerns alcohol and cardiovascular disease.

Currently, Dr Booyse is Program Director at the Division of Cardiovascular Disease, University of Alabama. For the past seven years, he and his research team have developed new and improved methods of studying alcohol and polyphenol induced changes on the heart's pumping function. Their studies have focused on the ability of wine components to alter cellular and vascular functions to reduce the overall risk of developing blood clots in the heart's blood vessels. They have established their laboratory as one of the leading research groups to investigate the basic mechanisms that are involved in the cardio-protective effects of moderate alcohol consumption.

Dr Booyse leads a multi-disciplinary team of 17 researchers in a 5 year program sponsored by the National Heart, Lung and Blood Institute. The program is to explore the cellular, molecular and genetic mechanisms by which wine components - alcohol and polyphenols - work to reduce and prevent heart disease and deaths related to heart disease. Their ongoing scientific research has revealed that cardio-protective results may derive not only from individual polyphenolic components, per se, but also from additive or perhaps synergistic effects of alcohol and polyphenol components on a variety of vascular, cellular and haemostatic functions.

AIM was therefore most honoured when Francois Booyse agreed to join AIM's Social, Scientific and Medical Council, bringing invaluable expertise to our international board of specialists.

Dutch HORECA report By Peter de Wolf

Koninklijk Horeca Nederland Woerden have release analysis of 2 recent surveys in Holland: the National Drugs Monitor Trimbos Institute Utrecht (longitudinal): part of HBSC (Health Behaviour School Aged children) and the NIGZ (National Institute for Health improvement and Prevention of illness). The analysis found that the perceived image that youth drinks both more and more often, is not correct. Developing policy to prevent alcohol abuse by young people is useful, but not on the basis of the assumption that they drink more and heavier and that the current policy needs to be intensified by stronger enforcing instruments.

Possible explanations suggested for these developments are not always accurate. One is that the number of young people with a Muslim background is increasing in Holland that this has an effect on the alcohol use and abuse of young people. Though there is probably some effect, it's not as clear-cut as it seems. The

number of young people whose parents originate from Morocco and Turkey was already increasing significantly in the nineties as well. In that period all the variables of alcohol (ab)use increased. Two other factors frequently named in the Dutch alcohol discussion are the increased enforcement by the Keuringsdienst van Waren KvW (enforcement agency for the Dutch Alcohol and Hospitality Act) and the influence of the euro. These two factors can only influence the 2002 figures; the euro was introduced on January 1st 2002 and the KvW intensified its enforcement in the same period. This does not account for the decreasing figures starting already in 1999 and 2001.

Is there an explanation? Is the recent development a prelude of the development for say the next 10 years? Contrary to the early nineties, the alcohol abuse of young people is an important issue. There is an awareness among pub

owners and other licensees that it is 'not done' to sell alcohol to people under a certain age. It's safe to say that this awareness isn't as widespread under parents as it is under licensees. Dutch information and communication schemes never succeeded on gaining the attention of parents. Moreover, it seems that parents are getting more and more accustomed to a national and local government that keeps them safe from every possible hazard, whether that's in the form of alcohol, tobacco, nutrition hazards, road safety, etc.

Among young people themselves, there are signs that something of peer pressure to not drink too much alcohol, is developing. Not so long ago, this peer pressure was directed in another direction, i.e. pressing ones friends to drink heavily. The last three years or so, there is a tendency that it's 'uncool' to display excessive behaviour. This goes for violence, drugs as well as alcohol.

UK Home Minister Wants Pubs To Pay For Night Policing

Nightclubs and pubs would have to contribute to the cost of late-night policing under government proposals to tackle misbehaviour blamed on binge drinking. The Home Secretary, David Blunkett, is concerned at the strain on police dealing with influxes of thousands of young people into town centres at weekends, antisocial behaviour late at night and the long-term impact on people's health of binge drinking.

The matter is being raised in the 'Big conversation' – a public consultation initiated by the Prime Minister. Ideas as to how the charge should be implemented vary. A 1% levy on the annual turnover of an industry worth £36 billion is suggested or a surcharge on individual establishments; raising the question of whether it should be linked to numbers on premises, or a reputation for disorder.

Whitehall is divided, the Department for Culture fears a levy on businesses would damage the growing evening economy linked to the relaxed licensing laws coming into force in 2005. The Home office and Department of Health are concerned that this liberalisation will lead to more trouble on the streets.

Cardiff has seen a 75% growth in licensed premises in the heart of the city, with police estimates putting the number of drinkers at weekends at 30-40,000, with no more than 10 police officers on duty.

In London 200,000 people flock into the heart of the West End at weekends. Westminster City Council said it was concerned that the liberalising of licensing laws, will lead to a big rise in late night drinking. Councillor Audrey Lewis said 'To be able to deliver clean streets, appropriate health and safety checks on premises and policing takes money. We would be happy to consider ways that extra resources may be made available, but ultimately polluters should pay.'

The entertainment industry said it would strongly resist the introduction of an extra charge, arguing that nightclubs and pubs make a substantial contribution in terms of tax and business rates already. Mark Hastings, of the British Beer and Pub Association stated. 'We already pay £13 billion in duty and VAT on alcohol. If David Blunkett wants to raise money for policing, he should knock on the door of the Chancellor, not on the door of the local pub'.

X is for Xmas, not Xcess

The Scottish Executive released a hard hitting campaign to tackle Scotland's attitude towards alcohol at Christmas. The poster campaign was backed by NHS, Alcohol Focus Scotland, The Scottish Licensed Trade Association and Highland Spring.

The posters, featuring a drunk, distressed girl inside a huge glass, aim to highlight the dangers of binge drinking over the festive period. 1 in 7 patients admitted to casualty have been injured as a result of drinking. During Christmas and New Year this figure rises

The RAC report on 2003, 'Drink, Drugs & Driving' revealed some shocking statistics on alcohol awareness. Nearly 80% of UK motorists do not know what constitutes 'one unit' of alcohol and could therefore unwittingly be putting themselves or other people's lives at risk. The report calls for "the government to increase public awareness of alcohol units".

CCTV 'fails to stop street fights'

Town centre CCTV schemes do not prevent drunken street violence, according to research carried out by the University of Hospital of Wales, Cardiff.

However security cameras do alert the police to assaults and reduce the numbers treated at casualty departments, says the journal Injury Prevention. Scientists said CCTV had reduced the severity of injuries suffered in street brawls. They concluded: "The benefits of CCTV might lie less in preventing such offences...but more in facilitating a faster police response to arguments or assaults in public spaces, which limits their duration and therefore reduces the incidence and seriousness of injury." Town centre fights were still likely to happen because of their 'impulsive nature', and because people were drunk.

Allied Domecq Reiterates Advertising Control Position

Allied Domecq has reiterated its position on advert legislation for the drinks trade. In a letter to the Financial Times in January, Chief Executive Philip Bowman detailed the company's measures in this area, and underlined that all parties have a role to play in controlling the situation.

In the letter, Bowman says: "There is a growing mood that current codes regulating alcohol advertising are failing in this respect. We regret this and believe that, to regain confidence, the existing codes need much firmer application and back-up.

"At Allied Domecq, we aim to go "beyond compliance" and have developed a code of marketing practice that is being applied worldwide. It goes

beyond existing legislation or voluntary codes and sets a standard if there is neither. In support, we have an advertising review board, with independent experts to monitor proposed marketing and ensure it complies with both the letter and spirit of our code. Also, since March 2003, we have been rolling out "responsible consumption" messages as part of our advertising."

Bowman concludes his letter by saying: "We share concerns about alcohol misuse and abuse and are more than prepared to play our part in helping to promote responsibility in drinking. A successful approach will recognise that while all can contribute, none has all the answers or all the responsibility and that, in the final analysis, individuals choose how much they drink."

ORGANISATIONS INVOLVED IN ALCOHOL AFFAIRS

UNITED KINGDOM

ALCOHOL CONCERN

Waterbridge House, 32-36 Loman Street, London SE1
0EE Tel: (0207) 928 7377 Fax: (0207) 928 4644
website www.alcoholconcern.org.uk

ALCOHOL EDUCATION and RESEARCH COUNCIL

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website: www.hpe.org.uk and www.wrecked.co.uk

THE MEDICAL COUNCIL on ALCOHOLISM

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website: www.portman-group.org.uk

ALCOHOL FOCUS SCOTLAND

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BRITISH BEER and PUB ASSOCIATION

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AMERICAN WINE ALLIANCE FOR RESEARCH AND EDUCATION

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ICAP

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THE CENTURY COUNCIL

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