

ALCOHOL ALERT

OCTOBER 2019

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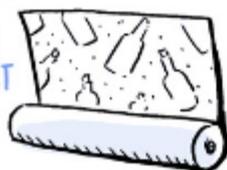
ALCOHOL MARKETING & Protecting The Vulnerable



PROTECTING CHILDREN & YOUNG PEOPLE

PRODUCT DESIGN

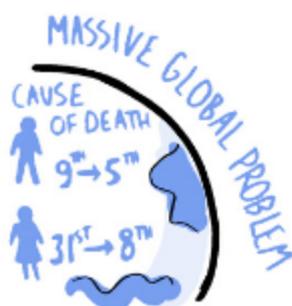
ALCOHOL LIKE WALLPAPER
— SO COMMON
you DON'T SEE IT



YOUNG PEOPLE
DON'T UNDERSTAND
UNITS



BUY THE DRINK
GET THE GIRL



PLACE



CITY HEALTH

MORE SHOPS
MORE CRIME



EXPOSED TO MARKETING 4½ TIMES A DAY

KIDS BUY BRANDS
MARKETED
AT THEM



IAS HOSTS ALCOHOL
MARKETING EVENT ON
PROTECTING THE VULNERABLE

IAS

Institute of
Alcohol Studies

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Drastic decline in alcohol-related deaths in Russia

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Drop due to strict alcohol control measures

A plunge in alcohol consumption has been linked to a dramatic rise in life expectancy in the Russian Federation, a new World Health Organisation (WHO) report reveals. This follows a set of comprehensive alcohol control measures put in place by the state since 2003. The report, *Alcohol policy impact case study: the effects of alcohol control measures on mortality and life expectancy in the Russian Federation*, shows that total per capita consumption has been declining since 2003 and dropped by 43% until 2016 – with a 40% decline in recorded consumption and a 48% decline in unrecorded consumption, referring to alcohol produced and sold outside governmental control.

This trend mirrored a drop in all-cause mortality by 39% in men and 36% in women between 2003 and 2018, with the sharpest decline in causes of death linked to alcohol consumption. This helped average life expectancy in the Russian Federation reach a historic high in 2018, at almost 68 years for men and 78 years for women.

'The dramatic decline in consumption of homemade, smuggled or illegally produced alcohol in the Russian Federation is attributable to the government's adoption of evidence-based alcohol control policies. These results show that measures such as the introduction of monitoring systems, price increases and limited alcohol availability work to save lives and health system costs. I trust that other countries in Europe will adopt similar policies to protect people's health,' said WHO Europe Programme Manager for Alcohol and Illicit Drugs Carina Ferreira-Borges.

In 2011, the Russian Federation supported the adoption of *WHO's European Action Plan to Reduce the Harmful Use of Alcohol 2012–2020*, and has been implementing many of its recommendations since. These include:

- raising excise taxes on alcohol;
- introducing a minimum unit price policy on vodka as far back as 2003, then increasing the minimum unit price over the years, before expanding this policy to other alcoholic beverages;
- introducing a real-time tracking system on the production and sale of alcohol;
- initiating a comprehensive night ban on off-premises sales of alcohol nationally, with even stricter restrictions on alcohol availability in some regions, as well as strict policies on alcohol-free public space and alcohol marketing. ■■

Does the EU Alcohol Health Forum have a future?

New commissioner inherits old dilemma

Industry figures have called on Stella Kyriakides, new EU Commissioner-designate for health, to revive the European Alcohol Health Forum (EAHF), while her predecessor cast doubt on its future viability.

'Relaunching the EAHF is the best way to achieve the cooperation required, and ahead of her hearing in the European Parliament, we call on Commissioner-designate Kyriakides to do so,' Ulrich Adam, *director general at spirits lobby spiritsEUROPE*, told *EURACTIV*. com.

The spirits boss also claimed the forum led to the funding of a number of initiatives that tackled harmful drinking and focused on prevention programs, and that although there had been 'substantial declines' in youth drinking, binge drinking and drink driving across the EU in recent years, but there is much work left to do.

'If we want these trends to continue then we need to make sure there is a truly cross-sectoral collaboration,' Adam said.

'The next Commission can send the right message by re-establishing the Forum and building on recent successes to continue reducing the harmful consumption of alcohol across the EU.'

The EAHF is a Commission-led stakeholder platform meant to coordinate best practices and policies to tackle alcohol-related harm. However, 20 public health NGOs pulled out in June 2015, in protest against the European Commission's refusal to submit a new alcohol strategy, which formally expired in 2012. The forum has been inactive ever since. Industry argues that the forum is related to prevention actions and not policy, whereas NGOs insist that industry should not influence the content of prevention and health messaging.

During his term as health commissioner, Vytenis Andriukaitis tried to bring the two sides together but failed to bridge their differences. *Expressing his frustration at the standoff*, Andriukaitis told *EURACTIV*:

'In the beginning, the NGOs were against and then the industry. We have no chance to act because some parts decided once again not to accept our proposals, which were agreed with NGOs. And today, I think it would be better to stop such a forum and explore new possibilities to organise under different capacities. If actors are playing games and putting obstacles, you have no chance to move forward.' ■■

MUP short-term economic impact on alcohol industry 'modest'

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Abridged from NHS Health Scotland website

In an initial assessment of the effects of Minimum Unit Pricing (MUP), participants reported that a decrease in alcohol sold was offset by increased prices. The overall impact on retailers varied depending on the types of products sold. The effects of MUP on producer revenues and profits was thought to be negative but small, with only a small proportion of producers' total outputs affected.

As part of the wider evaluation portfolio, NHS Health Scotland commissioned Frontier Economics to evaluate the economic impact of MUP on producers and retailers of alcoholic drinks in Scotland in the nine months following its introduction. Eight case studies were conducted with a range of organisations representing different parts of the industry, including a supermarket, convenience and specialist off-trade retailers, an on-trade retailer, spirits producers and two brewers.

The researchers also interviewed retailers on both sides of the Scotland-England border about whether they thought MUP had led to an increase in people from Scotland buying alcohol from stores in England. There was some evidence of this, although retailers noted that cross-border purchasing was happening prior to the introduction of MUP, as many consumers who live near the border in Scotland work in Carlisle or Berwick-upon-Tweed, or conduct weekly grocery shopping in these towns.

Frontier Economics will publish a further report in 2022, exploring the longer-term industry impacts of MUP. Other studies in the MUP evaluation portfolio will also help to understand the economic impact of MUP. These include studies of impacts on small retailers, changes in the distribution of the price of alcoholic drinks sold in Scotland, changes in price and product range, and changes in sales of alcoholic drinks. ■■

Facebook identifies kids 'interested in' booze for advertisers

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Social media giant auto-targets children based on their activity

Facebook has marked hundreds of thousands of children as 'interested in' adverts about gambling and alcohol, a [joint investigation](#) by the *Guardian* and the *Danish Broadcasting Corporation* has found.

On alcohol, the social network's advertising tools reveal 940,000 minors – 150,000 of whom are British – are flagged as being interested in alcoholic beverages.

These 'interests' are automatically generated by Facebook, based on what it has learned about a user by monitoring their activity on the social network. Advertisers can then use this information to specifically target messages to subgroups who have been flagged as interested in the topic.

In a statement, Facebook said: 'We don't allow ads that promote the sale of alcohol or gambling to minors on Facebook and we enforce against this activity when we find it. We also work closely with regulators to provide guidance for marketers to help them reach their audiences effectively and responsibly.'

However, the presence of automated interests also means that alcohol and gambling advertisers who do try to avoid Facebook's rules about advertising to children have an audience already selected for them by the social network. Facebook relies primarily on automated review for flagging adverts that break its policies, but, crucially, it is not guaranteed to find breaches before the adverts start to run. ■■

Halve alcohol guidelines to minimise dementia risk

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Doctors regard lifestyle change as important factor in likelihood of getting dementia

Drinkers should consume no more than the unit equivalent of two glasses of wine if they wish to minimise the risk of dementia, say doctors in a scientific development that finds even the lowest levels of alcohol intake are toxic to the brain if sustained over years.

The guidelines, thought to be the first recommendations that set such a limit to minimise dementia risk, also recommend at least 15–20 minutes of daily exercise, cutting sugar to six teaspoons a day and keeping blood pressure below 140.

'We recommend low alcohol consumption, less than seven units a week, compared with the government guideline for a maximum of 14 units a week,' John Gallacher, professor of cognitive health at Oxford University, who drew up the guidelines, told *The Times*.

Seven units of alcohol a week is equivalent to two large glasses of wine of 250ml each, two to three pints of beer or three large gins.

'The evidence on brain health is that alcohol does not confer benefit and even at low levels can confer harm,' said Gallacher, who also leads Dementias Platform UK, a research project funded by the Medical Research Council.

The emphasis on lifestyle reflects a shift in thinking on Alzheimer's and other forms of dementia. For almost three decades, research has focused on drugs to remove the toxic amyloid and tau proteins that accumulate in the brain in such diseases. Scientists now suspect this approach was flawed. Now, they have found that, although genetics plays a role in dementia risk, so does a person's lifestyle. People with high blood pressure or diabetes, or who exercise little or drink a lot, are more likely to become develop dementia. ■■

Money motivates GPs to initiate alcohol screening

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Study: GPs stopped giving alcohol advice to patients when they stopped being paid to do so

The alcohol screening and advice rates of general practitioners (GPs) to their patients appear to be [directly linked to financial incentives](#), according to a study published in in the scientific journal *Addiction*.

Funded by the National Institute for Health Research, researchers conducted the first large-scale assessment of the impact of a system devised to pay GPs in England to screen patients for higher-risk drinking and provide advice to those needing to reduce their alcohol consumption.

Under the incentive scheme, participating practices were paid £2.38 for each newly registered adult patient they screened for higher-risk drinking. In summary, the research team found that in April 2008, there was a small, gradual increase in screening and the provision of alcohol advice. However, the scheme was withdrawn in April 2015, rates of screening and advice-giving decreased immediately, and have stayed low ever since.

Using an electronic dataset of over 4 million newly registered patients, the study found:

- Before the introduction of the scheme, 92 out of every 1,000 eligible patients were screened for higher-risk drinking each month, and fewer than 15 in every 1,000 screen-positive patients received brief advice.
- Introducing financial incentives had little impact on screening rates but led to an immediate increase in advice provision, with just over 20 more higher-risk drinkers receiving support per month for every 1,000 patients that screened positive.
- Since the scheme was discontinued, the rate of screening has fallen by almost three patients per month, and as of December 2016, out of every 1000 screen positive patients, 31 fewer were receiving brief advice for their drinking compared with March 2015.

Lead author Dr. Amy O'Donnell explains: 'Scaling-up our findings to the English population, we estimate that by the end of 2016 alone, 27,000 fewer patients received brief advice as a result of terminating the alcohol incentive scheme. This is despite the fact that GPs are still legally obliged to identify and support higher-risk drinkers.'

She continued: 'As well as drawing attention to the disappointing rates of alcohol advice giving in England since GP payments were withdrawn, our findings also highlight the real risks of using short-term financial incentives to boost delivery of public health measures in healthcare.'

Alcohol duty cuts linked to 2,000 additional deaths in England

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Research also suggests reintroducing alcohol duty escalator could save lives

Recent reductions in alcohol duty have had a dramatic negative effect on public health, according to a study from the Sheffield Alcohol Research Group, commissioned by IAS. The early scrapping of the alcohol duty escalator, which was intended to ensure taxes on alcohol rose by 2% above inflation each year until 2015, and subsequent real-terms cuts to alcohol duty, mean that beer duty is 19% lower than in 2012, cider and spirits duty 11% lower, and wine duty 2% lower, accounting for inflation. The report, *Modelling the impact of alcohol duty policies since 2012 in England and Scotland*, found that these cuts resulted in:

- 1,969 additional deaths in England and 254 additional deaths in Scotland between 2012 and 2019
- 61,386 additional hospital admissions in England and 4,556 additional hospital admissions in Scotland over the same period
- £341 million in additional costs to the NHS
- Over 100,000 additional alcohol-attributable crimes
- Over 500,000 additional lost days of work, at a cost to the economy of £62 million

Moreover, the researchers found that the largest negative effects were suffered by those living in the most deprived communities, further widening health inequalities.

At the same time, the report estimated that above inflation increases in alcohol duty, starting from the forthcoming Budget could have dramatic benefits.

Reintroducing the duty escalator between 2020 and 2032 would result in 4,700 fewer alcohol-attributable deaths in England and 420 fewer alcohol-attributable deaths in Scotland.

Colin Angus, senior research fellow in the Sheffield Alcohol Research Group, and lead author of the report said: 'Reintroducing the alcohol duty escalator would be an effective way to reduce alcohol consumption and its associated negative effects on public health across the UK in the future.'

Aveek Bhattacharya, senior policy analyst at IAS, said: 'Over the past six years, government policy has deliberately made alcohol cheaper by cutting duty. Cheaper alcohol inevitably means higher levels of drinking, higher levels of crime and social disorder, higher costs to the economy and public purse, and ultimately, more deaths.'

'Recent duty cuts are also costing HM Treasury £1.2 billion that could be put to supporting stretched public services. This new report quantifies the human cost of cheaper drink in England: almost 2,000 needless deaths, 61,000 unnecessary hospitalisations and over 100,000 extra crimes.'

'Fortunately, it also shows us a better way forward: with real-terms increases in alcohol duty, starting from the forthcoming Budget, the government can reduce the burden on public services, raise millions of pounds and, most importantly, save thousands of lives.' ■■

Alcohol industry messaging puts pregnant women at risk

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Study finds evidence of industry misleading women about risks of drinking during pregnancy

Alcohol industry-funded organisations are much less likely than public health websites to provide information on foetal alcohol spectrum disorder and to advise that no amount of alcohol is safe during pregnancy. This is the message of research conducted into the messaging of websites presenting information about alcohol consumption during pregnancy.

Published in the *Journal of Studies on Alcohol and Drugs*, researchers from the London School of Hygiene and Tropical Medicine and Imperial College London investigated the way in which [alcohol-funded bodies present information about alcohol consumption during pregnancy](#).

They assessed the websites of 23 alcohol industry-funded firms, including Drinkaware in the UK and DrinkWise in Australia, and 19 public health organisations, including NHS Choices and the governmental Office of Disease Prevention and Health Promotion, and found that the alcohol industry-funded companies were less likely than the public health organisations to inform about foetal alcohol syndrome, a health condition that a baby can develop if a woman drinks alcohol during pregnancy.

The alcohol-industry funded firms were also less likely to advise pregnant women not to drink any alcohol, less likely to employ direct instruction, and more likely to 'emphasise uncertainties' about alcohol consumption during pregnancy, and to employ alternate causation arguments – similar to those used by the tobacco industry – to argue for causes of alcohol harms in pregnancy other than alcohol.

An example of this, pointed out by the *Guardian's* Health Policy Editor Denis Campbell, involves [rum producer Bacardi](#), who acknowledge on their website that drinking in pregnancy is 'risky', while claiming that what is constitutes 'too much' drinking 'may vary by individual', even though this contradicts existing evidence.

Professor Mark Petticrew of the London School of Hygiene and Tropical Medicine, the lead author, told the *Guardian*: 'Across alcohol industry-funded organisations there appears to be a consistent strategy to the delivery of information on alcohol consumption and pregnancy.'

'One possible reason is that women are a crucial part of the alcohol market. Pregnancy, therefore, may represent a significant commercial threat to the alcohol industry.'

'This study provides further evidence that these organisations pose a potential risk to public health, specifically to the health of pregnant women and the baby, and should have no role in disseminating health information.'

Katherine Severi, chief executive of the Institute of Alcohol Studies, said: 'It's worrying to think pregnant women might be putting themselves at greater risk of health problems due to an information vacuum. Alcohol companies are not medical experts, they are experts in selling alcohol.'

She called for labels warning pregnant women not to drink to become compulsory on all alcoholic products and ministers to fund public awareness campaigns about the risks involved.

The paper concludes: 'The alcohol industry involves itself in providing health information so it can portray itself as "part of the solution" and, therefore, play a greater role in the regulatory landscape. Such initiatives have repeatedly been shown to be ineffective and potentially harmful. Our findings suggest that alcohol industry corporate social responsibility bodies may use strategic ambiguity and other informational tactics to "nudge" women toward continued drinking in pregnancy to protect the female alcohol market.'

'This study provides further evidence that alcohol industry corporate social responsibility organisations pose a potential risk to public health, specifically to the health of pregnant women and unborn children, and should have no role in disseminating health information. The public should now be made aware of the risks in using these sources.'

Wales sets March 2020 date for 50p MUP

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Ireland also seeks Cabinet approval on MUP

Minister for Health and Social Services Vaughan Gething has announced the introduction of a minimum unit price (MUP) of 50 pence per unit for Wales on 2 March 2020, subject to approval from the National Assembly.

The legislation will form part of the government's new *Substance Misuse Delivery Plan 2019-22*, which contains a number of actions to tackle alcohol-related harm, including ensuring appropriate and responsive alcohol misuse services are in place before an MUP is implemented.

In a statement to the Assembly, [Gething said of the new delivery plan](#) that it 'contains a number of actions to tackle alcohol-related harm, including ensuring appropriate and responsive alcohol misuse services are in place before an MUP is implemented.'

The Assembly Member for Cardiff South and Penarth went on to explain that the government has 'worked closely with retailers, the alcohol industry, public health and substance misuse stakeholders to develop guidance and additional supporting materials about minimum pricing for alcohol', and that he intends to 'introduce communications campaigns for retailers and the general public in the run-up to implementation, which will continue to promote the public health aims of the legislation.'

'The intended effect of this legislation is to tackle alcohol-related harm, including alcohol-attributable hospital admissions and alcohol-related deaths in Wales, by reducing alcohol consumption in hazardous and harmful drinkers,' he added.

Gething's proposal will be debated by the National Assembly on 12 November 2019, and, if introduced, an MUP of 50p will be introduced from 2 March 2020.

Ireland to follow suit?

The announcement comes as Ireland's Minister for Health Simon Harris announced the Cabinet's approval on a minimum unit price (MUP) of alcohol by the end of the year.

As a flagship measure, MUP was set to be brought in Ireland at the same time as Northern Ireland. However, in the absence of an Assembly at Stormont, Harris decided to press ahead and propose MUP to Cabinet before the end of the year.

According to RTÉ, Harris was responding to calls from Alcohol Action Ireland (AAI) to fully implement the *Public Health Alcohol Bill*, which became law last year.

The first tranche of measures of the act will come into effect from 12 November:

- Alcohol advertising on public transport, at stations and stops, will be prohibited.
- Ads promoting alcohol will not be shown at under 18 movies in cinemas.
- The promotion of alcohol on children's clothing or anywhere within 200 metres of schools, creches or playgrounds will also be against the law.

AAI is calling for the act to be implemented in full, with CEO Dr Sheila Gilheany insisting that the country 'can't wait for more years' for all the legislative measures, especially MUP, to come into force. However, the drinks industry has warned that the loss to the Exchequer will be in the order of €180m if it is not introduced with Northern Ireland. Director of Drinks Ireland, Patricia Callan, has suggested waiting for the Stormont Assembly to be set up again before this measure is introduced.



COVER STORY

IAS hosts alcohol marketing event on protecting the vulnerable

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Featuring presentations from David Jernigan and Nathan Critchlow, and new findings from Amanda Atkinson

The event *Alcohol marketing: Protecting the vulnerable* was held at Friends House in London on Wednesday 16 October 2019, featuring presentations on a range of topics, including protecting youth, regulating digital alcohol marketing, challenging stereotypes, learning about the successes and failures of campaigners in other sectors of health policy, and ending with a policy workshop on regulating marketing to better protect vulnerable groups.

The conference was led by lectures from Professor David Jernigan PhD, who focused on the ways in which alcohol marketing affects young people across the globe, and Dr Nathan Critchlow, who documented the increasingly pervasive influence of marketing in the digital sphere.

The conference also saw the first official presentation of findings from a brand new study led by Dr Amanda Atkinson in which she detailed the effects of gendered alcohol marketing on women in modern societies.

The event was rounded off with a panel discussing what steps alcohol control campaigners might take to protect those most vulnerable to alcohol marketing.

The full list of speakers (and their topics) were:

Session 1

Professor David Jernigan PhD
Alcohol Marketing and Public Health – what do we know and what can we do?

Dr Nathan Critchlow
Regulating alcohol marketing in the digital 'Wild West'

Chair: Katherine Severi

Session 2: Alcohol marketing, disrupting social norms

Vivienne MacLaren
Taking a Stand – Creating a 'clean' sport

Dr Amanda Atkinson
Alcohol marketing gender roles and stereotypes – Exploring the targeting and representation of women

Michaela Jones
Alcohol marketing as a barrier to recovery

Chair: Dr Eric Carlin

Session 3: International examples of good practice – alcohol marketing regulations abroad and how marketing is dealt with for other unhealthy commodities

Dr Sheila Gilheany
What does Alcohol Action Ireland do?

Professor Gerard Hastings OBE
Lessons for alcohol from tobacco control

Patti Rundall OBE
Protecting the vulnerable through marketing restrictions

Chair: Professor Sir Ian Gilmore

Session 4: Discussion and next steps: How can we protect the vulnerable through marketing restrictions

Featuring Dan Parker (Living Loud), Gemma Crompton (Alcohol Focus Scotland), Colin Shevills (Balance North East), and Richard Piper (Alcohol Change UK)

Chair: David Jernigan

Click on the microphone icon to hear the presentations in our [Alcohol Alert podcast](#), and below for an illustrated summary of the day's events. ■■



Review calls time on use of gender stereotypes in alcohol marketing

Report shines light on how alcohol brands use women's bodies

A new report published by the Public Health Institute at Liverpool John Moores University rounds up evidence of how alcohol companies target women in their marketing practices.

A rapid narrative review of literature on gendered alcohol marketing and its effects was presented at the Institute of Alcohol Studies (IAS) conference, *Alcohol marketing: Protecting the vulnerable*, by lead author Dr Amanda Marie Atkinson. Dr Atkinson and her team found that marketing strategies targeted women through the creation of new products, the use of lifestyle messages underpinned by gender stereotypes (eg slimness / weight, and the colour pink), offers of stereotypical feminine accessories such as makeup, and messages of empowerment. Such framing has influenced what is deemed 'socially acceptable' to drink for women, whilst normalising the sexualisation and objectification of the female form.

Report co-author Professor Harry Summall said of the findings: 'Alcohol brands have moved away from the use of gender stereotypes and sexist content but there is evidence that messages of empowerment and marketing with feminist connotations are being used to target women. Whilst this shift is positive in terms of gender equity, such messages are still being used to promote a potentially harmful substance to women, and more research is needed to assess the impact of such marketing on women's drinking.'

Katherine Severi, chief executive of IAS – who funded the study – added: 'This report highlights the sophisticated but sometimes sinister marketing practices of alcohol producers to target female drinkers. With rates of alcohol harm among women increasing in recent years, particularly in younger age groups, we should be concerned about companies using such aggressive tactics to boost sales.'

'It is extremely worrying to learn about sexualised imagery of women used in nightlife marketing that might be contributing to harmful norms about sexual harassment and violence against women and girls. An urgent review of this issue is needed that can explore the gaps in our knowledge and guide recommendations for policy and practice.' ■■



Cancer risk 30 times more likely for those who drink AND smoke

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New SHAAP guide highlights cancer risks, provides advice for how health professionals can help

New guidance from Scottish Health Action on Alcohol Problems (SHAAP) highlights links between alcohol consumption and cancer. It also provides information and advice for health professionals so that they can support patients to reduce risks, as well as to recognise symptoms of cancer.

According to the 2016 UK chief medical officers' low risk drinking guidelines, in relation to cancer risk there is no safe level of alcohol consumption. The new guide, *Alcohol and Cancer Risks: A Guide for Health Professionals*, has been welcomed by Scotland Chief Medical Officer Dr Catherine Calderwood who said: 'This is a fantastic resource for all health colleagues, and I encourage everyone to use it in conversations with their patients. As the Scottish Government's *Alcohol Framework* recognises, the link between alcohol and cancer is not sufficiently well known.'

'Initiatives to raise awareness about cancer and alcohol are really important for our population health, and I'm delighted to support this work from SHAAP,' she added.

Chair of the Scottish Cancer Prevention Network Professor Annie Anderson has also strongly welcomed the new guidance:

'We know that helping people to reduce alcohol intake means helping people to reduce their cancer risk. As cancer rates increase, the need for alcohol intake to decrease becomes increasingly important. The new SHAAP guidance gives clear messages about positive routes to decrease cancer risks from alcohol consumption for everyone.'

SHAAP's new report draws attention to emerging research that draws links between alcohol and tobacco use; people who use both alcohol and tobacco have a 30 times increased risk of developing cancers of the lip, oral cavity, pharynx, larynx, and oesophagus than people who use either alcohol or tobacco alone.

SHAAP also presents evidence that drinking alcohol can interfere with recovery from cancer, including interfering with the way some chemotherapy drugs work. Some sources suggest that breast cancer recurrence is more likely in people who drink more than five units of alcohol per week.

The new guide points out that more than a quarter of alcohol-attributable deaths are due to cancer. Drinking alcohol increases your risk of developing cancer of the lip, oral cavity and pharynx; cancer of the larynx; cancer of the oesophagus; cancer of the breast; cancer of the colon and rectum; cancer of the liver. There is also a relationship between alcohol and cancer of the stomach.

Additionally, there is some evidence that alcohol is associated with several other cancers in addition to these, such as pancreatic cancer, lung cancer and melanoma. The risks associated with cancer start from any level of regular drinking and rise with the amounts of alcohol being drunk. Information is provided for health staff to support their advice-giving on how to manage alcohol and reduce alcohol consumption.

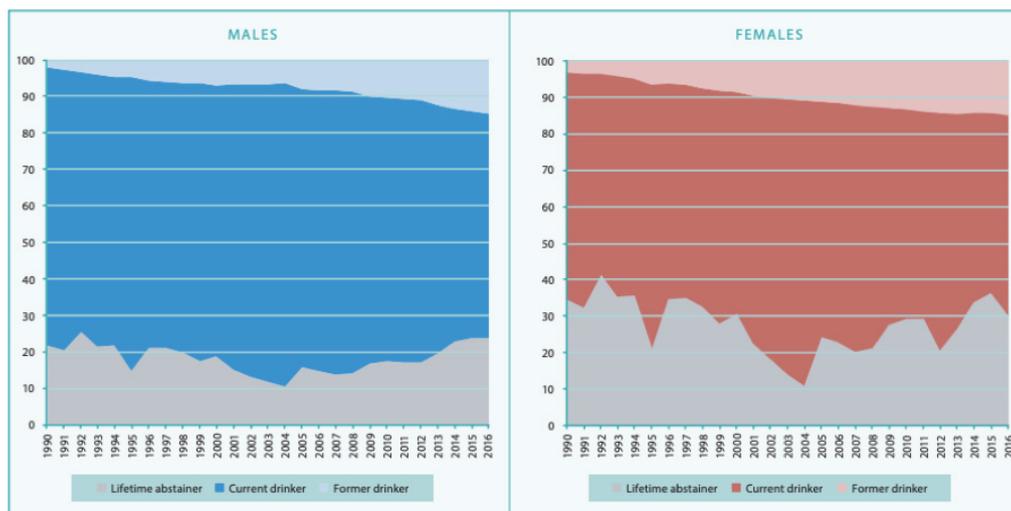
SHAAP Director Dr Eric Carlin said: 'Our clinicians tell us that patients welcome tactful, empathetic inquiry about aspects of their lifestyle which may have an impact on their health. The provision of up to date, evidence-based advice about cancer risks associated with alcohol enables people to make informed choices to review their behaviours. Health professionals are ideally placed to offer support to reduce alcohol consumption, if this is what patients wish to do.' ■■■

ALCOHOL SNAPSHOT

Restrictive alcohol policies have increased the number of non-drinkers in Russia

Government alcohol control measures in Russia have dramatically reduced harmful drinking over the past 15 years, leading to a steep increase in life expectancy, according to a case study published earlier this month by the World Health Organization. The report outlines a range of policies introduced since 2003, including higher alcohol taxes, increases in minimum pricing for vodka and spirits, and restrictions in the availability of alcohol. As a result, alcohol-related accidents and diseases have fallen significantly, as has overall mortality.

Fig. 3. Trends in the proportions of lifetime abstainers, current drinkers and former drinkers in the Russian Federation*



* Expressed as a percentage of all adults aged 15 and over.
Source: Global status report on alcohol and health, 2018;²⁴ Manthey et al. (2019).²⁵

The study contains a wealth of charts and data documenting the incredible changes in Russian health and drinking habits over recent years. Among the most striking is the chart below, which shows the proportion of Russian adults that are current drinkers, lifetime abstainers or former drinkers.

It shows that despite Russia's warranted reputation as a heavy drinking country, there have always been a significant proportion of the population that claims never to have drunk alcohol. However, in line with the government's restrictive policies, the proportion of lifetime abstainers has risen from around one in ten men and women in 2004 to around a quarter of men and almost a third of women.

Also interesting is the growing share of Russians that have given up alcohol – the proportion of former drinkers was negligible in 1990, but now over 10% of people are former drinkers. Again, the prevalence of this group accelerated as government policies clamped down on alcohol.

What this chart demonstrates is that drinking cultures can change, and that they can be shaped by government policies. In a heavy drinking country like Russia, a sizeable number of people have either never started drinking or have given it up, apparently encouraged by government action.

Read the full report [here](#). ■■■



An Institute of Alcohol Studies publication

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