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Netherlands

The municipal authorities in Amsterdam have prohibited the consumption of alcohol beverages in outdoor public places in order to reduce anti-social behaviour in the city. Members of the public breaching the regulation face a EUR90 (US\$122) fine. The ban extends through the Dam Square, the Red Light District, Jordaan, and Waterlooplein areas. It will be reviewed in March 2014.

Nigeria

Nigerian police enforcing Islamic law have destroyed around 240,000 bottles of beer in a crackdown against "immoral" behaviour. The beer was bulldozed in a public ceremony in Kano, the largest city in Nigeria's mostly Muslim north outside the headquarters of the Hisbah, the 9000-member moral police force tasked with enforcing sharia law. The beer was confiscated from trucks that entered Kano after a state-government directive to restrict behaviour deemed immoral. More than 8000 litres of a local alcoholic brew called "burukutu" and 320,000 cigarettes were also destroyed.

Alcohol has typically been available in bars and hotels to Kano's Christian minority, but Kano's Hisbah chief said that Hisbah will soon embark on an operation to end the sale and consumption of all intoxicants.

Belarus

At the end of October, Belarus introduced a new law under which a drunk driver's vehicle can be confiscated and sold if he or she is detained at least twice during one year. The driver can have their license suspended for three years, face a fine of almost 1000 euros, be ordered to perform up to 1.5 years of community service and face monthly earnings retention of 20%. Offenders involved in accidents that cause human death face up to 10 years in prison. These rules also apply to foreign nationals.

Since the law's implementation a court in Belarus has confiscated the car of a 28-year-old man and ordered him to undertake 1.5 years of community service. It was his second drunk driving offense in two months. The car is to be sold.

Russia

A Russian lawmaker from Russia's Liberal Democratic Party introduced a bill to tackle repeated drunk driving. Under the proposals, repeat offenders could be punished by the confiscation and sale of an offender's vehicle (if the vehicle is owned by the offender) and license suspension for three years.

UK

Grocer Morrisons has joined forces with alcohol-free wine brand Eisberg and the British Liver Trust for a post-Christmas health push that includes a non-invasive liver test and promotion of alcohol-free days.

An electron paramagnetic resonance study of a notable Australian rum

Gordon J. Troup, School of Physics, Monash University, Clayton, Victoria 8000, Australia .

Whisky and brandy have been investigated by Electron Paramagnetic Resonance (EPR) with regard to their possible antioxidant properties, and have been found to have some, suggested to be mainly due to Cu and Fe from the stills used in their preparation. Vodka and gin are known to have neither of the metals, nor phenols. So what about Rums? These are made by fermenting sugars, distillation and aging. Depending on the rum, spices and colourants may be added at any time during the manufacture. So it was thought worthwhile to examine a notable Australian rum, dating from the 19th century.

Material and method

A sample of the rum was placed in a standard quartz EPR tube, and placed in the cavity of a Bruker EPR spectrometer operating in the $\sim 3\text{cm}$ wavelength microwave region. The sample was examined first

at 77K to avoid microwave losses, then at room temperature using signal averaging to overcome the effect of the liquid polar losses.

Results

The EPR spectrum of the rum is shown in the figure. The broad line is from Cu^{2+} , and the smaller, sharper line is due to free radicals. Some of these may be from caramelised sugar, often used as a colourant. This radical is extremely stable, occurs in coffee and drinks made with roasted grains (stouts for example), and has little to do with antioxidant activity.

Conclusions

For this rum, there will be antioxidant activity due to Cu at least. For others we cannot say, but it is possible from Cu and/or Fe if used in the stills. Anyway, enjoy your Christmas rum in moderation!

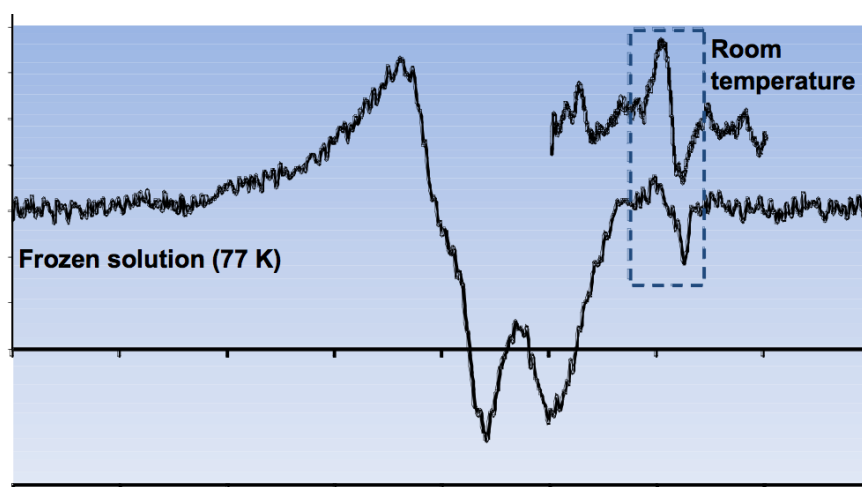
Liquid and frozen solution CW-EPR spectra of Bundaberg rum. Bottle freshly opened. 27 Nov 2013.

The region corresponding to the stable radical is highlighted. The effective g factor at the centre of the room temp radical line is 2.004 (this includes a correction factor of -0.001 to for field calibration).

The field axis of the room temperature spectrum has been shifted to account for the different operating frequency. The field axis corresponds to an

effective frequency of 9.42 GHz.

Experimental conditions: (room temperature spectrum): microwave frequency, 9.866; microwave power, 20 mW; modulation amplitude, 4 G; modulation frequency, 100 kHz; receiver time constant, 328 ms; receiver gain, 85 dB; sweep rate, 1 G s⁻¹; averages, 500. (77K spectrum): microwave frequency, 9.422; microwave power, 20 mW; modulation amplitude, 4 G; modulation frequency, 100 kHz; receiver time constant, 164 ms; receiver gain, 60 dB; sweep rate, 5 G s⁻¹; averages, 12, hamming filter applied.



How alcohol consumption may interact with genetic factors that relate to health and disease

Zakhari S. Alcohol metabolism and epigenetics changes. *Alcohol Research: Current Reviews* 2013;35:9-16.

Author's Abstract

Metabolites, including those generated during ethanol metabolism, can impact disease states by binding to transcription factors and/or modifying chromatin structure, thereby altering gene expression patterns. For example, the activities of enzymes involved in epigenetic modifications such as DNA and histone methylation and histone acetylation, are influenced by the levels of metabolites such as nicotinamide adenine dinucleotide (NAD), adenosine triphosphate (ATP), and S-adenosylmethionine (SAM).

Chronic alcohol consumption leads to significant reductions in SAM levels, thereby contributing to DNA hypomethylation. Similarly, ethanol metabolism alters the ratio of NAD⁺ to reduced NAD (NADH) and promotes the formation of reactive oxygen species and acetate, all of which impact epigenetic regulatory mechanisms.

In addition to altered carbohydrate metabolism, induction of cell death, and changes in mitochondrial permeability transition, these metabolism-related changes can lead to modulation of epigenetic regulation of gene expression. Understanding the nature of these epigenetic changes will help researchers design novel medications to treat or at least ameliorate alcohol-induced organ damage.

Forum Comments

Background: Despite a huge amount of research over the past few decades, our knowledge about the genes that underlie most chronic diseases remains incomplete. With few exceptions (such as certain BrCa mutations and breast and ovarian cancer), our current data on genes are of limited value in predicting the development throughout life of cancer, hypertension and other cardiovascular diseases, and most other chronic diseases.

Even for alcohol-related diseases, it is not possible at present to determine how an individual person will respond over a lifetime to varying amounts of alcohol intake: not all heavy drinkers develop cirrhosis or upper aero-digestive cancers; not all moderate drinkers lower their risk of cardiovascular disease. While the underlying genetic pattern of a person undoubtedly plays a role in his/her health outcomes, environmental factors, including alcohol consumption, may modify the effects of genetically determined functions. It is no longer adequate to compare genes vs. environment as causes of disease,

even if we know the full genotype of an individual. It is increasingly being shown that it is the combination of genes, environment, and their interaction that is important. Epigenetics is one aspect of the study of such interactions.

Epigenetics has been defined by The Shorter Oxford English Dictionary as "The branch of biology that deals with the effect of external influences on development." Wikipedia expands the definition: "The study of heritable changes in gene activity which are not caused by changes in the DNA sequence. Unlike simple genetics based on changes to the DNA sequence (the genotype), the changes in gene expression or cellular phenotype of epigenetics have other causes. The term also refers to the changes themselves: functionally relevant changes to the genome that do not involve a change in the nucleotide sequence."

The present paper by Zakhari provides key insights into mechanistic effects of alcohol that could be of importance in understanding alcohol-related diseases, describing how alcohol may lead to either the expression of genetically determined functions or the suppression of such functions. Such information could potentially lead to interventions that might decrease the risk of certain diseases related to heavy alcohol consumption.

The Forum notes that Dr Zakhari, who has been for many years a leading scientist at the National Institute on Alcohol Abuse and Alcoholism (NIAAA), is now a senior executive at an organization supported by the beverage industry. However, this excellent paper reflects his work at NIAAA and deals specifically with mechanisms by which excessive alcohol may increase the risk of a number of alcohol-related diseases. The nature of this paper, in the opinion of the Forum, makes it unlikely that it could be biased in any ways that would favour the beverage industry.

Comments on the present paper: Overall, Forum reviewers were favorably impressed by this paper, which they thought provides important new data on potential mechanisms by which specific genetic factors may be modified (either enhanced or suppressed) by alcohol consumption. The paper focuses particularly on mechanisms that may relate to the adverse health consequences of heavy alcohol

consumption. (A similar approach might be useful in evaluating the beneficial health aspects associated with moderate drinking.)

An interesting recent paper on methodology (Maldonado G. Toward a clearer understanding of causal concepts in epidemiology. *Annals of Epidemiology* 2013;23:743e749) emphasizes the difficulty one has in determining causality of diseases because of individual variability in susceptibility. For example, if all subjects in a study are genetically protected from getting cancer, the effect of any amount of alcohol would show no relation with this disease. On the other hand, if the population were enriched with genetically susceptible subjects, alcohol might show a large influence on the occurrence of cancer.

Unfortunately we are, at present, largely unable to account for individual susceptibility to disease in epidemiologic studies of the population. As has been emphasized by Forum member Van Velden, the more we learn about genetic factors underlying any health outcome, the more likely it will be that our epidemiologic studies may contribute to determining causality of diseases. The approach described by Zakhari in the present paper may also help us interpret studies of alcohol and health.

Stated reviewer Van Velden: **“This is an important paper that describes the molecular basis of alcohol metabolism, and adds to the understanding of the nature of the epigenetic changes induced by ethanol metabolism. This will help researchers to design model medications to treat or at least ameliorate alcohol-related organ damage.”** He added: **“However, it is at this stage premature to use this information in clinical practice. Nutrigenetics will in the future play an increasingly important role in the management of diseases resulting from environmental influence such as diet.”** Stated member Skovenborg: **“We must be cautious about these findings: fine theories have often proved to be of little practical consequence in real-life situations and when tested in prospective randomized trials.”**

Reviewer Ursini wrote: **“This review article by Zakhari is well written and organized. (For sure I’ll use it for teaching.) However, it does not provide a straightforward insight into the health effects of ethanol that can be used to support a statement in favor or against alcohol consumption. My point is**

that describing pathways and mechanisms does not necessarily mean that these pathways are activated in vivo in the same direction as those observed in experimental conditions. Nevertheless, knowing that these pathways exist will positively drive the attention of scientists to innovative approaches in both basic science and epidemiology. There are feedback mechanisms, adaptive mechanisms, rebounds, etc., that can produce in vivo effects just opposite to those observed. In this respect, the dose of alcohol is crucial.”

Ursini continued: **“In conclusion, these kind of basic studies are fully sound in medical terms when in agreement with well-conducted epidemiological analyses. The consensus between the two fully different approaches is the only way to generate sound conclusions.”**

Comments on this paper were provided by the following members of the International Scientific Forum on Alcohol Research:

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An additional critique from Benett Issi, of the Department of Cardiovascular Science, Leuven University, Belgium is available from bu.edu/alcohol-forum/www-bu-educalcohol-forumcritique-130/

A gene mutation for excessive alcohol drinking found

Researchers have discovered a gene that regulates alcohol consumption and when faulty can cause excessive drinking. They also identified the mechanism underlying this phenomenon.

Their study identified whilst normal mice show no interest in alcohol and drink little or no alcohol when offered a free choice between a bottle of water and a bottle of diluted alcohol, mice with a genetic mutation to the gene *Gabrb1* overwhelmingly preferred drinking alcohol over water, choosing to consume almost 85% of their daily fluid as drinks containing alcohol - about the strength of wine.

The consortium of researchers from five UK universities – Newcastle University, Imperial College London, Sussex University, University College London and University of Dundee – and the MRC Mammalian Genetics Unit at Harwell published their findings in *Nature Communications*.

Dr Quentin Anstee, Consultant Hepatologist at Newcastle University and joint lead author said: "It's amazing to think that a small change in the code for just one gene can have such profound effects on complex behaviours like alcohol consumption.

"We are continuing our work to establish whether the gene has a similar influence in humans, though we know that in people alcoholism is much more complicated as environmental factors come into play. But there is the real potential for this to guide development of better treatments for alcoholism in the future."

A team led by Professor Howard Thomas from Imperial College London introduced subtle mutations into the genetic code at random throughout the genome and tested mice for alcohol preference. This led the researchers to identify the gene *Gabrb1* which changes alcohol preference so strongly that mice carrying either of two single base-pair point mutations in this gene preferred drinking alcohol (10% ethanol v/v), over water. The group showed that mice carrying this mutation were willing to work to obtain the alcohol-containing drink by pushing a lever and, unlike normal mice, continued to do so even over long periods. They would voluntarily consume sufficient alcohol in an hour to become intoxicated and even have difficulty in coordinating their movements.

The cause of the excessive drinking was tracked down to single base-pair point mutations in the gene *Gabrb1*, which codes for the beta 1 subunit, an important component of the GABAA receptor in the brain. This receptor responds to the brain's most important inhibitory chemical messenger (GABA) to regulate brain activity. The researchers found that the gene mutation caused the receptor to activate spontaneously even when the usual GABA trigger was not present.

These changes were particularly strong in the region of the brain that controls pleasurable emotions and reward, the nucleus accumbens, as Dr Anstee explains: "The mutation of the beta1 containing receptor is altering its structure and creating spontaneous electrical activity in the brain in this pleasure zone, the nucleus accumbens. As the electrical signal from these receptors increases, so does the desire to drink to such an extent that mice will actually work to get the alcohol, for much longer than we would have expected."

Professor Howard Thomas said: "We know from previous human studies that the GABA system is involved in controlling alcohol intake. Our studies in mice show that a particular subunit of GABAA receptor has a significant effect and most importantly the existence of these mice has allowed our collaborative group to investigate the mechanism involved. This is important when we come to try to modify this process first in mice and then in man."

Initially funded by the MRC, the 10-year project aimed to find genes affecting alcohol consumption. Professor Hugh Perry, Chair of the MRC's Neurosciences and Mental Health Board, said: "There's still a great deal we don't understand about how and why consumption progresses into addiction, but the results of this long-running project suggest that, in some individuals, there may be a genetic component. If further research confirms that a similar mechanism is present in humans, it could help us to identify those most at risk of developing an addiction and ensure they receive the most effective treatment."

Source: Mutations in the *Gabrb1* gene promote alcohol consumption through increased tonic inhibition. Quentin M. Anstee, Susanne Knapp, Edward P. Maguire, Alastair M. Hosie, Philip Thomas, Martin Mortensen et al. *Nature Communications* 4, Article no.: 2816. Published 26 Nov 2013.

Association of alcohol consumption with skin cancer; a report from the Women's Health Initiative

Kubo JT, Henderson MT, Desai M, Wactawski-Wende J, Stefanick ML, Tang JY. Alcohol consumption and risk of melanoma and non-melanoma skin cancer in the Women's Health Initiative. *Cancer Causes Control* 2013 (pre-publication) DOI 10.1007/s10552-013-0280-3.

Authors' Abstract

Purpose: The relationship between alcohol consumption and preference of alcohol type with hazard of melanoma (MM) and risk of non-melanoma skin cancer (NMSC) was examined in the Women's Health Initiative (WHI) Observational Study (OS).

Methods: A prospective cohort of 59,575 White postmenopausal women in the WHI OS (mean age 63.6) was analyzed. Cox proportional hazards models and logistic regression techniques were used to assess the hazard and risk of physician-adjudicated MM and self-reported NMSC, respectively, after adjusting for potential confounders including measures of sun exposure and skin type.

Results: Over 10.2 mean years of follow-up, 532 MM cases and 9,593 NMSC cases occurred. A significant relationship between amount of alcohol consumed and both MM and NMSC was observed, with those who consume 7+ drinks per week having a higher hazard of MM (HR 1.64 (1.09, 2.49), p global = 0.0013) and higher risk of NMSC (OR 1.23 (1.11, 1.36), p global < 0.0001) compared to non-drinkers. Lifetime alcohol consumption was also positively associated with hazard of MM (p = 0.0011) and risk of NMSC (p < 0.0001). Further, compared to non-drinkers, a preference for either white wine or liquor was associated with an increased hazard of MM (HR 1.52 (1.02, 2.27) for white wine; HR 1.65 (1.07, 2.55) for liquor) and risk of NMSC (OR 1.16 (1.05, 1.28) for white Wine; Or 1.26 (1.13, 1.41) For Liquor).

Conclusions: Higher current alcohol consumption, higher lifetime alcohol consumption, and a preference for white wine or liquor were associated with increased hazard of MM and risk of NMSC.

Forum Comments

Background: Data on the relation between the risk of skin cancers associated with alcohol intake and smoking are mixed. A case-control study by Westerdahl et al of 400 Swedish subjects in 1996 revealed no influence of alcohol or smoking on the risk of melanoma (Westerdahl J, Olsson H, Måsbäck A, Ingvar C, Jonsson N. Risk of malignant melanoma in relation to drug intake, alcohol, smoking and hormonal factors. *Br J Cancer* 1996;73:1126–1131). However, Freedman et al (2003) in a report from the US Radiologic and Technologists study of more than

65,000 subjects found that alcohol consumption of > 14 drinks/week increased the risk of melanoma (RR 2.1), while smoking decreased the risk (RR 0.6) (Freedman DM, Sigurdson A, Doody MM, Rao RS, Linet MS. Risk of melanoma in relation to smoking, alcohol intake, and other factors in a large occupational cohort. *Cancer Causes Control* 2003;14:847-857).

Two studies in 2004 (Naldi et al, Millen et al) had opposite results, with the former showing no effect of alcohol on skin cancer risk while the latter suggesting an increase in risk with high alcohol consumption (Naldi L, Gallus S, Tavani A, Imberti GL, La Vecchia C; Oncology Study Group of the Italian Group for Epidemiologic Research in Dermatology. Risk of melanoma and vitamin A, coffee and alcohol: a case-control study from Italy. *Eur J Cancer Prev* 2004;13:503-508) (Millen AE, Tucker MA, Hartge P, Halpern A, Elder DE, Guerry D 4th, Holly EA, Sagebiel RW, Potischman N. Diet and melanoma in a case-control study. *Cancer Epidemiol Biomarkers Prev* 2004;13:1042-1051). In 2012, Song et al reported a decrease in melanoma cases with smoking, as found in many previous studies (Song F, Qureshi AA, Gao X, Li T, Han J. Smoking and risk of skin cancer: a prospective analysis and a meta-analysis. *Int J Epidemiol* 2012;41:1694-1705).

In a recent (2013) presentation to the European Cancer Congress (ECCO) in Amsterdam, Klatsky et al reported an increase in the risk of melanoma associated with alcohol, and a decrease in risk from smoking. Almost 130,000 subjects in the Kaiser-Permanente Health Study were followed for up to 30 years, with 1,042 cases of MM. Multivariate models indicated hazard ratios (HR) and 95% confidence intervals (CI) for persons in the alcohol categories, versus non-drinkers, as follows: exdrinkers = 1.2 (0.8-1.8), <1 drink per day = 1.3 (1.1-1.5), 1-2 drinks per day = 1.5 (1.2-1.8), and ≥ 3 drinks per day = 1.7 (1.3-2.2). The increase in risk was stronger for drinking wine than for drinking liquor or beer. These authors also found a decrease in risk for smokers. In reviewing the present study, Forum member Klatsky states: "While our previous results support an increase in the risk of melanoma from alcohol consumption, I am still unclear of a mechanism; residual confounding by SES or other factors remains a strong possibility."

Comments on the present study: In the present study, the amount of alcohol consumed was reported for 4 periods: ages 14-17, 18-22, 23-29, and 30-49 years; these values were then used to estimate the lifetime intake in drink-years. The authors considered the frequency of the average number of drinks/week in categories of non-drinker, past drinker, <1 drink/month, < 1 drink/week, 1-7 drinks/week, and 7+ drinks per week.

At baseline, more frequent drinking was noted among leaner subjects (BMI <25) and less so for obese subjects. Subjects who were active had higher intake than sedentary subjects. Subjects reporting the highest sun exposure, those who stated "burns and tans," and college-educated subjects reported higher alcohol intake. As has been shown in many previous studies, the risk of skin cancers were lower among smokers than among non-smokers.

This was a fairly large study, based on 532 cases of melanoma (MM) and 9,593 cases of non-melanoma skin cancer occurring over approximately 10 years of follow up among more than 59,000 women in the Women's Health Initiative. The key reported results were for a higher hazard of MM (HR 1.64) and NMSC (OR 1.23) for drinkers of 7 or more drinks/week, compared with non-drinkers. Lifetime alcohol consumption was also positively associated with hazard of MM and risk of NMSC, with the only significant increases for MM according to type of beverage seen for women with a preference for white wine or liquor. The authors also report that the risk of these cancers was lower among smokers than among non-smokers.

It is noted that there were large decreases in the estimates of HR associated with alcohol intake when adjusted for potential confounders. For example, the HR for MM decreased for total wine from 1.30 to 1.06 when adjusted; for red wine: 1.71 to 1.34; for white wine: 1.93 to 1.52; for liquor: 1.87 to 1.65; for beer: 1.34 to 1.18. The magnitude of these changes, as well as the very different baseline characteristics of the women according to their drinking habits, raises a strong possibility that there may be residual confounding affecting the results. In particular, there may have been large differences in SES among subjects (which relates to risk of skin cancer), and this may not have been adjusted for adequately in the analyses.

In his review of this paper, Forum member Zhang stated: "Overall the analysis methods are appropriate and I can't see anything wrong. I have two minor comments:

"(1) If the study is to assess the relation of alcohol consumption to the risk of melanoma, I was wondering why the main analysis included subjects with history of melanoma (n=844 vs. n=532 occurring during follow-up) and NMSC (prevalent n=5,705 vs. n=9,593 occurring during follow up). I noticed that in the sensitivity analysis the investigators did exclude the individuals with a history of NMSC and MM, and the analysis excluding those with a history of MN or NMSC showed similar results for baseline consumption and baseline preference, with elevated HRs/ORs for the highest category of consumption compared to non-drinkers, as well as for white wine and liquor drinkers compared to non-drinkers.

"(2) In the main analysis, adjusting for history of MN or NMSC in the regression model may lead to potential collider bias, if we believe that alcohol consumption, especially lifetime alcohol consumption, may be associated with (or cause) MN or NMSC. However, such bias, in general, might tend to dilute the effect of alcohol consumption on recurrent or new MN or NMSC.

"(3) I agree that the very different baseline characteristics of the women according to their drinking habits raises a strong possibility that there may be residual confounding affecting the results."

Forum member Klatsky had further comments on his own recent analysis and the implications of the present paper. "In the Kaiser-Permanente study, among persons preferring wine the HR at 3+ drinks per day was 1.7 (1.2-2.5), while it was 1.2, 1.3, and 1.1 in persons with preference for liquor, beer, and no beverage type. Among heavy drinkers, only the wine relation was significant, but the CI's overlapped. At 1-2 drinks per day only those with no preference had an increased risk (HR = 1.4) and the wine drinkers had a HR of 0.9. So maybe we should not make too much of the beverage type data in these analyses. However, the relation with alcohol seems statistically solid.

"I do think that there are enough reports to indicate an association of alcohol consumption with melanoma. The present paper has a nice discussion of what little is known about hypothetical mechanisms and confounding. But I am puzzled by fact that they

do not cite the report by Mukamal (Mukamal KJ. Alcohol consumption and self-reported sunburn: a cross-sectional, population-based survey. *J Am Acad Dermatol* 2006;55:584-589). With data from 300,000 subjects participating in a risk factor surveillance survey, Mukamal found that "Approximately 33.5% of respondents reported a sunburn within the past year. Heavier average alcohol use and binge drinking were both positively associated with the prevalence and number of sunburns within the past year. The adjusted odds ratios for prevalence and number of sunburns among binge drinkers were 1.39 (95% confidence interval 1.31-1.48) and 1.29 (95% confidence interval, 1.20-1.38), respectively." Klatsky wonders whether "possible confounding by sun exposure is not only an artifact of SES and tropical vacations, but whether heavy imbibers at the beach may fall asleep when exposed or simply do not notice their sunburn until it is severe." Forum members Van Velden, de Gaetano, and Svilaas agree that "Ultraviolet irradiation is still the major causative factor of these cancer, and remains as a confounding variable in most studies."

Reviewer Klatsky adds: "However, even if the alcohol-melanoma association is due to confounding by sun exposure, the same explanation seems less plausible for the lower risk of melanoma associated with smoking. While there is obviously no public health utility in any 'protective' effects of smoking on skin cancer, that association is scientifically interesting and could be a clue to mechanisms."

Reviewer Finkel had an interesting comment: "The heaviest drinker tend to occupy settings not illuminated by the sun, the major inciter." It is not known how many really heavy drinkers were included in the highest category of drinking (all reporting 7+ drinks/week were in the same category). While this group reported high sun exposure, it is assumed that this group may well contain many subjects consuming only slightly above 7 drinks/week as well as some very heavy drinkers. With such a mixture of drinkers, adjusting for sun exposure may be problematic.

Forum Summary

A report from more than 59,000 women in the Women's Health Initiative related reported alcohol consumption to the risk of melanoma (MM) and non-melanoma skin cancer (NMSC). This was a fairly large study, with 532 cases of melanoma and 9,593 cases of NMSC occurring over approximately 10

years of follow up. The key reported results were for a higher hazard of MM (HR 1.64) and NMSC (OR 1.23) for drinkers of 7 or more drinks/week, compared with non-drinkers. Lifetime alcohol consumption was also positively associated with hazard of MM and risk of NMSC, with the only significant increases for MM according to type of beverage being seen for women with a preference for white wine or liquor. As shown in many previous studies, the risk of these skin cancers was lower among smokers than among non-smokers.

Forum reviewers thought that this was a very well-done analysis. They did note that there were large decreases in the estimates of HRs related to alcohol consumption when adjustments were made for sun exposure and other known confounders. For example, the HR for MM decreased for total wine from 1.30 to 1.06 when adjusted; for red wine: 1.71 to 1.34; for white wine: 1.93 to 1.52; for liquor: 1.87 to 1.65; for beer: 1.34 to 1.18. The magnitude of these changes, as well as the very different baseline characteristics of the women according to their drinking habits, raises the possibility that there may be residual confounding affecting the results. In addition, reviewer Zhang points out that by including subjects with these skin cancers prior to baseline in their main analyses, there could be a problems with bias in their results.

Forum member Klatsky has recently reported on this topic using several decades of follow-up data from the Kaiser-Permanente study, with more than 300,000 subjects and more than 1,000 cases of MM. In that study, he and his colleagues found that among persons preferring wine, the HR for MM at 3+ drinks per day was 1.7 (95% CI 1.2-2.5), while it was 1.2, 1.3, and 1.1 in persons with preference for liquor, beer, and no beverage type. However, at 1-2 drinks per day, wine drinkers had a HR of 0.9. Klatsky states "So maybe too much should not be made of the beverage type data in these analyses. However, the association with alcohol seems statistically solid."

A previous study by Mukamal, with data from 300,000 subjects participating in a risk factor surveillance survey reports: "Approximately 33.5% of respondents reported a sunburn within the past year. Heavier average alcohol use and binge drinking were both positively associated with prevalence and number of sunburns within the past year. The adjusted odds ratios for prevalence and number of sunburns

among binge drinkers were 1.39 (1.31-1.48) and 1.29 (1.20-1.38), respectively." Klatsky wonders whether "possible confounding by sun is not only an artifact of SES and tropical vacations, but whether heavy imbibers at the beach may fall asleep when exposed or simply do not notice their sunburn until it is severe." Other Forum reviewers also worry that there may be residual confounding in the present study from sun and ultraviolet exposure. Klatsky adds: "However, even if the alcohol-melanoma association is due to confounding by sun exposure, the same explanation seems less plausible for the inverse association between smoking and melanoma. While there is obviously no public health utility in any 'protective' effects of smoking, that association is scientifically interesting and could be a clue to mechanisms."

The bottom line is that there are considerable observational epidemiologic data suggesting that alcohol consumption may relate to an increase in the risk of MM and NMSCs. As mechanisms are not known, there is still concern that much of this relation

may relate to residual confounding by ultraviolet sun exposure, the most important environmental factor for these diseases.

Comments on this critique were provided by the following members of the International Scientific Forum on Alcohol Research:

Arthur Klatsky, MD, Dept. of Cardiology, Kaiser Permanente Medical Center, Oakland, CA, USA

David Van Velden, MD, Dept. of Pathology, Stellenbosch University, Stellenbosch, South Africa

Yuqing Zhang, MD, DSc, Epidemiology, Boston University School of Medicine, Boston, MA, USA

Arne Svilaas, MD, PhD, general practice and lipidology, Oslo University Hospital, Oslo, Norway

Harvey Finkel, MD, Hematology/Oncology, Boston University Medical Center, Boston, MA, USA

Giovanni de Gaetano, MD, PhD, Department of Epidemiology and Prevention, IRCCS Istituto Neurologico Mediterraneo NEUROMED, Pozzilli, Italy

R. Curtis Ellison, MD, Section of Preventive Medicine & Epidemiology, Boston University School of Medicine, Boston, MA, USA

Hypertension associated with alcohol consumption based on the facial flushing reaction to drinking

Alcohol is a risk factor for hypertension and facial flushing after drinking is a typical symptom of high alcohol sensitivity. A study assessed the role of the facial flushing response in the relationship between alcohol consumption and hypertension.

The study subjects were 1,763 men (288 nondrinkers, 527 flushing drinkers, 948 nonflushing drinkers) who had received a health checkup. Data were collected from the subjects' medical records. The risk of hypertension related to weekly drinking amount in nonflushers and flushers was analysed and compared with that in nondrinkers.

After adjusting for age, body mass index, exercise status, and smoking status, the risk of hypertension was significantly increased when flushers consumed more than 4 drinks per week (more than 4 and up to 8 drinks: odds ratio [OR] = 2.23; above 8 drinks: OR =

2.35). In contrast, in nonflushers, the risk was increased with alcohol consumption of more than 8 drinks (OR = 1.61) per week. The OR (flushers/nonflushers) for hypertension was also increased: more than 4 and up to 8 drinks, 2.27 and above 8 drinks, 1.52.

The authors conclude that hypertension associated with alcohol consumption has a lower threshold value and higher risk in flushers than in nonflushers. They state that clinicians should consider evaluating patients' flushing response as well as drinking amount for health promotion.

Source: Hypertension Associated with Alcohol Consumption Based on the Facial Flushing Reaction to Drinking. Jin-Gyu Jung, Jong-Sung Kim, Young-Seok Kim, Mi-Kyeong Oh, Seok-Joon Yoon. *Alcoholism: Clinical and Experimental Research*. Article first published online: 20 Nov 2013.

Associations of smoking and alcohol consumption with disease activity and functional status in rheumatoid arthritis

A prospective study from the Division of Rheumatology, Brigham and Women's Hospital; Harvard Medical School and the Division of Rheumatology, Boston University Medical Center, investigated the associations of smoking and alcohol consumption with disease activity and functional status in rheumatoid arthritis (RA).

662 patients with RA were followed up to 7 years from the Brigham and Women's Hospital Rheumatoid Arthritis Sequential Study. Smoking and alcohol consumption were assessed through yearly questionnaires. The disease activity and functional status were measured annually by the Disease Activity Score examined in 28 commonly affected joints using C-reactive protein (DAS28-CRP3) and the Modified Health Assessment Questionnaire (MHAQ).

Linear mixed models were developed to assess the longitudinal effects of smoking and alcohol consumption on DAS28-CRP3 and MHAQ after adjustment for potential confounders. The HLA-DRB1 shared epitope (HLA-SE) by smoking and alcohol interactions were also evaluated in the analysis.

The median followup time of the cohort was 4 years. Current smoking was not associated with DAS28-CRP3 in the study, but was associated with a higher MHAQ than nonsmokers with seropositive RA ($p = 0.05$). Alcohol consumption showed an approximate J-shaped relationship with MHAQ, with the minima occurring at 5.1-10.0 g/day. Compared to no alcohol use, alcohol consumption of 5.1-10.0 g/day was associated with a significant decrease of MHAQ ($p = 0.02$). When stratified by HLA-SE, the effect of alcohol consumption appeared to be stronger in HLA-SE-positive RA than HLA-SE-negative RA. Current smoking was therefore associated with a worse functional status, while moderate alcohol consumption was associated with a better functional status in RA.

Source: Associations of Smoking and Alcohol Consumption with Disease Activity and Functional Status in Rheumatoid Arthritis. Lu B, Rho YH, Cui J, Iannaccone CK, Frits ML, Karlson EW, Shadick NA. *J Rheumatol*. 2013 Dec 1.

Towards an even healthier mediterranean diet

Authors of a study examining the benefits of the Mediterranean diet state that dietary guidelines to promote good health are usually based on foods, nutrients, and dietary patterns predictive of chronic disease risk in epidemiologic studies. However, sound nutritional recommendations for cardiovascular prevention should be based on the results of large randomised clinical trials with "hard" end-points as the main outcome.

Such evidence has been obtained for the Mediterranean diet from the PREDIMED (Prevención con Dieta Mediterránea) trial and the Lyon Heart Study. The traditional Mediterranean diet was that found in olive growing areas of Crete, Greece, and Southern Italy in the late 1950s. Their major characteristics include: a) a high consumption of cereals, legumes, nuts, vegetables, and fruits; b) a relatively high-fat consumption, mostly provided by olive oil; c) moderate to high fish consumption; d)

poultry and dairy products consumed in moderate to small amounts; e) low consumption of red meats, and meat products; and f) moderate alcohol intake, usually in the form of red wine. However, the authors contend that these protective effects of the traditional Mediterranean diet may be even greater if we upgrade the health effects of this dietary pattern changing the common olive oil used for extra-virgin olive oil, increasing the consumption of nuts, fatty fish and whole grain cereals, reducing sodium intake, and maintaining a moderate consumption of wine with meals.

Source: "Towards an even healthier mediterranean diet". Estruch R, Salas-Salvadó J. *Nutr Metab Cardiovasc Dis*. 2013 Dec;23(12):1163-6. doi: 10.1016/j.numecd.2013.09.003. Epub 2013 Oct 11.

Wine Information Council 2nd Scientific Conference: Wine in Moderation: from Science to Art de Vivre

On 27th November 2013, the Wine Information Council organised the scientific conference "Wine in Moderation: from Science to Art de Vivre" in Brussels, Belgium.

The speakers explored the challenges around defining responsible drinking patterns and their consistent communication to consumers, so the adoption of low risk patterns in every day life can be promoted effectively, taking into account the social and cultural diversities of wine consumption in different societies.

In the area of wine and health, all scientists, highlighted the strong link of moderate wine drinking with health and its specific antioxidant components, explaining how and why it is advantageous to combine wine with meals as part of healthy diet such as the Mediterranean diet.

When approaching the cultural aspects of drinking, outlining the contrast between today's approach of a 'quick fix' and the real "genuss" (deep enjoyment and delight) helped to understand drinking behaviours. The need to increase knowledge on both the risks of alcohol consumption and responsible drinking patterns while discouraging excessive drinking and drunkenness was highlighted among other topics.

In the first session, moderated by Professor Nicolai Worm, Professor Luc Djousse (Harvard Medical School) presented an overview of the current scientific evidence on moderate alcohol/wine consumption and common diseases. Most beneficial effects of moderate drinking have been observed with all types of alcoholic beverages, however, wine consumption might provide additional benefits beyond those from ethanol for certain health outcomes. Nonetheless, he also stressed how the net benefits of moderate drinking may be attenuated by an increased risk of certain types of cancers.

Professor Mladen Boban (University of Split Medical School) underlined the importance of drinking patterns, in particular the fact of drinking with meals which reduces the increase of blood alcohol level and may also act as a digestive aid while improving microbial food safety.

Finally, Professor Ramon Estruch (University of Barcelona, School of Medicine) explained the results

of his PREDIMED study on the Mediterranean diet and provided evidence that the risk of developing cardiovascular diseases was reduced by 30%. He pointed out that among other dietary factors; moderate wine consumption with meals was part of the participants' Mediterranean way of eating.

The second session aimed at exploring the current status quo of drinking guidelines and how to best communicate them to consumers. The Australian experience was outlined briefly by this session's moderator, Creina Stockley (AWRI). In her presentation about the drinking guidelines puzzle, Dr Marjana Martinic (ICAP) discussed the existing diversity of national drinking guidelines and their lack of consistency. She concluded that guidelines should be based on scientific evidence, communicated to consumers in recognisable units and integrated into health education and professional training.

These are the exact objectives of the Joint Action on reducing alcohol-related harm presented by Patricia Pissarra (SICAD). This project with over 1 million of funding from the EU, brings together 32 associated and 28 collaborating partners aims at better explaining to public health professionals the importance of basing drinking guidelines on scientific evidence, the practical implications in the use of low risk drinking guidelines and aligning messages to the general public and health professionals.

The importance of wine culture and the social and cultural aspects of drinking were the focus of the third session moderated by Master of Wine Philip Goodband. Professor Michael Musalek (psychiatrist, Anton Proksch Institute, Vienna) explained the concept of "genuss" and stated that what we really need today is a change from a superficial fun society to a profound "genuss" society. As a first step, he suggested "to use all measures to increase knowledge about the risks of alcohol consumption, but also to increase knowledge on how to use alcoholic beverages in the frame of a joyful life". During a quick retrospective look of his life, Mr Yiannis Boutaris, mayor of Thessaloniki, analysed the socioeconomic factors driving the evolution of alcohol and wine consumption and highlighted the importance of wine as a cultural product in supporting a moderate drinking behaviour in today's

Greek society and among thousands of university students of Thessaloniki, where public drunkenness is not acceptable.

The conference ended with a lively round table discussion opening the debate to the floor. The three speakers (Federico Castellucci from OIV, Andrew Jefford –wine journalist and Richard Halstead –wine

market researcher) concluded that not only should the concept of moderation be better communicated to the general public and established as part of the culture but also underlined the fact that excessive consumption of alcoholic beverages and wine is not socially acceptable.

conf2013.wineinformationcouncil.eu

Study finds moderate wine drinking leads to healthier sperm

A research team at the Nofer Institute of Occupational Medicine in Lodz, Poland has found that lifestyles can influence reproductive health in males.

The research, published in the latest issue of Systems Biology in Reproductive Medicine, found that men who drink wine up to three times per week create stronger sperm. The findings contradict recent research in the UK that found modifiable lifestyle choices, such as alcohol and tobacco consumption, do not impact sperm health.

In the Polish study, the sperm were stronger, with more powerful necks, when the men drank wine in moderation regularly. Stronger sperm are better swimmers, thus increasing the chance of fertilisation.

“The results of the study suggest that lifestyle factors may affect semen quality,” the study, published in the latest issue of Systems Biology in Reproductive Medicine, concluded.

Increased leisure time, light coffee drinking and the wearing of boxer shorts also improved reproductive strength, researchers discovered. However, the study found that regular use of a mobile phone for more than a decade decreased the mobility of sperm.

Source: Lifestyle and semen quality: role of modifiable risk factors. Jurewicz J, Radwan M, Sobala W, Ligocka D, Radwan P, Bochenek M, Hanke W. Syst Biol Reprod Med. 2013 Sep 30.

The detection and intervention for alcohol-related liver disease in the community

A study published in the British Journal of General Practice provides evidence that detecting early liver disease in the community is feasible, practical, and that feedback of liver risk can increase the proportion of subjects reducing alcohol consumption.

A community feasibility study in nine general practice sites in Hampshire identified hazardous and harmful drinkers by WHO AUDIT questionnaire and offered screening for liver fibrosis.

In total, 4630 individuals responded. The 1128 (24%) who were hazardous or harmful drinkers were offered a liver fibrosis check using the Southampton Traffic Light (STL) test; 393 (38%) attended and test results were returned by post.

The STL has a low threshold for liver fibrosis with 45 (11%) red, 157 (40%) amber, and 191 (49%) green results. Follow-up AUDIT data was obtained for 303/393 (77%) and 76/153 (50%) subjects with evidence of liver damage reduced drinking by at least one AUDIT category (harmful to hazardous, or hazardous to low risk) compared with 52/150 (35%, $P < 0.011$) subjects without this evidence; in the subset of harmful drinkers patterns (AUDIT > 15), 22/34 (65%) of STL positives, reduced drinking compared with 10/29 (35%, $P < 0.017$) STL negatives.

Detection of liver disease in the community is feasible, and feedback of liver risk may reduce harmful drinking, the authors conclude.

Source: Feasibility of detection and intervention for alcohol-related liver disease in the community: the Alcohol and Liver Disease Detection study (ALDDeS Sheron N; Harris S; Roderick P; Moore M; O'Brien W) British Journal of General Practice Vol 63, No 615, 2013, ppE698-E705.

Expansion of alcohol education outreaches for schools in Nordic Regions

A very interesting conference was held in Tallinn, Estonia in November to showcase the roll out of school alcohol education programmes across the Nordic and Baltic regions in the past seven years. The inspiration has been the Talk About Alcohol programme from Sweden, which has now been translated and adapted for Denmark, Finland, Estonia and Latvia. In each country, the programme has been adapted for local customs, laws and underage drinking trajectories for young people. For example in Sweden (as in the UK) more underage girls report drunkenness and going to hospital for alcohol related incidents than boys. In Estonia and Latvia, underage drinking is against the law in all circumstances, whereas in the UK it is a parental decision from the age of 5, although it is illegal to be served or to purchase alcohol on behalf of someone under the age of 18.

It was invaluable to compare best practice and learn from the innovative approaches being used.

Seven years of experience from Sweden

Per Hazelius runs a CSR strategy consulting company Kunskapskraft & Media in Stockholm, working with social aspect organisations and companies to build social responsibility programmes and initiatives in Europe. The company has been responsible for the Swedish school programme Talk About Alcohol since the start of 2006. The Swedish programme is used in 75% of all secondary schools in Sweden. Approximately 9,000 teachers and 450,000 students have used the programme since it began. An innovative part of the programme is the annual story writing competition. Over 6,000 students have participated and the best stories are published in a book, which is then given to the schools and to be used as part of the teaching process. There is also a short film competition.

prataomalkohol.se

Drinking context

58% of the boys and 65% of the girls in the age of 15-16 years in Sweden consume alcohol. (Defined as drinking alcohol during the last 12 months). Underlying trends show that fewer young people are consuming alcohol but, as in the UK, those who do drink are consuming a lot. Importantly, more girls than boys aged 15-16 years are drinking.

The programme has governmental endorsement at a regional level all over Sweden, there is a national partnership with The Swedish Transport Administration and The Swedish National Agency for Education. Partnerships include Nattvandring.nu - a group of parents and others who patrol the streets to provide a calming influence and Ungdomar.se a youth web community who try to help influence young people not to drink alcohol in their arena. The programme is hoping to undergo an in-depth evaluation of its effectiveness beginning in 2014.

Implementing the Talk About Alcohol programme in Estonia – research and training

Iris Vahtra is project manager in the NGO that implements the Talk About Alcohol prevention programme for youth in Estonia. Iris is MA in psychology and practices youth-oriented internet counselling and social skills training for at risk youth.

The Swedish Talk About Alcohol programme was translated and adapted for local culture in Estonia and piloted in 2012. 7 training seminars have now taken place across Estonia training 86 teachers and specialists. The project is a partnership with The Institute of Psychology in Tallinn. A pilot study found that the programme increased pupils' knowledge about alcohol and their self reliance.

Vimsi school is the largest in Estonia and is trialing the adapted seven lessons with 2 days of teacher training. The project is being evaluated by the Swedish - Estonian Mental Health and Suicidological Institute among 450 students (half control and half interventions). The project has encountered some difficulties: In Estonia any alcohol consumption under the age of 18 is against the law, so there is a denial that those under age drink (whether in the home or in a public place or private party). Teachers also tend to be overloaded with too much to do. There is also low motivation among teachers and large classes.

raagime-alkolist.ee

Adapting Talk About Alcohol in Latvia together with teachers, parents and schools

Kristiana Pavlova is co-founder of the organisation Go Beyond and responsible for Talk About Alcohol in Latvia. The youth development programme "Go Beyond" which, in addition to developing

undergraduates skills; focuses on public health initiatives (reducing smoking and consumption of alcohol among youngsters).

In Latvia 96% of 15-16 year-olds drink alcohol and over 33% of them consume alcohol more than 3 times a month. More than 40% of Estonian adults see 'addictions' as the most important issue for school age children. 93% of teachers think that it is necessary to talk about alcohol, its effects on body and situations that it creates among peers in the classroom. 64% of teachers point to a lack of material about how to talk to young people about this subject.

In Latvia, Talk About Alcohol has a great advantage in that the health effects of alcohol, tobacco and drugs are covered in social sciences (Grade 1 – 9) as part of the "Human's and society's development and interrelations" topic, with 30 hours of curriculum time. In addition, teachers have to undertake 36 hours of a professional level qualification' courses every 3 years in order to fulfil the criteria set by law. Professional level courses can be organised by educational institutions and have to be certified by each municipality in which the course is carried out. As such, Talk About Alcohol has been adapted into an 18 hour professional level course on alcohol education for teachers, which can contribute to their 36 hours of professional qualification courses. Within the first year of roll out in 2013, 1/3 of the teachers who have completed the course have found it excellent, 1/3 feel they need support to deliver the lessons and training and 1/3 say they cannot deliver it in their school, saying they are too old, everyone drinks here or that it is the parents responsibility.

runajotparalkoholu.lv

Talk About Alcohol - the work of the Alcohol Education Trust in secondary schools across the UK, part 1 and part 2 - Helena Conibear, United Kingdom

Helena Conibear is Director of The Alcohol Education Trust, a charity with a very specific remit, the provision of alcohol education to 11- 18 year-olds and their parents, through secondary schools across the UK. Helena was the keynote speaker and shared the experience of planning a well designed, detailed and statistically significant evaluation of alcohol education programmes. **'Delivering is not enough. It is fundamental to pilot a new alcohol**

education programme and adapt it according to the teachers' ability to deliver the programme, fidelity to the programme, students' reaction to the materials, time scale and local needs. Once these adaptations have been made, and the programme is in place in a reasonable number of schools, an evaluation can be planned. This is expensive and time consuming and an excellent independent Institution with an international reputation must be chosen.'

Helena shared the Alcohol Education Trust's journey from 2011-2013, when its programme was evaluated over 3 time points for 4,000 pupils aged 12-14, in 30 schools across England. (You can read the full evaluation findings at alcoholeducationtrust.org/pages/peer.html).

In addition Helena emphasised the importance of partnership and local and national level and highlighted the BAFTA winning films made for pupils in secondary schools in cooperation with the BBC learning Zone.

alcoholeducationtrust.org/pages/staysafeib.html

Puhutaan alkoholista opettajille – Let's talk about alcohol prevention with teachers in Finland

Susanna Heikkinen is the ombudsman of The Association of Finnish Alcoholic Beverage Suppliers (SAJK). SAJK has established a working group that focuses on responsibility issues. This effective team is the driving force of all their activities, including Let's Talk About Alcohol programme and their project on a local website about responsible drinking.

Susanna is responsible for general management of the association. Let's Talk about Alcohol includes in-class exercises for students aged 13 - 17, and resources are characterised as follows:

The working formats stress student involvement and informal group discussions.

The materials can be incorporated into a variety of subjects, including Finnish language studies, social studies, biology and health.

The teaching materials are compiled in a book seen to all secondary schools in Finland that use Finnish as the primary teaching language (780 schools).

The programme can be used in its entirety or tailored from select parts.

puhutaanalkoholista.fi

Alcohol Dialogue in Denmark: Content, distribution and development of the programme

Anett Wiingaard, is General Manager at GODA, the social aspects organisation that manages the Talk About Alcohol programme in Denmark. All schools in the country are independently responsible for alcohol education. Schools can rely on external partners such as associations, companies and authorities and in 2008, two thirds of schools organised health-oriented campaigns or theme days. There are tens of associations that offer cooperation; examples vary from full-scale material packages for classes, guides for parents' evenings, educational adventure trails for pupils, a 'drug bus' that circulates over the country providing 'cool' material, short movies and videos, theatre, comic series, games, competitions and quick polls at class etc.

6,922 copies of the Talk About Alcohol workbook have been ordered by schools (1,500 schools = app. 4 copies each school). There is also a comprehensive website Alcohol Dialogue, which will have an expanded section on organising parent meetings in schools and concrete tools to help teachers to organise constructive meetings for development of a dialogue with parents about setting up rules about alcohol. Finally, the programme is being drawn to the attention of the political system via a newsletter, ministries, education, health and social committees, as well as members of parliament and to municipal council men.

alkoholdialog.dk

Drinking context in Denmark

Average alcohol consumption (100% alcohol) last drink episode is very heavy in Denmark, heading the league across Europe:

	boys	girls
Denmark	10.6 cl	8.9 cl
Finland	7.8 cl	7.2 cl
Norway	7.6 cl	6.6 cl

However, there are some trends moving in the right direction. Regarding alcohol consumption among young people aged 15-16 year old, between 2007 and 2011, the proportion of teenagers who drank at least 20 times in the previous year dropped from 50% to 37% in boys and from 35% to 28% in girls. The share of boys who were drunk at least 10 times dropped from 21% to 17% (and 16% to 11% for girls). The percentage of 15-16 year-olds who were not drunk in the past month increased from 49% to 61% in boys and from 53% to 62% in girls.

The proportion of these teenagers who got drunk more than once or twice last month dropped from 24% to 12% among boys and from 16% to 7.5% among girls i.e. The number of young people in Denmark who were drunk more than once or twice during the last month has gone down 50%. Approximately 50,000 children are born each year to a population of 5 million.

Hungarian brewer organises a forum on pregnancy and alcohol

Dreher Breweries Ltd in Hungary has a record of encouraging awareness of moderate and responsible drinking for Hungary's adult population. The company was also first to join the Responsible Alcohol Consumption Programme (alkohol.info.hu). In November, the brewery organised a Forum on alcohol in pregnancy.

The Forum was opened by Attila Fülöp, deputy assistant secretary of state responsible for the Ministry of Human Resources' family and promotion of inclusion policy. In his speech, he emphasised that "one of the main goals of the government is to reinforce families and the willingness to have children, and we would like this to be accompanied

by the acquisition of responsible parenting behaviour patterns. This is why we support all informative initiatives aimed at protecting the greatest treasure, the health of the foetus and the child."

Dr. Tamás Koós, associate of the National Institute for Health Development and the National Centre of Addictology said: "Alcohol consumption has determined risks for both sexes at any age. There are some situations when the smallest risk can have serious, life-long consequences. Pregnancy is such a situation, the responsible choice is an alcohol-free life for all expecting mothers."

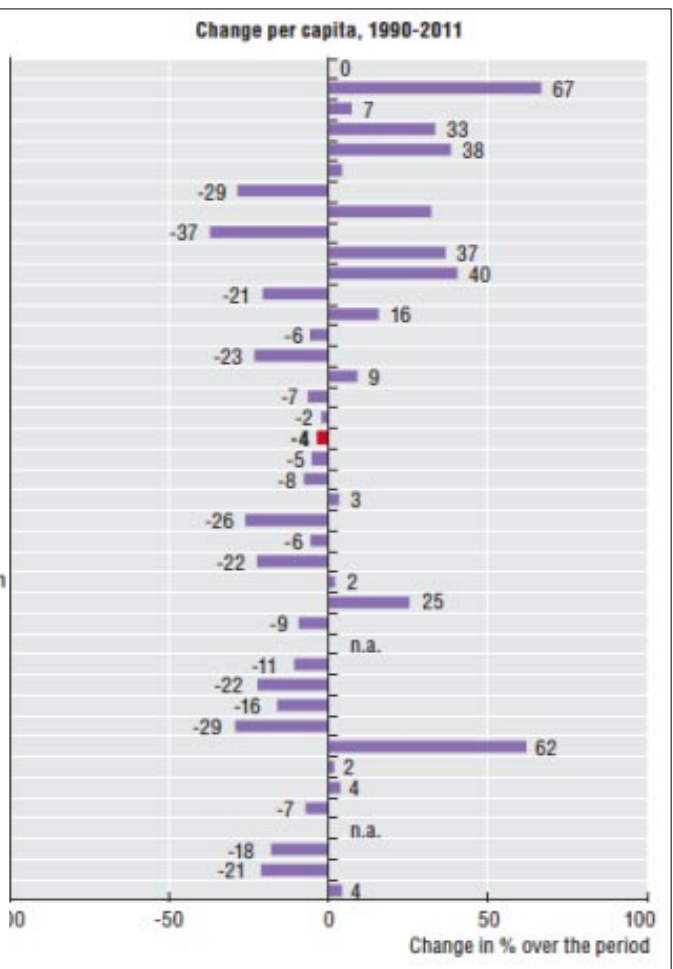
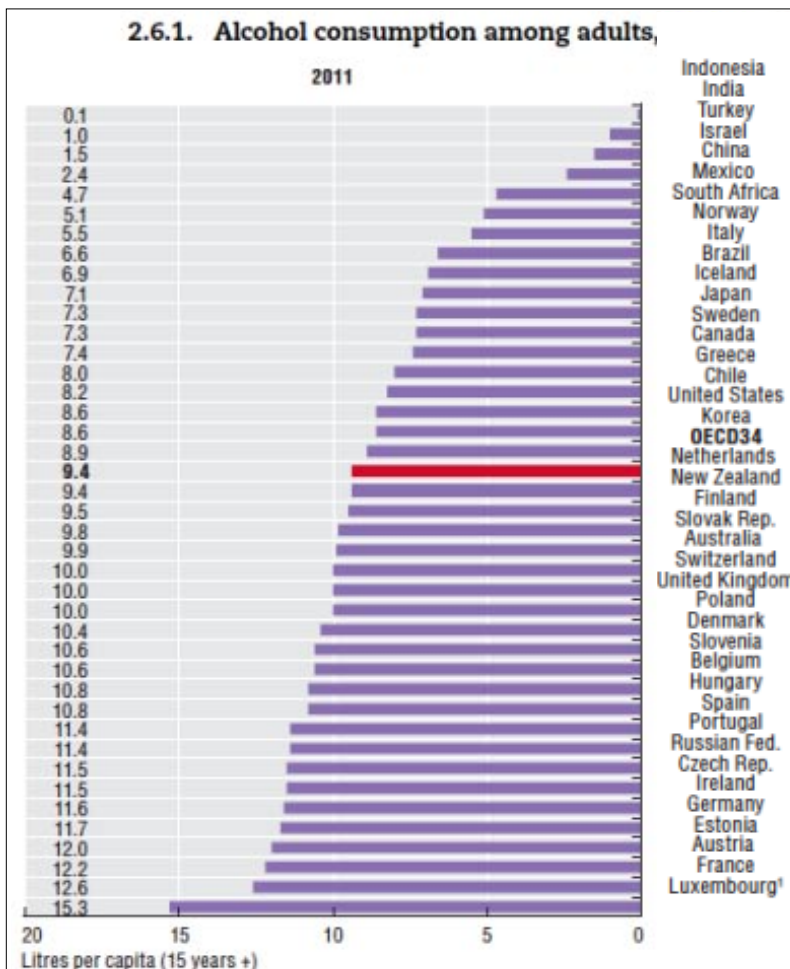
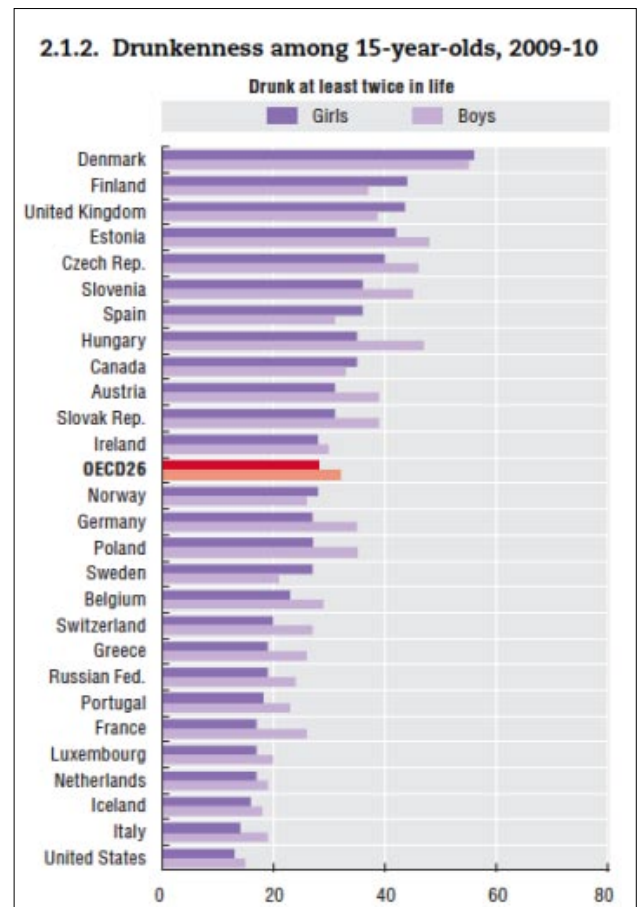
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Health At A Glance 2013: OECD Indicators

This seventh edition of Health at a Glance provides the latest comparable data on different aspects of the performance of health systems in OECD countries. It provides evidence of large variations across countries in the costs, activities and results of health systems. Key indicators provide information on health status, the determinants of health, health care activities and health expenditure and financing in OECD countries. The publication takes as its main basis OECD Health Statistics 2013, the most comprehensive set of statistics and indicators for comparing health systems across the 34 OECD member countries.

Alcohol and young people

Drunkenness is reported to have been experienced at least twice by more than 40% of 15-year-olds in the Czech Republic, Denmark, Estonia, Finland, Hungary, Slovenia and the United Kingdom (Figure 2.1.2). Much lower rates (less than 20%) are reported in Iceland, Italy, Luxembourg, the Netherlands, and the United States. Across all surveyed OECD countries, boys are more likely than girls to report repeated drunkenness (32% vs. 28%). France, Hungary, and Slovenia have the biggest differences, with rates of alcohol abuse among boys at least 9% points higher than those of girls. In four countries, Finland, Spain, Sweden and the United Kingdom, more girls than boys report repeated drunkenness (around 5-7% points).



Average alcohol consumption figures

Alcohol consumption, as measured by annual sales, stands at 9.4 litres per adult, on average, across OECD countries, based on the most recent data available (Figure 2.6.1). Leaving aside Luxembourg – given the high volume of purchases by non-residents in that country – France, Austria, Estonia reported the highest consumption of alcohol, with 12.0 litres or more per adult per year in 2011. Low alcohol consumption was recorded in Turkey and Israel, as well as in Indonesia and India, where religious and cultural traditions restrict the use of alcohol in some population groups.

Although average alcohol consumption has gradually fallen in many OECD countries over the past two decades, it has risen in several Northern European countries (Iceland, Sweden, Norway and Finland) as well as in Poland and Israel. There has been a degree

of convergence in drinking habits across the OECD, with wine consumption increasing in many traditional beer-drinking countries and vice versa.

The traditional wine-producing countries of Italy, Greece, Spain, Portugal and France, as well as the Slovak Republic, Switzerland and Hungary have seen per capita consumption fall by one fifth or more since 1990 (Figure 2.6.1).

Alcohol consumption in the Russian Federation, as well as in Brazil, India, and China has risen substantially, although in the latter two countries per capita consumption is still low. Variations in alcohol consumption across countries and over time reflect not only changing drinking habits but also the policy responses to control alcohol use and regulation of the market.

oecd.org/health/health-at-a-glance.htm

Health disparities ‘could be eliminated in a generation’

The report, “Global Health 2035: A World Converging within a Generation” was written by 25 leading international health experts and economists, chaired by Summers, of Harvard University, and published in The Lancet health journal.

The experts said world leaders needed to press for a concerted increase in research and development (R&D) investment to develop new medicines, vaccines and health technologies.

“For the first time in human history, we are on the verge of being able to achieve a milestone for humanity: eliminating major health inequalities... so

that every person on earth has an equal chance at a healthy and productive life,” said Larry Summers, a former US Treasury Secretary who co-chaired a commission on global health.

The report also recommended taking bold preventative steps in public health, such as increasing taxes on tobacco and other substances that can be potentially harmful, like alcohol and sugar.

Source: Global health 2035: a world converging within a generation. The Lancet, Volume 382, Issue 9908, Pages 1898 - 1955, 7 December 2013 .

MESAS third annual report assesses impact of Scotland’s Alcohol Strategy

The third Monitoring and Evaluating Scotland’s Alcohol Strategy (MESAS) annual report provides an update on Scotland’s alcohol strategy. The report includes an evaluation plan, trends in price and affordability, alcohol sales and consumption, and alcohol-related harm. New chapters reflect the evaluation of the Scottish Licensing Act and the contribution of the economic downturn to recent falls in alcohol-related harms in Scotland.

the report suggests that Scotland’s alcohol strategy is likely to be contributing to some aspects of the decline in levels of alcohol-related harms, but cautions that the role of economic downturn and still high levels of harm must not be overlooked.

healthscotland.com/documents/22621.aspx

Binge Drinking — United States, 2011

The Centers for Disease Control and Prevention have published a report that examines sociodemographic disparities in binge drinking nationwide and by state.

CDC analysed 2011 data from the Behavioural Risk Factor Surveillance System, a state-based, random-digit-dialed landline and cellular telephone survey of the noninstitutionalised civilian US adults that is conducted monthly in all states, the District of Columbia (DC), and three US territories.

In 2011, the overall prevalence of binge drinking among adults in the 50 states and DC was 18.4%. On average, binge drinkers reported a frequency of 4.1 binge drinking episodes during the preceding 30 days and an intensity of 7.7 drinks per occasion during the past 30 days. Binge drinking prevalence was significantly higher among persons aged 18–24 years (30.0%) and 25–34 years (29.7%) than among those in older age groups. Similarly, the intensity of binge drinking was highest among binge drinkers aged 18–24 and 25–34 (8.9 and 8.2 drinks, respectively); however, the frequency of binge drinking was highest among binge drinkers aged ≥65 years (4.9 episodes). The prevalence of binge drinking was also significantly higher among non-Hispanic whites (21.1%) than among all other race/ethnicity categories, but the intensity of binge drinking was highest among American Indians/Alaska Natives (8.4 drinks). Those with household incomes ≥\$75,000 had significantly higher binge drinking prevalence (22.2%) than those with lower household incomes. In contrast, binge drinkers with household incomes <\$25,000 reported the highest frequency (4.3 episodes) and intensity (7.1 drinks) of binge drinking.

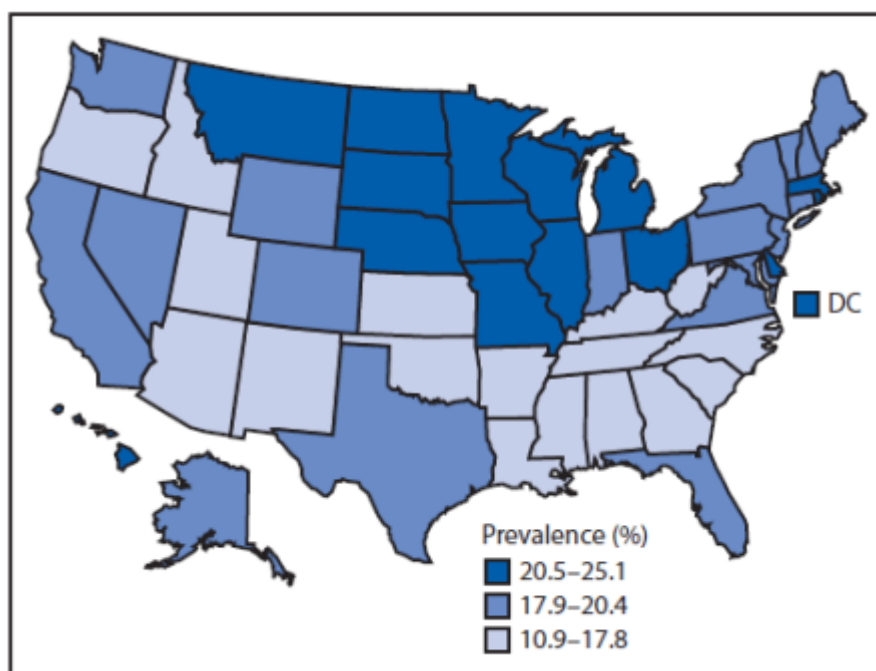
Respondents who did not graduate from high school reported significantly lower binge drinking prevalence (16.8%) than those with high school or higher education. However, binge

drinkers with less than high school education had the highest frequency (4.7 episodes) and intensity (7.4 drinks) of binge drinking. Respondents with disabilities also had a significantly lower prevalence of binge drinking (16.9%), but those who binge drank had a higher frequency (4.5 episodes) and intensity (7.2 drinks) of binge drinking, compared with those without disabilities.

Overall, areas with the highest age- and sex-adjusted prevalence of binge drinking were states in the Midwest, as well as DC and Hawaii States with the highest intensity of binge drinking were generally located in the Midwest, and included some states (e.g. Oklahoma, Arkansas, Kentucky, West Virginia, and Utah) that had a lower prevalence of binge drinking.

The report concludes that binge drinking is common among US adults, and persons who binge drink tend to do so frequently and with high intensity. The authors state that despite the array of strategies that have been recommended, efforts are needed to implement them to a point of measurable success toward reducing binge drinking. The frequency and intensity of binge drinking also should be monitored routinely to support the implementation.

cdc.gov/mmwr/preview/mmwrhtml/su6203a13.htm



Young people - 'Drinking is our modern way of bonding'

A study published in *The Journal of Psychology and Health* examined age and sex differences in drinking motives to better inform development of targeted interventions to reduce alcohol-related harm, arguing that efforts to discourage excessive alcohol use among young people can only be effective if the target audience is exposed to, attends to, and comprehends key messages.

Thirty individual interviews and 12 group interviews were conducted with English 13-25 year-olds. Interviewees gave multiple motivations for drinking - especially those related to image and reputation, and played down the health implications of heavy drinking.

Negative aspects of drinking - caring for drunk friends, being cared for when drunk and suffering through hangovers with friends - were considered to offer opportunities for closer interpersonal bonding than other social activities.

Respondents distanced themselves from 'problem' drinkers, but disapproved of others' problematic drinking or antisocial behaviour. Narrative messages demonstrating the social consequences of excessive consumption were preferred to single, static messages emphasising risk or harm. Interviewees noted that interventions must use an engaging tone or pitch; they considered many campaigns to be patronising or preaching.

A lack of consensus between age and sex groups highlighted a need for multifaceted, multi-modal approaches that utilise mobile technologies and new media.

Source: 'Drinking is our modern way of bonding': young people's beliefs about interventions to encourage moderate drinking de Visser RO; Wheeler Z; Abraham C; Smith JA *Psychology and Health* Vol 28, No 12, 2013, pp1460-1480.

Could saving the traditional pub be the answer to Britain's binge drinking problem?

An article by Marion Roberts (University of Westminster) & Tim Townshend (Newcastle University), discusses whether the English Planning System should distinguish between pubs for the 'public good' and licensed premises associated with 'social ills'?

In their article, 'Young adults and the decline of the urban English pub: issues for planning', published in *Planning Theory & Practice*, Roberts and Townshend bring together two issues that have pre-occupied the British government; the decline of the British pub and young people's drinking. The number of public houses in the UK has fallen by nearly one quarter in the space of three decades. Meanwhile alcohol consumption amongst young adults remains a key policy concern.

The authors discuss evidence from research into local variations in youth drinking cultures in England, which found that young people reported drinking in a restrained and responsible manner in 'traditional' pubs. Young adults in their study reported having one or two drinks on a weekday evening or sometimes not drinking alcohol at all. Such behaviour could be contrasted with heavy drinking at high street bars or at house parties.

While recognising the adverse effects of excessive alcohol consumption, the authors point out that

going to pubs reinforces social ties and networks. This evidence lends support to arguments for the contribution of pubs to social sustainability and paradoxically, to health, or at least a healthier mode of alcohol consumption.

The article explores the difficulties the English planning system faces in seeking to distinguish pubs that might be identified with a 'public good' from other types of licensed premises more associated with 'social ills'. The Use Class Order in the English planning system does not provide an adequate distinction between different types of drinking establishment. The authors suggest a new use class established for traditional pubs where the majority of patrons are seated. The UK government is already providing special support to 'community pubs', through the Localism Act 2011 and the Community Services Grants. The study found that its sample of young adults were prepared to travel to meet friends and that their pub going routines were rarely confined to their 'local'. This suggests that while the Localism Act may be effective in supporting well-organised community groups, it does not meet the needs of a younger, mobile demographic.

Source: *Young adults and the decline of the urban English pub: issues for planning*. Marion Roberts, Tim Townshend. *Planning Theory & Practice*, 2013.

The introduction of 24-hour drinking in the UK has not increased street violence

A study, carried out at the University of Cambridge's Institute of Criminology and published in the journal *Social Science and Medicine*, focuses on violent crime and flexible alcohol licensing in Manchester in the two years before and two years after the introduction of the Licensing Act in late 2005. The study finds no evidence that changes to licensing legislation had any effect on levels of violence.

The 2003 Licensing Act - introduced in November 2005 - allowed pubs, clubs and off-licences to apply for later licensing hours beyond the traditional 11pm cut-off. It was based on the belief that staggering the point at which people were forced to stop drinking would reduce confrontations and therefore street violence.

Researchers used data from Greater Manchester Police and the Local Authority to compare recorded rates of violence with licensed trading hours in wards across the city from February 2004 to December 2007 - roughly two years either side of legislative change.

While some premises kept the previous closing time, others started to sell alcohol later into the night. Researchers investigated the extent to which licensed closing times had become staggered in neighbourhoods across Manchester after the Licensing Act was implemented.

On average, there was between 27-32% reduction in the concentration of closing times on weekdays and between 48-53% on weekends. Following the implementation of the Act, average trading times increased between 30 to 45 minutes per premise on weekdays and by 1 hour and 20 minutes at weekends - far lower than was anticipated.

After cross-referencing police records of street violence with changes to licensing hours across the city, the researchers found no evidence that increases in alcohol availability had any association with increases in levels of violence.

The authors state that opportunities to generate better evidence about the effects of the flexible licensing policy may have been missed due to the lack of government attention to monitoring and evaluation. "While the emphasis on change and improvement should be encouraged, the enthusiasm to act needs to be balanced with careful and systematic attempts to understand the implications and effectiveness of these interventions," Humphreys said.

cam.ac.uk/research/news/violence-rates-unaffected-by-24-hour-licensing-laws#sthash.uc1Y7GGm.dpuf

Sport participation and alcohol and illicit drug use in adolescents and young adults

Sport participation can play an important and positive role in the health and development of children and youth. Researchers investigated the role that sport participation might play in preventing drug and alcohol use among youth.

The study published in *Addictive Behaviours*, is a systematic review of 17 longitudinal studies examining the relationship between sport participation and alcohol and drug use among adolescents.

Results indicated that sport participation is associated with alcohol use, with 82% of the included studies (14/17) showing a significant positive relationship. Sport participation, however, appears to be related to reduced illicit drug use, especially use of non-cannabis related drugs. 80% of the studies found sport participation associated

with decreased illicit drug use, while 50% of the studies found negative association between sport participation and marijuana use. Further investigation revealed that participation in sports reduced the risk of overall illicit drug use, but particularly during high school; suggesting that this may be a critical period to reduce or prevent the use of drugs through sport.

The authors suggest that future research should investigate what conditions are necessary for sport participation to have beneficial outcomes in terms of preventing alcohol and/or illicit drug use.

Source: Sport participation and alcohol and illicit drug use in adolescents and young adults: A systematic review of longitudinal studies. Matthew Kwan, Sarah Bobko, Guy Faulkner, Peter Donnelly, John Cairney. *Addictive Behaviours*. Available online 10 November 2013.

Do drinking and marriage mix?

Researchers at the University at Buffalo Research Institute on Addictions (RIA) followed 634 couples from the time of their weddings through the first nine years of marriage and found that couples where only one spouse was a heavy drinker had a much higher divorce rate than other couples. However, if both spouses were heavy drinkers, the divorce rate was the same as for couples where neither were heavy drinkers.

“Our results indicate that it is the difference between the couple’s drinking habits, rather than the drinking itself, that leads to marital dissatisfaction, separation and divorce,” said Kenneth Leonard, PhD, RIA director and lead author of the study.

Over the course of the nine-year study, nearly 50% of couples where only one partner drank more heavily divorced, while the divorce rates for other couples was only 30%. (Heavy drinking was defined as drinking six or more drinks at one time or drinking to intoxication).

“This research provides solid evidence to bolster the commonplace notion that heavy drinking by one partner can lead to divorce,” Leonard said. *“Although some people might think that’s a likely outcome, there was surprisingly little data to back up that claim until now.”*

The unexpected outcome was that the divorce rate for two heavy drinkers was no worse than for two

non-heavy drinkers. *“Heavy drinking spouses may be more tolerant of negative experiences related to alcohol due to their own drinking habits,”* Leonard said. But he cautioned that this does not mean other aspects of family life are unimpaired.

The researchers also found a slightly higher divorce rate in cases when the heavy drinker was the wife, rather than the husband, but this difference is based on only a few cases and was not statistically significant. Leonard suggests that if this difference is supported by further research, it might be because men view heavy drinking by their wives as going against proper gender roles for women, leading to more conflict.

The study controlled for factors such as marijuana and tobacco use, depression and socioeconomic status, which can also be related to marital dissatisfaction, separation and divorce.

“Ultimately, we hope our findings will be helpful to marriage therapists and mental health practitioners who can explore whether a difference in drinking habits is causing conflicts between couples seeking help,” Leonard said.

Source: Concordant and Discordant Alcohol, Tobacco, and Marijuana Use as Predictors of Marital Dissolution. Leonard, Kenneth E.; Smith, Philip H.; Homish, Gregory G. *Psychology of Addictive Behaviours*, Oct 14, 2013.

Effects of alcohol on automated and controlled driving performances

A study in France analysed the influence of blood alcohol concentration as a function of the complexity of the scenarios. Road scenarios implying automatic or controlled driving performances were manipulated in order to identify which behavioural parameters were deteriorated.

A single blind counterbalanced experiment was conducted on a driving simulator. Sixteen experienced drivers (25.3 ± 2.9 years old, 8 men and 8 women) were tested with 0, 0.3, 0.5, and 0.8 g/l of alcohol. Driving scenarios varied: road tracking, car following, and an urban scenario including events inspired by real accidents. Statistical analyses were performed on driving parameters as a function of alcohol level.

Automated driving parameters such as standard deviation of lateral position measured with the road tracking and car following scenarios were impaired by alcohol, notably with the highest dose. More controlled parameters such as response time to braking and number of crashes when confronted with specific events (urban scenario) were less affected by the alcohol level.

Performance decrement was greater with driving scenarios involving automated processes than with scenarios involving controlled processes, the study concludes.

Source: Effects of alcohol on automated and controlled driving performances. Berthelon C, Gineyt G. *Psychopharmacology (Berl)*. 2013 Nov 30.

Public Health England to change headline alcohol statistics

Public Health England (PHE) has published a summary of the responses to the 2012 consultation on measuring alcohol-related admissions to hospital.

Last year, a consultation was carried by PHE, the Department of Health and the Health and Social Care Information Centre on the methods used to estimate alcohol-related admissions to hospital. The consultation was driven by an improved understanding of the methodological issues associated with measuring alcohol-related admissions and, linked to that, the need to include the best available indicator on alcohol-related admissions in the Public Health Outcomes Framework (PHOF).

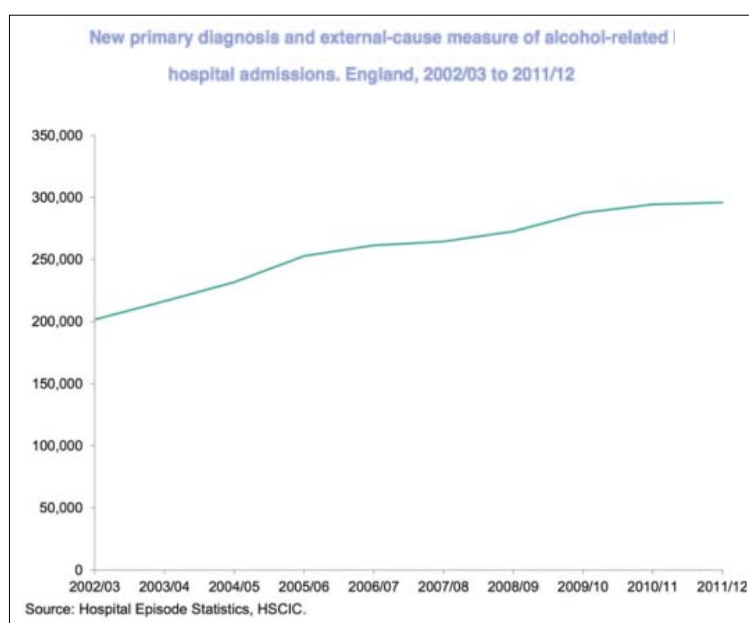
Conclusions of the consultation are that:

- The current method of measuring alcohol-related hospital admissions using primary and secondary diagnosis fields will continue to be published, which gives a measure of the broader impact of alcohol on hospital services. This provides local areas with useful information on the wider impact of alcohol on the health of their population and to evaluate their prevention and treatment response.
- This broader measure will be supplemented by a new measure, which uses primary diagnoses plus mentions of alcohol-related external causes in secondary diagnosis fields. This gives a more

reliable measure of trends in alcohol-related hospital admissions and will be used in the PHOF.

Professor John Newton, PHE Chief Knowledge Officer, said: "Alcohol is one of the leading risk factors for ill-health and causes premature death. If we are to help people lead longer, healthier lives then we need to be able to measure the impact of alcohol consumption on individuals, communities and wider society, so that we understand where attention is most needed. The new Public Health Outcomes Framework indicator on alcohol-related hospital admissions will capture the progress made by local authorities and their partners in reducing alcohol-related ill-health".

The historical trend would appear as illustrated:



Alcohol related hospital admissions in England

NHS hospitals dealt with 15.1 million admissions in 2012-13 - or about 41,500 admissions per day on average across England, according to figures released by Health and Social Care Information Centre (HSCIC) in November.

Admissions per day increased by 1.1% since 2011-12 (15.0 million in total, or 41,000 per day) and by 12.7% since 2007-08 (13.5 million, or 36,800 per day).

The figures are part of an annual report using Hospital Episode Statistics (HES), which provide a breadth of information to a detailed level about NHS-commissioned hospital activity for inpatients.

Hospitals dealt with 295,000 admissions that were wholly attributable to alcohol - a 3.1% (9,420) fall on 2011-12 (304,000).

The NHS figures show that in 2012/13, more than 26,000 men and 12,000 women between the ages of 45 and 49 were admitted to hospital as a result of alcohol, which is the highest figure for any age group. But the steepest rise came among men and women in their sixties, with a 178% rise in admissions of men aged 65 to 69, and a 177% increase in admissions for women aged 60 to 64.

hscic.gov.uk/pubs/hes1213

Increase in the number of UK drivers over the legal limit the “morning after”

In the UK, figures released by LV insurance suggest that ‘Morning after’ drink driving is increasing with more motorists putting themselves and other road users at risk. The figures indicated that arrests between 06:00 am and 08:00am rose by 4% from 350 in 2011 to 363 in 2012. The arrest figures were obtained under a Freedom of Information Act request and were based on replies from 22 of the 45 British police constabularies.

Overall it appears that fewer people drove over the limit; police figures showed that drink-drive offences fell 4% in 2012 compared with 2011.

A further LV= survey of 1,688 drivers showed that 3% had driven while over the legal limit the morning after a drinking session in the last two years. Of these



morning-after offenders, 37% said driving was unavoidable, 26% said they were only going a short distance and 19% thought they were all right to take to the road. The survey showed that 46% of drivers underestimated, or did not know how long, it took for alcohol to leave the body.

A link to ‘The Morning After Clock’, which calculates how long alcohol takes to pass through the body is available on drinkingandyou/site/uk/drive.htm

UK survey - one million motorists drive after consuming alcohol every week

A survey commissioned by Coca-Cola suggests that each week in the UK, up to one million motorists are driving having drunk some alcohol. The findings were released as Coca-Cola launched its annual ‘Designed Driver’ Christmas campaign, offering ‘buy one get one free’ deals in pubs and bars across the UK.

3% of respondents said that they drive after drinking every week - equivalent to a million licence holders across Britain. A third of motorists in the countryside admit they have drunk driven because they are on quieter roads, compared with 16% in urban areas.

Men are twice as likely to drink drive than women. One in seven people admit to drink driving occasionally. The reasons given for driving when it was possible they were over the limit were because they feel sober (33%) and because they are only travelling a short distance (24%).

The survey highlighted that 41% of motorists believed they are legally safe and allowed to drink 2 units of alcohol, with 9% believing 4 units are allowed. One in six designated drivers say they have a glass of wine or a beer before driving.

Balance North East England, TV ads feature tumour in beer glass

A 40-second TV ad showing a cancerous tumour growing in a glass of beer has started playing on screens across the north-east of England.

The campaign by regional alcohol group Balance is designed to shock viewers into realising that heavy alcohol use can increase the risk of some cancers.

As the tumour grows in the man’s beer glass, a voiceover says: “The more you drink and the more often you drink, the more you increase your risk of developing cancer.”

Colin Shevills, director of Balance, said: “We appreciate that this is quite an uncomfortable film to watch,

but evidence tells us that hard-hitting campaigns work and we want to highlight the harms that can be caused by drinking too much, too often.

“Unlike tobacco very few people associate alcohol with cancer and we need these perceptions to change”.



www.balancenortheast.co.uk/our-campaigns/

Campaign – Face Up To Drink

With their 'Face Up To Drink' campaign, UK-based creative marketing agency Sunny Thinking is helping parents understand the effect that drinking too much alcohol can have on children.

The team, commissioned by Manchester Mental Health & Social Care Trust and Manchester City Council, launched the initiative for the start of Alcohol Awareness Week, which ran 18-22 November 2013.

The Face Up To Drink marketing campaign uses colourful childlike drawings to tell stories from the child's perspective of how too much drink can affect family life. The eye-catching and friendly marketing collateral includes leaflets, posters, advertising and a website.

Liz Burns, the Trust's Alcohol Advisor, explained the thinking behind the campaign: "Research estimates

that around one in three children live with at least one parent who binge drinks. Applying current figures to the last census, this would equate to 32,473 children in the city aged 0-15. What we have tried to do is ensure that our message about alcohol's hidden harms reaches out to parents. The style of children's drawings was chosen, as people told us that it was a format parents were used to and comfortable with."



faceuptodrink.co.uk/

DEMOS report on measures to reduce alcohol related harm in the UK

'Sobering Up', a report by the UK think tank Demos, states that Britain has a complicated relationship with alcohol. The authors argue that despite evidence that overall alcohol consumption has fallen in the last decade, it is clear that some communities suffer from severe problems related to underage drinking, the harms of binge drinking and dependent street drinkers. According to the report, the Government has not brought forward a strong national policy and in its absence, local authorities and Health and Wellbeing Boards who hold responsibility for public health will now lead the way. The report investigates what is already happening in communities across the UK and highlights best practice in the hope it will become wider spread.

In particular, the report focusses on the role of shops and incorporates the views of local councillors, council officers, public health representatives, police, trading standards, alcohol support charities and shop owners

and workers. Case study areas – Blackpool, Ipswich, Manchester, and Kent – are also included, chosen for their mix of alcohol-related problems, as well as their geographical and demographic range.

The report maintains that each problem, in each community, is different and should be treated as such. However, some examples of best practice stand out. It recommends tackling the growing problem of proxy-purchasing through greater community policing of the offence and tougher punishments for those caught. Further, it suggests that city centres troubled by binge drinking should do more to restrict access to those already very drunk. It also advocates more local partnerships to ensure local authorities, police and retailers are joined up – and that real effort is made to engage small retailers as well as the large chain retailers. Each of these measures could make a real contribution to tackling the alcohol-related harms that Britain still faces.

demos.co.uk/publications/soberingup

West Midlands police offer a reward for reporting drink drivers

A £200 reward is being offered to members of the public who report intoxicated drivers to the police over the Christmas period. The reward will be given if the driver is eventually charged and prosecuted.

Inspector Greg Jennings, of WMP, said: "It is the same story every year, people think it is acceptable to have a few drinks with their family or friends and then

get behind the wheel... In many cases they wouldn't dream of drink driving, or taking drugs, at other times of the year but they lose their common sense at Christmas.

"We are now urging anyone who is aware of people breaking the law to pick up the phone and report selfish individuals."

SABMiller helps licensed premises tackle irresponsible drinking

SABMiller has made a new individual pledge as part of the UK Government's Public Health Responsibility Deal on alcohol. The pledge says that by 2016 SABMiller will have provided scholarships for 10,000 people employed by small and medium-sized licensed businesses in the UK. Ofqual-accredited, these scholarships will provide recipients with a qualification in responsible retailing, empowering them to enforce the 2003 Licensing Act with confidence.

Training in small to medium-sized pubs and off-licences is often ad hoc and of varying quality. The SABMiller Scholars Programme, run by the BII, has been designed to give staff an understanding of the tightly-regulated legal framework they operate in and the confidence to deal with an aggrieved customer who is unhappy at being refused alcohol because they are either drunk or underage.

Focusing the programme on areas of the country identified by the Home Office as being most in need of alcohol-related support, SABMiller will also appoint independent external advisors with expertise in local community engagement to oversee the running of the programme and ensure its effectiveness.

Launching the first Bedfordshire SABMiller Scholars Programme, Christine Thompson, UK Government Affairs Manager for SABMiller, said: "This course helps small businesses unlock the impact their staff can have on preventing under-age drinking and anti-social behaviour in their area. They do an important job and we want to make sure they have the confidence to do it properly."

Denise Thomson, Deputy Director, British Institute of Inn-keeping Awarding Body, said:

"The current economic climate can make it difficult for small businesses to invest in training, but the scholars programme gives them the opportunity to develop their staff and in turn become better businesses. There's benefit for the individuals too as they become more employable within the sector even if they leave the business which trained them."

SABMiller has funded the programme annually since 2009 but positive feedback has led SABMiller to extend it for three years meaning an extra 6,000 people will be trained by 2016.

Children most likely to be given alcohol by family and friends at Christmas

An ICM survey of over 1,000 parents and their children aged 10-14 in the UK reveals that despite 84% of parents saying that they will not give their child a whole alcoholic drink at Christmas and New Year, 22% expect their child will get it from a relative or family friend.

17% of 10-14 year olds say they have been given a whole alcoholic drink by their parents and 21% report being given a drink by someone else including a family member, relative or friend during the festive season. Although some parents acknowledge that family or friends may be supplying their children with alcohol, 67% said that they are not concerned about their children's exposure to alcohol over Christmas and New Year.

Elaine Hindal, Chief Executive, Drinkaware says: "Despite the majority of parents saying they won't give their children alcohol during the festive season, there's a chance that someone else will, so it's important to let your family and friends know what you have agreed with your child. Drinkaware's advice is clear, alcohol should not be drunk underage and parents are best placed to enforce this. They can do this by being prepared to talk to their children about alcohol and letting them know they disapprove of underage drinking."

UK legislation to tackle alcohol fraud

The UK Government has announced its intention to proceed with the introduction of wholesaler registration and due diligence following the recent consultation "Alcohol Fraud Next Steps".

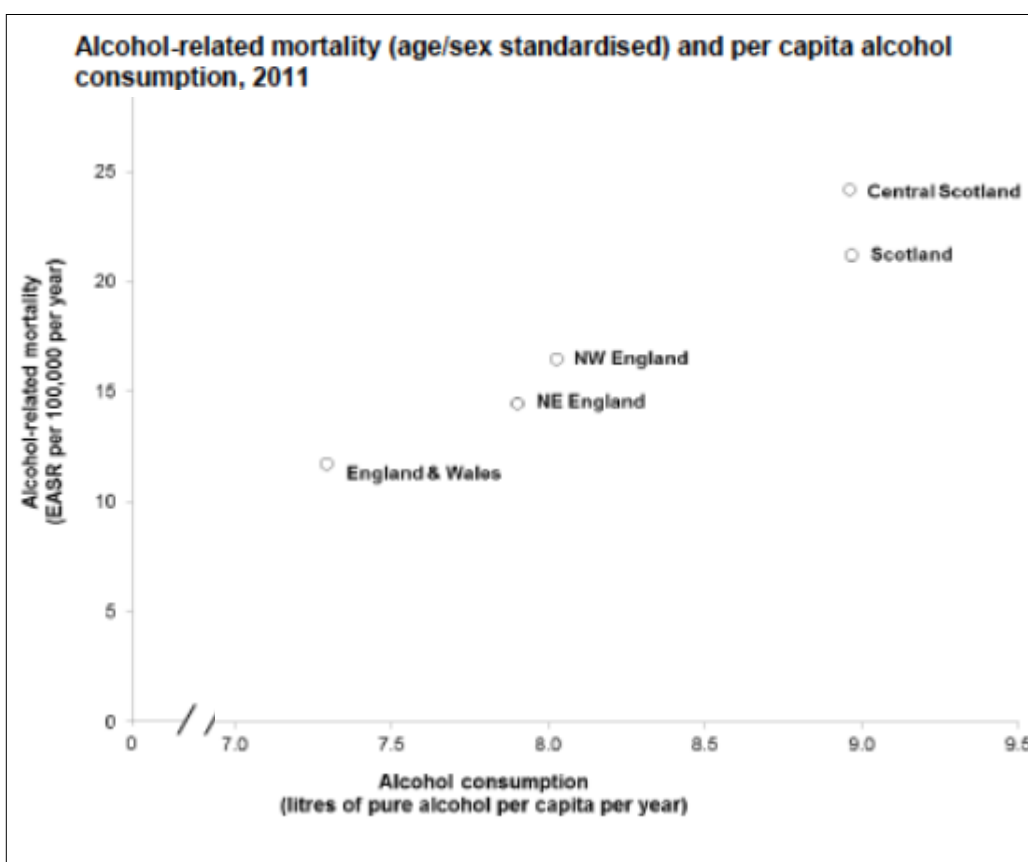
It is still intended that the Government will publish the full summary of responses to the consultation in January. The wholesaler registration will be legislated for as part of the Finance Bill 2015 process, with a formal consultation on actual draft legislation next autumn.

Following legislation, applications will be invited to register in early 2016 and the full compliance requirements of the scheme would then go live spring 2017.

MESAS Regional alcohol sales and alcohol-related mortality comparing Scotland with the rest of the UK

A MESAS report, published as part of NHS Health Scotland's commitment to monitoring and evaluating Scotland's Alcohol Strategy, assesses population levels of alcohol consumption based on retail sales data in Central Scotland, North West and North East England, comparing with levels of alcohol-related mortality.

The report shows that in 2011, 23% more alcohol was sold per capita in Scotland (9.0L) than in England & Wales (7.3L). At regional level, per capita sales were 13% and 12% higher in Central Scotland (9.0L) than in NE England (7.9L) and NW England (8.0L), respectively.



Compared with England & Wales, per capita sales in NE England and NW England were 8% and 10% higher, respectively. Consistent with national comparisons, spirits accounted for a much higher market share in Central Scotland than the regions in Northern England.

In 2011, alcohol-related mortality was 80% higher in Scotland than in England & Wales. At regional level, alcohol-related mortality in Central Scotland was 14% higher than the Scotland average, 67% higher than NE England, and 47% higher than NW England.

Alcohol-related mortality rates in NE and NW England

were 23% and 40% higher than the England & Wales average, respectively.

Regional comparisons of alcohol-related mortality and previously unavailable alcohol retail sales data in Scotland and Northern England show that alcohol-related mortality is generally higher in areas with higher per capita alcohol consumption levels. However, for Central Scotland the relationship is more complicated; the region has a higher level of alcohol related mortality than Scotland as a whole despite similar consumption levels.

healthscotland.com/documents/22520.aspx

ETSC road safety manifesto for the 2014 European Parliament elections

ETSC has identified driving under the influence of alcohol or drugs as one of the four priority areas for action during the mandate of the next European Parliament. The other areas are speeding, infrastructure safety and the safety of the vulnerable road users.

Mr Avenoso, ETSC Executive Director called on MEPs to support new policies and the extension of

existing initiatives in these areas to address the most significant risk factors on EU roads. A Directive setting a zero tolerance to drink driving for all drivers, alcohol interlocks for repeat offenders and professional drivers and common techniques for roadside drug driving enforcement.

etsc.eu/documents/EP_Election_PR.pdf

Drinkaware.ie and RSA prompt consumers to remember 'morning after' if driving over christmas period

Drinkaware.ie and the Road Safety Authority are reminding all drivers to remember the 'Morning After' when they are out celebrating over the Christmas period. According to official Garda figures, over 400 incidents of "drivers under the influence" were detected in the hours of 8 am to 1 pm on Saturday, Sunday and Monday mornings in the period from January 1st to September 27th 2013. In that period, a total of 101 such detections were made by Gardai on Saturday mornings, and 208 on Sunday mornings (more than five times the mid-week detection rate). On Mondays a total of 94 incidents of "drivers under the influence" were reported. Half of the drivers involved were less than 35 years old, peaking in the 30-34 age group.

Originally launched in 2007, the campaign communicates two key pieces of information; what a standard drink is and; the length of time it takes the body to eliminate it.

The campaign's success in raising awareness around these key issues was highlighted in January 2013 research showing:

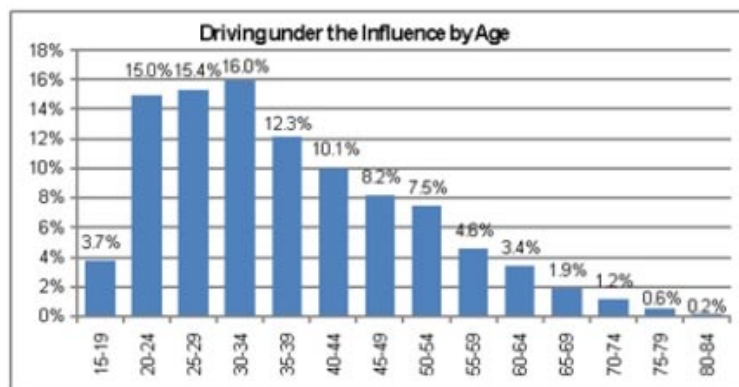
- 61% of respondents now know the correct definition of a standard drink compared with 47% in 2008.
- The percentage of respondents who know the length of time it takes the body to eliminate one standard drink has increased sharply, from 16% in 2008 to 51% in 2013.

The campaign's creative will be delivered through national and local radio and for the first time, will also be supported with digital media on sites Facebook,

entertainment.ie and the journal.ie, with ads timed to be delivered during those critical hours of the Morning After. A washroom campaign in licenced premises will also support the campaign. The key campaign messages; what a standard drink is and; the length of time it takes the body to eliminate it, will also be included on over two million Ticketmaster tickets.

John Caulfield, Interim Chief Executive, the Road Safety Authority commented, "The majority of people are doing the right thing and leaving the car keys at home when heading out for a few drinks... However ... These very same people are unaware that with the introduction of the new lower drink drive limits, when they get behind the wheel the next morning they could still have alcohol in their system, and still be unfit to drive."

drinkaware.ie



Stiva Symposium on responsible alcohol marketing

On November 15th, more than 150 professionals from the alcohol industry attended the STIVA Annual Symposium on responsible alcohol marketing place in Amsterdam.

The symposium focussed on the upcoming change of the Advertising Code for Alcoholic beverages in the Netherlands. The change raises the age limit for the sale of alcohol to 18-year from 1 January 2014. To this end, the obligatory logos 'Not 16? Not a drop' will be replaced by 'Not 18, no alcohol'.

Ebba Hoogenraad Hoogenraad & Haak Advertising + IP lawyers has explained the main consequences

of the amendments to the Code and Michel van der Voort, director of SPOT, gave a presentation on the developments on the TV and the media exposure of young people to alcohol advertising.

stiva.nl/nieuwsberichten/grote-belangstelling-voor-het-stiva-symposium-verantwoorde-alcoholmarketing/



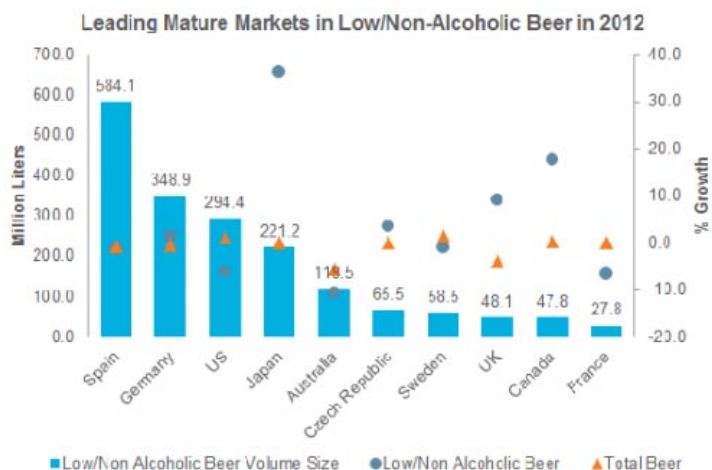
Spaniards lead consumption of non-alcoholic beer

A new study from Euromonitor International highlights that Spain is the highest consumer of low alcohol and non-alcoholic beer in Europe.

The wine-centric country has pulled ahead of traditional beer drinking nations like Germany, the Czech Republic and the UK in the consumption of alcohol-free ale and is even beating the Middle East, where alcohol consumption can be socially unacceptable and in some cases illegal.

One reason could be Spain's relatively strict drunk driving laws, but as highlighted in the report, growth rates in the consumption of low and alcohol-free beer were actually rising at a faster pace before the laws were introduced in 2007. The social culture in Spain, where consuming alcohol is more to do with mingling than getting drunk, may play a part. Spain's reduced alcohol consumption could also tie into health fads; in Spain organic and health food sales continue to grow despite the country's economy.

blog.euromonitor.com/2013/11/as-good-as-it-gets-low-non-alcoholic-beer-in-mature-markets.html



Agreement reached on new EU health programme

The negotiations on the Third Multiannual Health Programme for the 2014-2020 period have been ongoing in 2013 between the European Commission, the Council and the European Parliament. Political agreement on the outstanding issues was reached in November. It is now expected that the new Health Programme will be adopted in Spring 2014. It aims to encourage innovation in healthcare, increasing the sustainability of health systems, improving the health of EU citizens and protecting them from cross-border health threats. The programme will have a budget of up to EUR 449.4 million and builds on the two previous programmes covering the periods 2003-2008 and 2008-2013.

Compared to the former programmes the new one concentrates support on a smaller number of activities in priority areas, in line with the Europe 2020 strategy. More specifically, it seeks to complement member states' health policies in the following four areas: promotion of good health and prevention of diseases (eligible actions include the exchange of good practices for addressing risk factors such as smoking, harmful use of alcohol, unhealthy dietary habits and physical inactivity); protection from cross-border health threats; innovative and sustainable health systems; increased access to better and safer healthcare.

consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/lsa/139490.pdf

ABAC Marketing guide in Australia

The Management Committee of the Alcohol Beverages Advertising Code (ABAC) has published a guide, "Best Practice for the Responsible Marketing of Alcohol Beverages in Digital Marketing".

ABAC, as an industry content code, already covers digital marketing. However, there is currently no guidance to advertisers in how to best manage the placement of alcohol advertising through digital marketing. In response, ABAC has developed best practice advice to assist the alcohol industry in

maintaining high standards of social responsibility. The advice is intended as guidance to assist alcohol advertisers and agencies in the management of digital marketing particularly relating to age-affirmation and moderation of user generated content.

Because digital marketing and social media is evolving rapidly and the best practice advice will be reviewed on a regular basis and updated where necessary.

abac.org.au/publications/best-practice-guides/

IREB summary on alcohol and young people

The Institute for Scientific Research on Beverages (IREB) has published a summary of recent work on the issue of alcohol consumption among young people and prevention methods available. This summary appears in the Focus Alcohol collection (No. 16) and has communications updates from eleven European researchers presented at the latest scientific Day on this subject.

Marie Choquet, President of the Scientific Committee of the IREB commented, "What seems to have changed in the alcohol use among teens today is that they are more numerous in the past ten years use alcohol as a drug, that is to say, to be used exclusively for its psychotropic effect. This phenomenon seems to fade with age, but can affect immediate or long-term on the brain. There is also good news : prevention is possible and effective if it is based on life skills, if it develops early in school and if it involves parents and educators."

In the summary, scientists, researchers, clinicians and professionals approach different issues of alcohol use among adolescents: recent epidemiological findings, difficulty of care, the health effects of specific alcohol abuse, and methods of prevention. The conclusion of the document describes the scientific consensus on the need to further research and improve knowledge, both in the field of short-and medium term occasional alcohol abuse on the brain than in the evaluation of prevention strategies.

www.ireb.com

US traffic fatalities up slightly in 2012

According to data released in November by the National Highway Traffic Safety Administration (NHTSA), there was a 3% increase in fatalities on US highways in 2012 (33,561). Despite this, deaths remain at historic lows.

Among the other findings: Deaths related to driving under the influence of alcohol jumped 5%, to 10,322, with most incidents involving drivers with blood-alcohol levels over twice the legal limit of 0.08. Mississippi topped the list of states that saw the biggest reduction in auto-related fatalities, while New Jersey saw the biggest decline in alcohol-related fatal accidents.

US students asked to 'Lead the Break' in spring 2014

The BACCHUS Network held its annual General Assembly at the Hyatt Regency Hotel in Reston, Virginia in November, sponsored The Century Council. Hundreds of peer educators and peer education programme advisers gathered to share, develop and discuss new ideas on how to improve peer education.

The Century Council also announced a new partnership with The BACCHUS Network and joint plans to address the issue of high-risk drinking on college campuses.

According to the Century Council' popular perception among the public regarding spring break is of kids heading to beaches and engaging in risky behaviour, which could lead to dangerous situations. But, we know those students are not always the majority. In fact, many students find part time jobs during spring break, volunteer in the community or just enjoy spending time with family over spring break'.

Students will be asked to lead the effort to empower their peers and shine a light on the real spring break. The 'Lead the Break' contest will provide students with an opportunity to post photos and videos on Instagram showing how they can have a safe, responsible and fun spring break. A panel of judges will then choose the best entries and select three winners. There will be three prizes, which include a monetary contribution from The Century Council to each of the three winner's BACCHUS Network chapter.

The contest will run from March until the end of April. The BACCHUS Network and The Century Council will host a webinar at the beginning of February to inform students on how to enroll in the contest and provide further details.



Ottawa private member's bill to allow for random breath tests

A Private Member's Bill, introduced in November by New Democrat Member of Parliament Tarik Brahmī, would amend the Criminal Code of Canada to enable police to demand a breath sample from drivers, as long as the police officer has an approved screening device in his or her possession; and enable police to demand a breath sample from any driver they have reasonable grounds to suspect was operating a motor vehicle that has been involved in a crash resulting in death or bodily harm to another person. Further, if police cannot identify the driver with certainty, they may demand a breath sample from any person that they have reasonable grounds to suspect was operating the vehicle.

According to MADD Canada, the proposed amendment to add random breath testing provisions to the Criminal Code will significantly reduce impaired driving in Canada, saving hundreds of lives and preventing thousands of injuries each year,

MADD Canada estimates that random breath testing would reduce impairment-related crash deaths and injuries by 20% in Canada annually. That's approximately 200 lives saved and more than 12,000 injuries prevented each year.

Random breath testing has achieved significant and sustained reductions in impaired driving crash deaths in New Zealand, Australia and most European countries. Random breath testing – along with several other measures to reduce impaired driving – was recommended by the Standing Committee on Justice and Human Rights in 2009 and was subsequently accepted in principle by the Government.

US colleges adopt 'good samaritan' policies for drug and alcohol emergencies

The University of Miami is one of a growing number of colleges that have instituted "Good Samaritan" policies to encourage students to call 911 when they are with someone who may be in danger due to consuming drugs or alcohol. The policies state any student who calls campus police or another emergency service to help another student with a drug- or alcohol-related medical issue will not face legal consequences.

Schools that have recently passed Good Samaritan policies include the College of William & Mary, Franklin Pierce University, University of Connecticut, University of Maryland, Ithaca College, Columbia University and University of Georgia, but more than 11 states have Good Samaritan laws. According to Students for a Sensible Drug Policy, there are more than 240 colleges and universities with some form of a 911 Good Samaritan policy on the books. Half of the policies cover situations involving all substances, while the rest cover only those involving alcohol.

According to Charlie Shreiber, senior and student body president at the University of Miami, there have been 30 reported cases on the campus of overdose or alcohol abuse this semester. **"The moment a student picks up the phone to call campus police, this policy is in place,"** he said. **"The fear of retribution is what we need to alleviate."** The college newspaper reported three students died as a result of substance abuse in the last year.

Wine cellar uncovered in Israel after 4,000 years

Scientists have unearthed a 3,700-year-old wine cellar thought to be the oldest in the world amid the ruins of a Canaanite palace in Israel. The cellar, containing 40 ceramic jars each large enough to house 13 gallons, was discovered in palace ruins near the town of Nahariya in northern Israel. A chemical analysis of samples from ceramic jars found at the site has revealed the sophisticated winemaking techniques of the time. All of the jars were unmarked and of a similar design, implying that they were made by the same potter.

Researchers, who analysed residues from the jars, believe they contained sweet wine reserved for banquets. There were signs of a blend of ingredients that may have included honey, mint, cedar, tree resins, juniper berries and cinnamon bark.

An expert in ancient winemaking, said that the discovery 'sheds important new light' on winemaking in ancient Canaan, with Canaanite winemaking techniques later spreading to Egypt and across the Mediterranean.

Car locks for drink-drivers in Western Australia

Thousands of West Australians could have breath-testing immobilisers fitted to their cars under a State Government plan to cut the drink-driving death toll.

The proposed alcohol interlock system would be fitted to cars driven by anyone caught with a blood alcohol concentration of 0.15, anyone who had more than one 0.05 offence in five years and anyone who refused a breath test. Last year, there were about 2000 people caught above 0.15 and the Government predicts another 2300 would be caught for being over 0.05 for at least the second time.

Drivers would have to blow into a tube fitted to their car's ignition system, which would work only if they registered under 0.02. The system would be calibrated to need another breath test at random intervals during the journey to prevent drink-drivers getting friends to blow for them. Failure to provide the second sample could trigger hazard lights or horns to attract attention of other drivers or the police.

Every 28 days, drivers would have to submit their interlock system to the Department of Transport, which would download its memory. This would show

whether there had been attempts to tamper with the system or whether a driver had tried to drive with a blood alcohol level above 0.02. For many, this is less than one standard drink. Those who had made three or more attempts to drive over 0.02 would be compelled to attend an alcohol intervention program to be run by the Drug and Alcohol Office.

Drivers will still have to pay fines and will have the interlock devices fitted for at least six months after serving their suspension. Extraordinary licences will be granted only if the interlock system is used. The scheme would also be compulsory for drivers whose licence had a zero-alcohol restriction such as heavy haulage, taxi or provisional drivers but who had been caught above 0.02. If police catch a driver involved in the scheme driving a car not fitted with the device, the vehicle would be impounded for a minimum of 28 days.

Police Minister Liza Harvey said mandatory interlocks were shown to cut repeat drink-driving by about 64%. She said that it is hoped legislation would be introduced in the second quarter of next year.

New Zealand targets lower-alcohol wine market

New Zealand wants to be the world's leading producer of high quality low-calorie and lower-alcohol wines. The country's Ministry for Primary Industries has teamed up with the wine industry to launch a major research programme into the category, which has been named "lifestyle wines".

It is the biggest research and development project the country's wine trade has ever undertaken.

The ministry's Justine Gilliland said: "We're excited by this programme providing the opportunity for further innovation in the wine industry, and the potential to strengthen New Zealand's reputation as a supplier of some of the world's finest wines."

Wineries including Constellation NZ, Forrest, Giesen, Mud House, Pernod Ricard NZ and Villa Maria have invested in the NZ \$16.9 (£8.5 million) programme alongside the government.

One of its aims is to develop viticulture and winery tools to service the rapidly growing market for lower-calorie and lower-alcohol wines with high quality, naturally-produced products.

New Zealand Winegrowers chief executive Philip Gregan said: "This programme will capitalise on the domestic and international market demand for high quality, lower-calorie and lower-alcohol 'lifestyle' wines by developing new, natural techniques for grapevine growth and wine production utilised across the New Zealand Wine Industry.

"Our point of difference will be producing premium wines that can be naturally produced using sustainable viticultural techniques and native yeasts — providing an important point of difference to existing processing methods.

"The programme will produce tangible outcomes for the grape and wine industry and the economy as a whole."

Diageo drink drive campaign

A car made out of Johnnie Walker glasses is smashed to bits as part of the Diageo-owned brand's anti-drink driving campaign timed to coincide with the festive period.

Inspired by the fragility of glass, the 90-second CGI film shows a Vodafone McLaren Mercedes F1 car being formed entirely out of Johnnie Walker whisky glasses. A voiceover describes how a split second decision can be the difference between finishing 'first, last or not at all' at which point the car appears to crash and shatters into pieces.

The campaign aims to gather an additional 1m pledges to 'Join The Pact' to never drink and drive, with each virtual glass engraved with the hashtag #ImNOTdriving, which consumers are being asked to use to show their commitment to the cause.

youtube.com/watch?v=_eM7MLrQI-0



Twitter to roll out age-gating tool

Twitter has improved its age-gating system in a bid to help a wider range of drinks suppliers stop underage users receiving alerts about alcohol.

Free age-gating systems have been in place for the past couple of years on the social media site, but they are only available to a select number of brands that spend money to advertise with Twitter. But it is now in the process of rolling out the tool to the wider trade. An administrator of an alcohol brand's account will be able to call an access team or visit a help page and join the list of brands that are using the system, including Heineken, Bacardi and Jim Beam.

"Our hope is that this approach to age-screening will enable alcohol brands to responsibly and safely connect with the right audience," said Twitter in a blog post. "Alcohol brands can safely grow their of-age network of Twitter followers in a way that's simpler than before."

However the biggest criticism the site has received is that underage users can easily bypass the system by entering a false date of birth. Users that try to follow an alcohol producer are immediately send a direct message asking them to confirm their age within 24 hours by entering a date of birth. Once a user is age-checked, they will not have to repeat the process with other brands.

Chinese consumers drink wine primarily for its health benefits

In a presentation on Chinese consumer behaviour at Hong Kong International Wine & Spirits Fair, Dr Justin Cohen, research fellow at Ehrenberg-Bass, shared results of a survey of 913 upper- and middle-class urban Chinese citizens aged 18 to 50.

The most important motivation for drinking wine in China is that wine is good for your health. The second most important reason drinking wine was 'it helps me relax', followed by 'it creates a friendly atmosphere' and 'I like the taste'.

Explaining the results of the research, Cohen noted that the Chinese surveyed by Ehrenberg-Bass repeatedly stressed that they believe that wine is good for their bodies. "In China, wine consumers are saying they drink wine to help them go to sleep, or because it's good for their skin, but things like it goes with food, or it makes me feel sophisticated, are less important than we think."

It is specifically red wine that is bought for its perceived health-giving properties in China, but Chinese consumers also prefer the taste of red wine over white. "Red wines were loved by almost everybody," he said, noting the use of positive descriptors such as "fruity", "sweet aftertaste", and "strong". White wines on the other hand were more commonly described as "sour" and "astringent", he added.

"We constantly hear that, for example, Riesling is great with Szechuan food, but from my experience the reality is that people in China really have a problem with white wine."

Summing up he said, "That problem is temperature – white wine is cold, and the Chinese, even when they drink water, it's warm... they have trouble tasting white wine simply because of the temperature."

AIM – Alcohol in Moderation was founded in 1991 as an independent not for profit organisation whose role is to communicate “The Responsible Drinking Message” and to summarise and log relevant research, legislation, policy and campaigns regarding alcohol, health, social and policy issues.

AIM Mission Statement

- To work internationally to disseminate accurate social, scientific and medical research concerning responsible and moderate drinking
- To strive to ensure that alcohol is consumed responsibly and in moderation
- To encourage informed and balanced debate on alcohol, health and social issues
- To communicate and publicise relevant medical and scientific research in a clear and concise format, contributed to by AIM's Council of 20 Professors and Specialists
- To publish information via www.alcoholinmoderation.com on moderate drinking and health, social and policy issues – comprehensively indexed and fully searchable without charge
- To educate consumers on responsible drinking and related health issues via www.drinkingandyou.com and publications, based on national government guidelines enabling consumers to make informed choices regarding drinking
- To inform and educate those working in the beverage alcohol industry regarding the responsible production, marketing, sale and promotion of alcohol
- To distribute AIM Digest Online without charge to policy makers, legislators and researchers involved in alcohol issues
- To direct enquiries towards full, peer reviewed or referenced sources of information and statistics where possible
- To work with organisations, charities, companies and associations to create programmes, materials and policies built around the responsible consumption of alcohol.

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