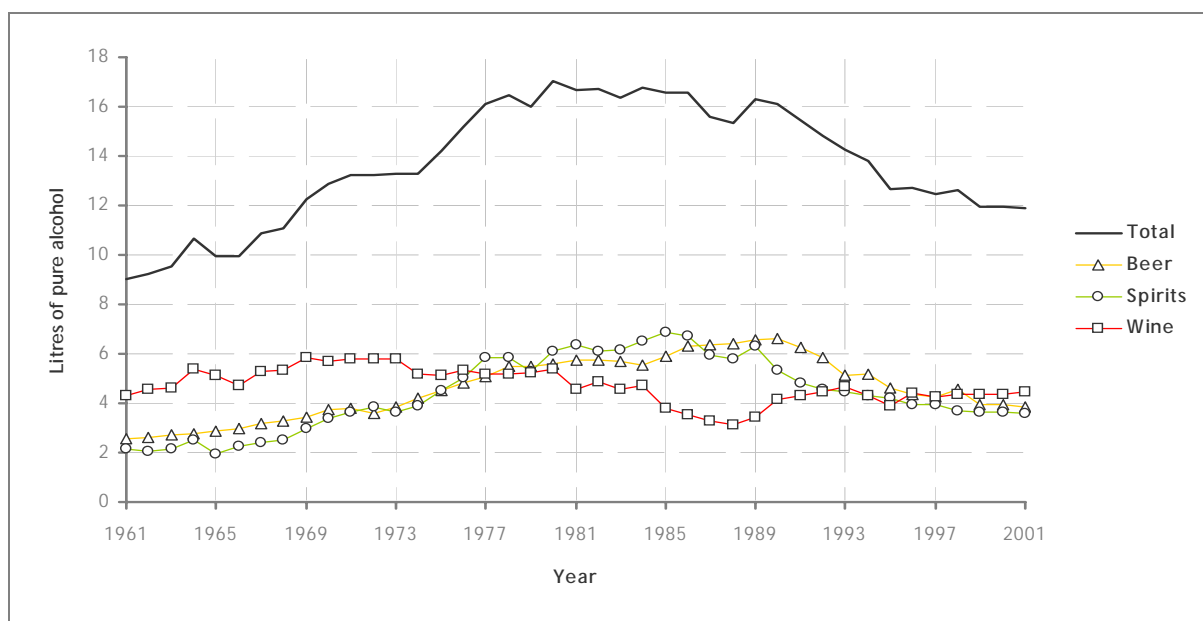


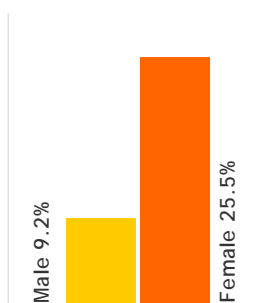
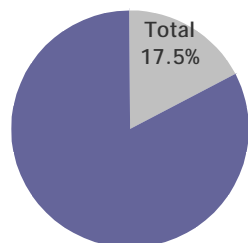
HUNGARY

Recorded adult per capita consumption (age 15+)



Sources: FAO (Food and Agriculture Organization of the United Nations), World Drink Trends 2003

Last year abstainers



Data from the WHO GENACIS study. National survey conducted in 2001 (age group 20 to 64 years). Total sample size $n = 2212$; males $n = 1055$ and females $n = 1157$.¹

According to a 2003 national survey (total sample size $n = 2600$; age group 18 to 54 years old), the rate of last year abstainers was 20% (total), 14.8% (males) and 24.5% (females).²

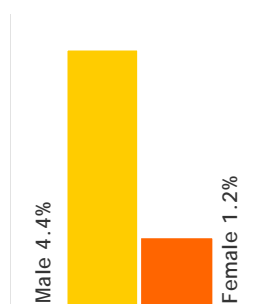
According to a 2000 national survey (total sample size $n = 5503$; age group 18 to 64 years old), 36.7% of women never drank alcohol compared to 10.2% of men.³

According to the 2003 World Health Survey (total sample size $n = 1419$, males $n = 591$ and females $n = 828$; sample population aged 18 years and over), the rate of lifetime abstainers was 6.4% (total), 3.9% (males) and 8% (females).⁴

According to the 1994 Health Behaviour Survey, which provided a nationally representative sample of the population aged 15 to 64 years old, 22% of men and 47.1% of women were abstainers.⁵

Estimates from key alcohol experts show that the proportion of adult males and females who had been abstaining (last year before the survey) was 7% (males) and 21% (females). Data is for after year 1995.⁶

Heavy and hazardous drinkers



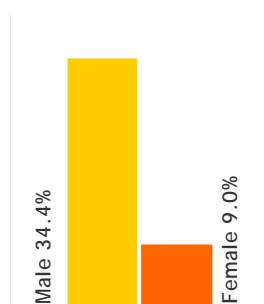
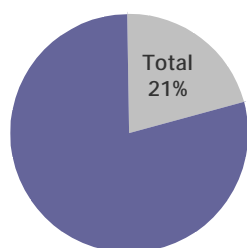
Data from the WHO GENACIS study. National survey conducted in 2001 (age group 20 to 64 years). Total sample size $n = 2212$; males $n = 1055$ and females $n = 1157$. Definition used: average consumption of 40 g or more of pure alcohol a day for males and 20 g or more of pure alcohol a day for females.¹

According to the 2003 World Health Survey (total sample size $n = 1419$, males $n = 591$ and females $n = 828$; sample population aged 18 years and over), the rate of heavy and hazardous drinking among the total population was 12.4% (total), 16.9% (males) and 9.3% (females). Heavy and hazardous drinking was defined as average consumption of 40 g or more of pure alcohol a day for men and 20 g or more of pure alcohol a day for women. According to the 2003 World Health Survey (total sample size $n = 554$; males $n = 340$ and females $n = 214$), the mean value (in grams) of pure alcohol consumed per day among drinkers was 27.0 (total), 31.5 (males) and 19.8 (females).⁴

In a 2000 national survey (total sample size $n = 5503$; age group 18 to 64 years old), 19.4% of men and 5.2% of women were classified as heavy drinkers. Heavy drinking was defined for men as having more than 14 drinks during the previous week of the interview and for women as having more than seven drinks in the last week prior to the interview (one drink equals to 15 g of pure alcohol).³

In a 1997 survey conducted on a sample of hospitalized patients in Hungary ($n = 3140$), the prevalence of problem drinking was approximately 19% among men and 2% among women, although this rose to 32–35% among men aged 35 to 44 years old.⁷

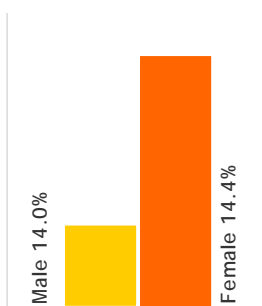
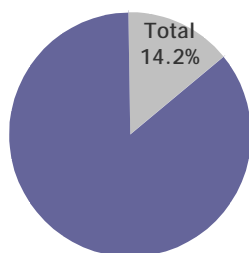
Heavy episodic drinkers



Data from a 2003 national survey (total sample size $n = 2600$; age group 18 to 54 years old). Heavy episodic drinking was defined as consumption in the last month of six or more drinks in a row (1 drink = 1.5 dl wine or 5 dl beer or 0.5 dl spirits).²

According to the 2003 World Health Survey (total sample size $n = 1419$, males $n = 591$ and females $n = 828$; population aged 18 years and over), the rate of heavy episodic drinking among the total population was 9.1% (total), 18.9% (males) and 1.9% (females). Heavy episodic drinking was defined as at least once a week consumption of five or more standard drinks in one sitting.⁴

Youth drinking (last year abstainers)

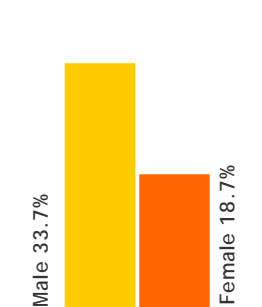
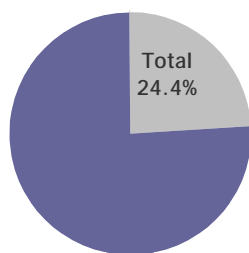


Data from a 2003 secondary school population survey (total sample size $n = 5415$; nationally representative sample of students in grades 9–10).⁸

According to the 2003 World Health Survey (total sample size $n = 157$, males $n = 78$ and females $n = 79$; sample population aged 18 to 24 years), the rate of lifetime abstainers was 6.9% (total), 7.7% (males) and 6.3% (females).⁴

According to the 1999 ESPAD survey (total sample size $n = 6421$, males $n = 3305$ and females $n = 3115$; age group 15 to 16 years), the rate of alcohol consumers was 13% (total), 17% (males) and 9% (females). Alcohol consumer was defined as lifetime use of 40 times or more.⁹

Youth drinking (drink at least weekly)

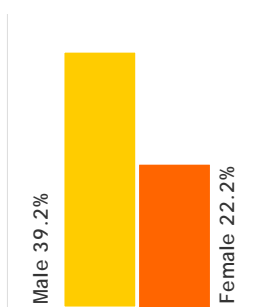
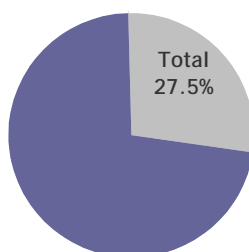


HBSC survey 2001/2002. Data shows proportion of 15-year-olds who report drinking beer, wine or spirits at least weekly. Total sample size $n = 1330$.¹⁰

According to the 1997/1998 HBSC survey (total sample size $n = 818$), 29% of 15-year-old boys and 11% of 15-year-old girls reported drinking beer, wine or spirits at least weekly.¹¹

In a nationally representative survey of secondary school students aged 15 to 18 years old undertaken between 1997 and 2000 (total sample size $n = 6347$; 48.4% boys and 51.6% girls), 14.6% of boys and 5.9% of girls consumed alcohol at least once a week.¹²

Youth drinking (heavy episodic drinkers)



Data from a 2003 secondary school population survey (total sample size $n = 5415$; nationally representative sample of students in grades 9–10). Heavy episodic drinking was defined as consumption of five or more drinks in a row in the last month.⁸

According to the 2003 World Health Survey (total sample size $n = 157$, males $n = 78$ and females $n = 79$; population aged 18–24 years), the rate of heavy episodic drinking among the total population was 12.2% (total), 20.8% (males) and 3.5% (females). Heavy episodic drinking was defined as at least once a week consumption of five or more standard drinks in one sitting.⁴

Note: These are preliminary, early-release, unpublished data from WHO's World Health Survey made available exclusively for this report. Some estimates may change in the final analyses of these data.

Data from the 1999 ESPAD survey (total sample size $n = 6421$, males $n = 3305$ and females $n = 3115$; age group 15 to 16 years old) show that the rate of binge drinking was 12% (total), 18% (males) and 8% (females). Binge drinking was defined as consuming five or more drinks in a row three times or more in the last 30 days.⁹

Youth drinking (drunkenness)

According to the 2001/2002 HBSC survey (total sample size $n = 1330$), the proportion of 15-year-olds who reported ever having been drunk two or more times was 47.3% for boys and 26.3% for girls.¹⁰

In the 1999 ESPAD study of subjects 15 to 16 years old (total sample size $n = 6421$; males $n = 3305$ and females $n = 3115$) the proportion of subjects who reported being drunk three times or more in the last 30 days was 7% (total), 9% (males) and 3% (females).⁹

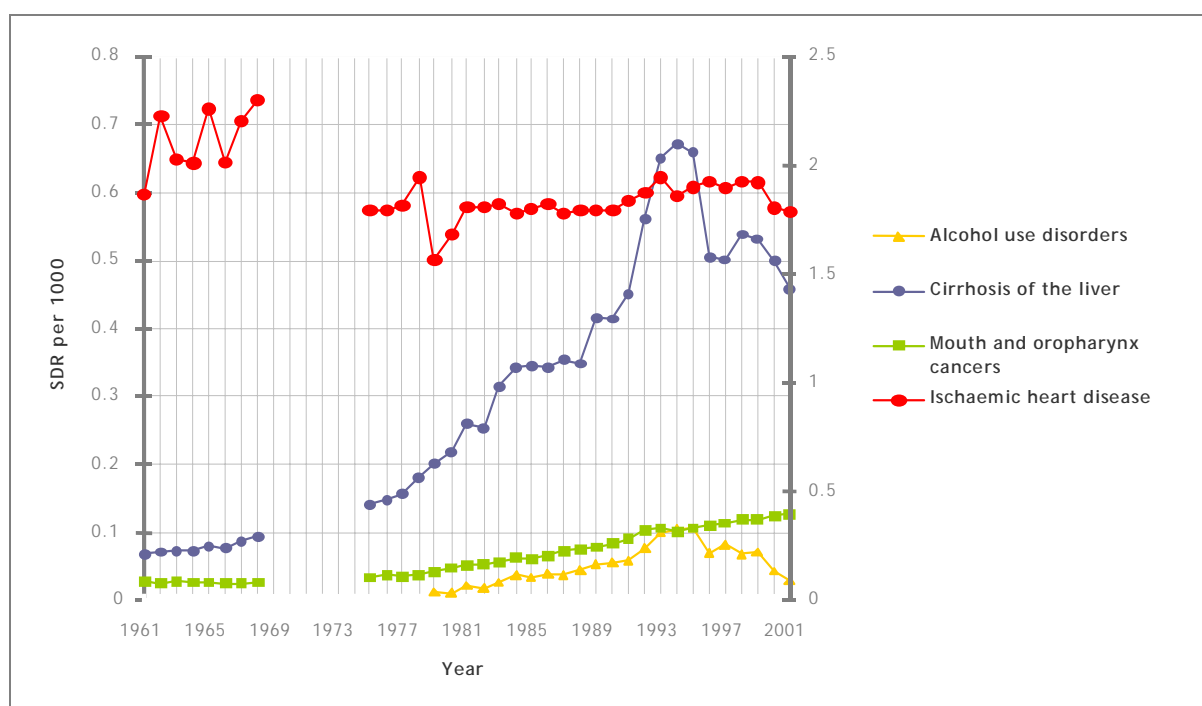
Unrecorded alcohol consumption

The unrecorded alcohol consumption in Hungary is estimated to be 4.0 litres pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).⁶

Mortality rates from selected death causes where alcohol is one of the underlying risk factors

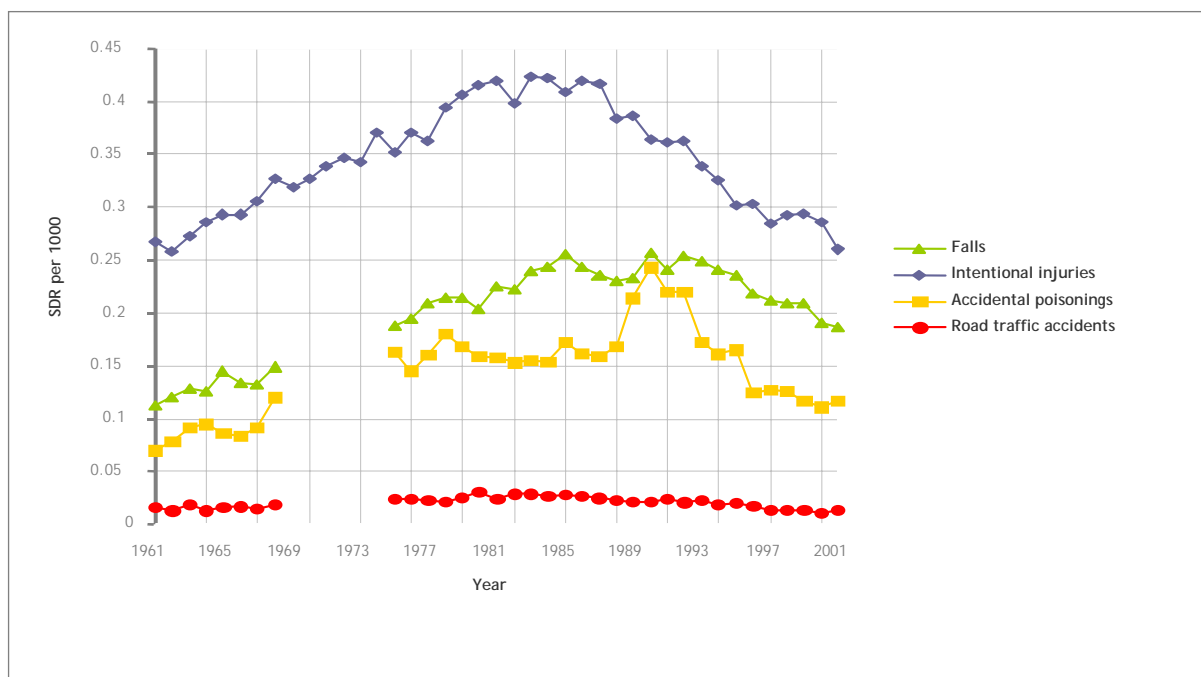
The data represent all the deaths occurring in a country irrespective of whether alcohol was a direct or indirect contributor.

Chronic mortality



Note: Chronic mortality time-series measured on two axes, ischaemic heart disease on right axis and the other causes on the left.

Acute mortality



Source: WHO Mortality Database

Morbidity, health and social problems from alcohol use

Research has shown that the number of pancreatitis-related deaths multiplied almost four times between 1970 and 1994. The doubling of alcohol consumption was practically simultaneous with the increase of morbidity and mortality of pancreatitis.¹³

In Hungary, 8.6% of child abuse cases in 1994 involved alcohol.¹⁴

The SDR per 100 000 population for chronic liver disease and cirrhosis was 56.65 in 2001 and 53.45 in 2002.¹⁵

The number of alcohol-related road traffic accidents per 100 000 population was 20.19 in 2000 and 20.99 in 2001.¹⁵

In a study of Csangos (a group of Romanian citizens with Hungarian ancestry), it was found that drinking among the Csangos is considerably high; more than half of Csango males and more than one quarter of Csango females are heavy drinkers. Acute reactions to a moderate dose of alcohol evoked a series of physical and physiological symptoms including facial flushing, higher pulse rate, tachycardia and euphoria among at least a third of the probands. There was a distinct gender difference in response to alcohol drinking. While a higher percentage of females reported intense skin flush (34%), a greater percentage of males reported symptoms such as sleepiness, euphoria and aggressiveness. Alcohol-related mortality data indicate liver cirrhosis and liver cancer as the leading cause of deaths among Csango males.¹⁶

In a study conducted among Palocs (an ethnic group in Hungary) it was found that 53% of males and less than 1% of females were classified as heavy drinkers (consuming more than 60 ml absolute alcohol per day). About 45% of the Palocs reported to experience acute reactions after drinking a moderate dose of alcohol. The physical and physiological reactions include facial flushing, higher pulse rate, tachycardia and euphoria. A higher percentage of males (70%) reported symptoms such as sleepiness, euphoria and aggressiveness as compared to 36% of females reporting such reactions.¹⁷

Country background information

Total population 2003	10 130 000	Life expectancy at birth (2002)	Male	68.4
Adult (15+)	8 463 000		Female	76.8
% under 15	16	Probability of dying under age 5 per 1000 (2002)	Male	9
Population distribution 2001 (%)			Female	8
Urban	65	Gross National Income per capita 2002	US\$	5280
Rural	35			

Sources: Population and Statistics Division of the United Nations Secretariat, World Bank World Development Indicators database, The World Health Report 2004; Hungarian National Office of Statistics (KSH)

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