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Nicaragua

In Nicaragua, the alcohol sector has reportedly agreed to a voluntary alcohol advertising code. The Unique Code of Advertising Self-Regulation includes rules on broadcast and print advertisements and principles on underage youth protection. Under the code, televised alcohol ads should not be aired between 2am and 6pm.

Russia

In Russia, a ruling party MP has drafted a bill banning online sales of alcohol. Viktor Zvagelsky claims that internet alcohol sales are increasing and poses a risk to state regulation. He argues that online sales of alcohol put the lives and health of Russian citizens at risk as they facilitate sales of low quality and counterfeit liquor, and potentially violate the ban on alcohol sales to minors. Internet traders can also bypass some regional restrictions concerning the times that alcohol can be sold.

Also in April, the Russian government approved a state programme on healthcare development. Among the programme's main objectives are to decrease average alcohol consumption from current 13.5 litres of pure alcohol per person per year (2013 data) to 10 litres by 2020.

The Health Ministry plans to achieve this goal by motivating the population towards healthier lifestyle choices.

Indonesia

Indonesia's Ministry of Commerce issued a new regulation in April as an attempt to control and oversee procurement and distribution, as well as sale of alcohol in Indonesia. Under the new regulation, sale of alcoholic beverages in the retail market can only be done through retailers in duty free shops, or places specified by the regent, mayor, or governor to specific areas.

China

China and France have signed a joint declaration of intent to curb the sale of counterfeit wine and distilled spirits products in China. French wine and spirits exports to China were valued at EUR €836 million in 2013, but it has been estimated that as much as 70% of wine sold in China is fraudulent, and a recent survey found that 44% of Chinese consumers were discouraged from purchasing wine due to concerns about authenticity.

Kenya

More than 60 people are reported to have died in Kenya after drinking homemade alcohol believed to have been laced with industrial chemicals. Dozens of others are said to have been blinded after drinking the illicit brew in four counties.

Officials say it may have contained methanol - a toxic substance used to boost the strength of the drink. Consumption of homemade brew is popular in Kenya, where most people cannot afford to buy standardised alcohol. The deaths were reported in Embu, Kitui, Limuru and Kiambu counties.

Underreporting of alcohol intake affects the relation of alcohol to the risk of cancer

Klatsky AL, Udaltsova N, Li Y, Baer D, Tran HN, Friedman GD. Moderate alcohol intake and cancer: the role of underreporting. *Cancer Causes Control* 2014; on-line publication; DOI 10.1007/s10552-014-0372-8 2014.

Authors' Abstract

Purpose There is compelling evidence that heavy alcohol drinking is related to increased risk of several cancer types, but the relationship of light-moderate drinking is less clear. We explored the role of inferred underreporting among light-moderate drinkers on the association between alcohol intake and cancer risk.

Methods In a cohort of 127,176 persons, we studied risk of any cancer, a composite of five alcohol-associated cancer types, and female breast cancer. Alcohol intake was reported at baseline health examinations, and 14,880 persons were subsequently diagnosed with cancer. Cox proportional hazard models were controlled for seven covariates. Based on other computer-stored information about alcohol habits, we stratified subjects into 18.4% (23,363) suspected of underreporting, 46.5% (59,173) not suspected of underreporting, and 35.1% (44,640) of unsure underreporting status.

Results Persons reporting light-moderate drinking had increased cancer risk in this cohort. For example, the hazard ratios (95% confidence intervals) for risk of any cancer were 1.10 (1.04–1.17) at 1 drink per day and 1.15 (1.08–1.23) at 1–2 drinks per day. Increased risk of cancer was concentrated in the stratum suspected of underreporting. For example, among persons reporting 1–2 drinks per day risk of any cancer was 1.33 (1.21–1.45) among those suspected of underreporting, 0.98 (0.87–1.09) among those not suspected, and 1.20 (1.10–1.31) among those of unsure status. These disparities were similar for the alcohol-related composite and for breast cancer.

Conclusions We conclude that the apparent increased risk of cancer among light-moderate drinkers may be substantially due to underreporting of intake.

Potential Conflict of Interest: The first author of this paper is a member of the International Scientific Forum on Alcohol Research. He has not contributed to this review. However, readers of our comments may wish to take this fact into account when interpreting the conclusions of the review.

Forum Comments

Epidemiologists are often faced with adverse effects of alcohol among subjects reporting very low levels of consumption, levels that physiologically should not adversely affect health. It is often assumed that at least some of the subjects reporting low levels of intake may be underreporting their actual intake, but heretofore it has been difficult to judge this.

As reported in this paper, Klatsky and his associates, using the very large cohort of the Kaiser Permanente Medical group (more than 100,000 subjects), have developed an approach of estimating which subjects may be underreporting their consumption. The approach is based on numerous reports over time for alcohol intake, liver enzymes, and the occurrence of medical conditions known to result from excessive alcohol consumption. For example, subjects classified as likely underreporters had diagnoses such as alcoholic psychosis, alcohol dependence syndrome, alcohol abuse, alcoholic polyneuropathy, alcoholic gastritis, or alcoholic liver disease either prior to or following their reported 'moderate' intake. Based on the occurrence in the computer-stored data of more than one such diagnosis, there were 23,363 inferentially 'Likely underreporters'; of these 13,995 (59.9 %) reported heavier drinking on another questionnaire, 14,717 (63.0 %) had an ARD and 5,349 (22.9 %) had both.

Persons with at least two computer-stored examinations (index measurement and at least one other before or after) and no indicator of being likely underreporters were classified as unlikely to be underreporting their alcohol intake; this group made up almost one-half of the total cohort. Persons with only one computer-stored alcohol intake report were classified as 'Unsure' with respect to underreporting.

A total of 14,880 subjects in the cohort developed cancer during follow up. When the alcohol intake of moderate drinkers was related to the risk of cancer, there were large differences according to whether or not the subject had been suspected of being an underreporter of their alcohol intake. For example, among subjects reporting 1-2 drinks/day, the likely underreporters showed an increased relative risk of any cancer [RR 1.33, 95% CI (1.21–1.45)], in comparison with non-drinkers, while those unlikely to be underreporting their intake showed no increase in risk of any cancer [RR 0.98, (95% CI 0.87-1.09)]. Those subjects with only one computer-stored alcohol intake report were categorised as 'unsure' with respect to underreporting; they had an intermediate risk of developing cancer.

Similar results were seen for alcohol-related cancer as for any cancer. Also, the risk of breast cancer among women was less than one-half as high

among moderate drinkers who were unlikely to be underreporters of their alcohol intake as among those considered likely to be underreporting their drinking.

For epidemiologic studies (such as the Kaiser-Permanente Study) that have extensive longitudinal data on all medical conditions, this approach could be an extremely valuable way of seeking the true relation between light to moderate alcohol intake and a variety of health outcomes.

Specific comments on this study: Forum members were in agreement that this paper makes an important contribution to our ability to interpret associations between reported alcohol intake and the risk of cancer. It is based on a very large cohort, followed over 18 years, with essentially full ascertainment of the development of cancer. The particular attribute of the study that is most important is the recording of a large number of diagnoses known to relate to heavy alcohol consumption (e.g., alcohol dependence syndrome, alcohol abuse, alcoholic polyneuropathy, alcoholic gastritis, or alcoholic liver disease). Further, for many subjects, measurements of liver enzymes provide an objective index of alcohol misuse. Thus, subjects categorised as likely to be underreporters of alcohol intake had other reports in the database supporting excessive alcohol use.

The authors of this report have previously reported that the supposedly 'light-to-moderate drinkers' in their cohort who had evidence of being 'likely underreporters' of alcohol intake more frequently were found to have hypertension than those considered to be unlikely underreporters (Klatsky et al, Higher prevalence of systemic HTN among moderate alcohol drinkers: exploring the role of under-reporting. *J Stud Alcohol* 2006;7:21-428). The fact that this current application of the same approach also separates subjects for their risk of cancer strongly supports the merits of the procedure. Indeed, it could be important for other epidemiologic studies with similar data on alcohol-related conditions to evaluate their moderate drinkers using such an approach.

Stated Forum reviewer Finkel: "It has seemed to me for some time that there has been a rush to judgment in many quarters incriminating moderate drinking as a cause or promoter of numerous cancers. There likely also has been too eager an acceptance of likely trivial statistical suggestions of drinking protecting from various cancers. The truths we seek are obscured by

confounders, and thus conflicted and confusing. This paper renders a real service by beginning to dispel some of the murk. It sharpens the focus, enhancing understanding that simple errors have led to major misconceptions. In addition to illuminating in part the complex engendering of cancers, this correction should give pause to those who too eagerly embrace the results they desire."

Reviewer Waterhouse agreed: "My observation is that the triggers for being a likely underreporter suggest substantial or severe underreporting in that group. This leads me to conclude that it is probable that the unlikely group may also include modest underreporting (as suggested by the authors). The scope and severity of the problem as revealed here strongly indicates that further investigation into this phenomenon is needed."

Forum member Goldfinger adds: "This paper, and its common sense deductions regarding association of disease with mild to moderate alcohol consumption, demands caution when trying to ascribe causation of serious medical complications to a lifestyle habit that may not be true, and in fact may be otherwise beneficial."

Reviewer Skovenborg stated: "Self-reports of alcohol consumption may be called into question because of the discrepancy between alcoholic beverage sales data and survey reports of alcohol consumption. In general, comparison studies in the alcohol literature have shown that self-reported alcohol consumption accounts for only 40-60% of alcoholic beverages sold as measured by sales and tax data (Midanik L. The validity of self-reported alcohol consumption and alcohol problems: a literature review. *Br J Addict* 1982;77:357-82).

"Some groups of drinkers, defined either by demographics or drinking level, may bias their reports differently. Underreporting of alcohol intake may be explained by response errors, e.g., difficulties in recall of drinking practices and culturally determined socially desirable answers. To advise the public on 'sensible' limits of alcohol intake, methods are needed that properly rank individuals according to alcohol intake and also assess correctly the absolute level of intake (Feunekes GJ et al. Alcohol intake assessment: The sober facts. *Am J Epidemiol* 1999;150:105-112)."

Forum member De Gaetano wondered if the two groups (underreporting and unlikely to underreport)

would still appear to be protected against cardiovascular events and total mortality. If so this would suggest that (1) real moderate consumption protects against cardiovascular disease, an effect not counterbalanced by increased cancer risk; and (2) false moderate consumption (due to underreporting) increases cancer risk, but the effect may still be counterbalanced by reduced cardiovascular risk."

Reviewer Ellison adds: "These reasons may explain the results of Le Strat and Gorwood (Le Strat Y, Gorwood P. Hazardous drinking is associated with a lower risk of coronary heart disease: results from a national representative sample. *Am J Addict* 2011;20:257-263. doi: 10.1111/j.1521-0391.2011.00125.x), in which the authors conclude that alcohol may be cardioprotective not only in individuals who drink moderately but also in those who drink amounts traditionally considered to be hazardous. However, the method used in that study to diagnose coronary heart disease (CHD) raised concerns: only 1% of subjects reported having had myocardial infarction in the past year, the primary 'hard' endpoint for CHD, whereas most reported angina pectoris, a 'softer' endpoint for CHD. Further, subjects who quit drinking due to illness or those with hazardous drinking who died earlier than healthy subjects may have confounded results. Further, the definition of 'hazardous drinking' in that study was too inclusive, including some people who might better be classified as moderate drinkers." That paper was reviewed by our Forum, available at bu.edu/alcohol-forum/critique-040.

Forum member Lanzmann-Petithory had some interesting observations. "It is a very elegant idea of Klatsky et al that the apparent increased risk of cancer among light-moderate drinkers may be substantially due to underreporting of intake. In the Nancy cohort study initiated by Serge Renaud, we had an opportunity to evaluate two approaches for estimating alcohol intake: a self-administered recall questionnaire and a seven-day prospective nutritional survey validated by a dietician. While these data have not yet been published, our colleague Bernard Herbeth from INSERM Nancy found a better correlation coefficient with of GGT with alcohol consumption obtained by seven-day survey (0.451) than with the self-administered questionnaire based on recall of intake over the preceding year (0.392) ($p < 0.001$). Some data from this analysis are shown below:

Recall quest. g alcohol/d	No of subjects	Comparison with estimate from 7-day nutritional survey (%)			
		0 to 21 g/d	22 to 43 g/d	44 to 87 g/d	88 to 200 g/d
0 to 21 g/d	97	74.2	18.6	7.2	0
22 to 43 g/d	20	15	50.0	35	0
44 to 87 g/d	35	0	17.1	40.0	42.9
88 to 200 g/d	33	0	0	33.3	66.7

As shown in the above table, there was a strong correlation between the recall questionnaire and the estimate of alcohol from the 7-day nutritional survey (percent giving estimates in the same category by the two methods are shown in bold). However, a total of 57.1% of those with an estimate from the survey of 88-200 g/day reported less on the recall questionnaire."

Forum Summary

Epidemiologists are often faced with reported adverse health effects of alcohol among subjects reporting very low levels of consumption, levels that physiologically should not cause diseases such as cancer. It is often assumed that at least some of the subjects reporting low levels of intake may be underreporting their actual intake, but heretofore it has been difficult to judge this.

In the present study, the authors used each subject's computer-based data on conditions and diseases (including laboratory and social factors), related to alcohol misuse, collected over many years to identify subjects reporting 'light-to-moderate' alcohol intake who were likely, or unlikely, to be underreporting their intake at a baseline examination. Overall, 18.4% of subjects were suspected of being underreporters while 46.5% had adequate data that suggested that they were not underreporters. (The remaining 35.1% of subjects had inadequate data stored in the computer to be classified.)

Among their cohort of more than 100,000 subjects, 14,880 developed cancer during an average follow-up period of 18 years. There were 23,363 subjects who reported that they were light (up to 1 drink/day) or moderate (1 to 2 drinks/day) drinkers. In all comparisons, subjects suspected of being underreporters of their alcohol intake had a higher

risk of cancer than those not categorised as being underreporters. For example, among subjects reporting 1 to 2 drinks/day, in comparison with non-drinkers, the risk ratio of any type of cancer among those considered to not be underreporters was 0.98 (95% CI 0.87-1.09); in other words, no effect on cancer risk from alcohol. For those categorised as underreporters, however, the relative risk of any cancer was 1.33 (95% CI 1.21–1.45). Similar results were seen for alcohol-related cancers as for any cancer. Also, the risk of breast cancer among women was less than one-half as high among moderate drinkers who were unlikely to be underreporters of their alcohol intake as among those considered likely to be underreporting their drinking.

Adjusting for confounding in prospective studies is an ever-present challenge for epidemiologists. One factor that has often been considered probable, but difficult to adjust for, is the underreporting of actual alcohol intake by subjects. Being able to adjust for such underreporting would greatly improve studies relating alcohol consumption to the risk of cancer (and other chronic diseases). For epidemiologic studies that have extensive longitudinal data on all medical conditions (such as the Kaiser-Permanente Study, the basis for these analyses), the approach described in this paper could be an extremely valuable way of seeking the true relation between light-to-moderate alcohol intake and cancer as well as with a variety of

other health outcomes. Based on the present study, an increase in the risk of cancer among light-to-moderate drinkers may occur primarily among those who underreport their alcohol intake.

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

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Alcohol consumption and risk of incident rheumatoid arthritis in women

A study evaluated the association of alcohol consumption with risk of rheumatoid arthritis (RA) in two large prospective cohorts. The Nurses' Health Study (NHS) established in 1976, enrolled 121,701 US female registered nurses and Nurses' Health Study II (NHS II) began in 1989, enrolling 116,430 female nurses.

Lifestyle and environmental exposures were collected through biennial questionnaires. Alcohol consumption was assessed with a food frequency questionnaire completed every 4 years. The incident RA cases were identified using the connective tissue disease screening questionnaire and a medical record review.

Among 1.90 million years of person-time from 1980 to 2008, 580 incident RA cases were diagnosed in NHS, and among 1.78 million years of person-time from

1989 to 2009, 323 incident RA cases were diagnosed in NHSII. Compared to no use, the pooled multivariable adjusted HR for alcohol use of 5.0-9.9 grams/day (g/d) was 0.78 (95% CI, 0.61-1.00). For seropositive RA cases, the association appeared stronger (HR= 0.69, 95% CI: 0.50-0.95). In addition, Women who drank beer 2-4 times a week had a 31% decreased risk compared with women who never drank beer.

The Authors conclude that there is a modest association between long-term moderate alcohol drinking and reduced risk of RA. Future studies are needed to confirm their findings in other populations.

Source: Alcohol consumption and risk of incident rheumatoid arthritis in women: A prospective study. Bing Lu, Daniel H. Solomon, Karen H. Costenbader and Elizabeth W. Karlson MD. *Arthritis & Rheumatology*, published online April 2014.

Alcohol and cardiovascular health: the dose makes the poison...or the remedy

An article published in the journal Mayo Clinical Proceedings gives findings of a review on literature relating to drinking pattern and cardiovascular health.

The authors state that "Habitual light to moderate alcohol intake (up to 1 drink per day for women and 1 or 2 drinks per day for men) is associated with decreased risks for total mortality, coronary artery disease, diabetes mellitus, congestive heart failure, and stroke. However, higher levels of alcohol consumption are associated with increased cardiovascular risk. Indeed, behind only smoking and obesity, excessive alcohol consumption is the third leading cause of premature death in the United States.

Heavy alcohol use (1) is one of the most common causes of reversible hypertension, (2) accounts for about one-third of all cases of nonischemic dilated cardiomyopathy, (3) is a frequent cause of atrial fibrillation, and (4) markedly increases risks of stroke—both ischemic and hemorrhagic. The risk-to-benefit ratio of drinking appears higher in younger

individuals, who also have higher rates of excessive or binge drinking and more frequently have adverse consequences of acute intoxication (for example, accidents, violence, and social strife). In fact, among males aged 15 to 59 years, alcohol abuse is the leading risk factor for premature death.

Of the various drinking patterns, daily low- to moderate-dose alcohol intake, ideally red wine before or during the evening meal, is associated with the strongest reduction in adverse cardiovascular outcomes".

The authors comment that Health care professionals should not recommend alcohol to nondrinkers because of the paucity of randomised outcome data and the potential for problem drinking even among individuals at apparently low risk.

Source: Alcohol and cardiovascular health: the dose makes the poison...or the remedy. O'Keefe JH, Bhatti SK, Bajwa A, DiNicolantonio JJ, Lavie CJ. Mayo Clin Proc. 2014 Mar;89(3):382-93

Moderate red wine consumption may improve hemorheological parameters in healthy volunteers

A team of researchers from Hungary have previously demonstrated in vitro the favourable hemorheological effects of red wine, alcohol-free red wine extract and ethanol. Their most recent research may help to explain some of the benefits associated with the 'French Paradox'.

The current study was based on thirty-nine healthy, non-smoking male volunteers between 18–40 years. Participants were assigned into two groups: control group had drunk water, while red wine group had consumed 2 dl of red wine each day at dinner for 3 weeks. No alcohol had been drunk for one week prior to the study. Blood was obtained in the morning of the first and last day. Hematocrit (Hct), plasma (PV) and whole blood viscosity (WBV) (Hevimet 40 capillary viscometer), red blood cell (RBC) aggregation (Myrenne and LORCA aggregometer) and deformability (LORCA ektacytometer) were measured and Hct/WBV ratio was calculated to determine oxygen carrying capacity. Hct was adjusted to 40%.

Hct and PV were not affected. WBV remained unchanged in controls, but it considerably decreased in the red wine group compared to the 3-week control group, while Hct/WBV ratio became significantly higher in the red wine group compared to the control ($p < 0.05$). RBC aggregation significantly decreased in the red wine group and became significantly lower compared to the 3-week controls ($p < 0.05$). Red wine significantly increased RBC deformability ($p < 0.05$) at high shear stress.

The authors say their results demonstrate that moderate red wine consumption has beneficial effects on hemorheological parameters which may contribute to the French-paradox.

Source: Moderate red wine consumption improves hemorheological parameters in healthy volunteers. A. Toth, B. Sandor, J. Papp, M. Rabai, D. Botor, Zs. Horvath, P. Kenyeres, I. Juricskay, K. Toth, L. Czopf. Clinical Hemorheology and Microcirculation, Vol 56, Number 1 / 2014, 13-23.

Alcohol consumption and survival after a breast cancer diagnosis

Evidence for the association of alcohol consumption with prognosis after a diagnosis of breast cancer has been inconsistent. A study reviewed and summarised the published evidence and evaluated the association using individual patient data from multiple case cohorts.

A MEDLINE search to identify studies published up to January 2013 was performed. We combined published estimates for survival time in “moderate drinkers” versus non-drinkers. An analysis of individual participant data using Cox regression was carried out using data from eleven case cohorts.

The researchers identified eleven published studies suitable for inclusion in the meta-analysis. Moderate post-diagnosis alcohol consumption was not associated with overall survival (HR = 0.95, 95% CI 0.85-1.05), but there was some evidence of better survival associated with pre-diagnosis consumption (HR = 0.80, 95% CI 0.73-0.88). Individual data on

alcohol consumption for 29,239 cases with 4,839 deaths were available from the eleven case cohorts, all of which had data on ER status. For women with ER-positive disease there was little evidence that pre- or post-diagnosis alcohol consumption is associated with breast cancer-specific mortality, with some evidence of a reduction in all-cause mortality. Based on a single study, moderate post-diagnosis alcohol intake was associated with a small reduction in breast cancer-specific mortality in women with ER-negative disease. There was no association for pre-diagnosis intake in women with ER-negative disease.

Considering the totality of the evidence, moderate post-diagnosis alcohol consumption is unlikely to have a major adverse effect on survival of women with breast cancer.

Source: Alcohol Consumption and Survival after a Breast Cancer Diagnosis: A Literature-based Meta-analysis and Collaborative Analysis of Data for 29,239 Cases. Ali AM et al. *Cancer Epidemiol Biomarkers Prev.* 2014 Mar 17.

Alcohol consumption over time and risk of death

The results from the few cohort studies that have measured usual alcohol consumption over time have not been summarised. Authors of a recent paper conducted a systematic review and meta-analysis to quantify mortality risk. Pertinent studies were identified by searching the Medline, Web of Science, Cumulative Index to Nursing and Allied Health Literature (CINAHL) Plus, and Scopus databases through August 2012 using broad search criteria. Studies reporting relative mortality risks for quantitatively defined categories of alcohol consumption over time were eligible. Nine cohort studies published during 1991-2010 (comprising 62,950 participants and 10,490 deaths) met the inclusion criteria.

For men, there was weak evidence of lower mortality risk with low levels of alcohol intake over time but higher mortality risk for those with intakes over 40 g/day compared with abstainers using a random-

effects model (P for nonlinearity = 0.02). The pooled relative risks were 0.90 (95% confidence interval: 0.81, 0.99) for 1-29 g/day, 1.19 (95% confidence interval: 0.89, 1.58) for 30-59 g/day, and 1.52 (95% confidence interval: 0.78, 2.98) for 60 or more g/day compared with abstention.

There was moderate between-study heterogeneity but no evidence of publication bias. Studies including women were extremely scarce. The findings include a curvilinear association between drinking over time and mortality risk for men overall and widespread disparity in methods used to capture exposure and report results.

Source: Alcohol consumption over time and risk of death: a systematic review and meta-analysis. Jayasekara H, English DR, Room R, Macinnis RJ. *Am J Epidemiol.* 2014 May 1;179(9):1049-59.

A light consumption wine might help kidneys stay healthy

A paper presented at the Spring Clinical Meetings of the National Kidney Foundation in March suggests that an occasional glass of wine might help keep kidneys healthy and for those who already have kidney disease, which puts one at higher risk for cardiovascular problems, moderate wine drinking might help the heart, the researchers added.

The study author Dr Tapan Mehta, a renal fellow at the University of Colorado Anschutz Medical Center, in Aurora presented the preliminary findings. "Those [with healthy kidneys] who drank less than one glass of wine a day had a 37 percent lower risk of having chronic kidney disease than those who drank no wine..." "Those with chronic kidney disease who drank less than one glass a day had a 29 percent lower risk of cardiovascular events [than those who drank no wine]," he added.

Mehta and his colleagues looked at data from the 2003 to 2006 National Health and Nutrition Examination that included nearly 6,000 people. Of those, about 1,000 had chronic kidney disease.

Having chronic kidney disease increases the risk of cardiovascular disease. About 26 million Americans have chronic kidney disease, often caused by diabetes and high blood pressure, according to the National Kidney Foundation. Previous research has found that moderate drinking is linked to heart benefits.

That is why Mehta decided to look at both questions: whether moderate drinking could help those with chronic kidney disease lower their risk of cardiovascular problems, and whether it can help those with healthy kidneys keep them that way.

Exactly why wine might be beneficial is not known for sure, Mehta said. Drinking moderate amounts is linked with lower levels of protein in the urine. In those who have kidney disease, higher protein levels in the urine are linked with an increased risk of progression of kidney disease.

The polyphenols found in wine have anti-inflammatory and antioxidant properties, which may help explain the protective heart effects, he said.

The study did not differentiate between red and white wine, so there is no indication as to whether red wine is better than white, however Mehta stated that he suspects that red would most likely be better, as it has been linked previously to being heart-protective.

The study suggests wine is protective against kidney disease and, in those with kidney disease, heart disease, "but we cannot make any firm cause and effect conclusion," Mehta said. While the study found an association, it was not designed to prove a cause-and-effect relationship.

The new findings are consistent with previous research, said Dr Gary Curhan, a professor of medicine at Harvard School of Public Health and Harvard Medical School. Curhan's team has found there may be an inverse association between moderate drinking and kidney problems.

Thomas Manley, director of scientific activities at the National Kidney Foundation said that moderation is key for kidney patients when it comes to alcohol consumption, with a few caveats. "Excess alcohol consumption has definitely been shown to have a negative effects on kidney function. Alcohol can also worsen hypertension, a major cause of chronic kidney disease, so those with poorly controlled hypertension should definitely limit the amount of alcohol they consume. It's important also to consider the nutritional contents of the various alcoholic drinks to be sure they comply with the prescribed renal diet."

kidney.org/news/newsroom/nr/study-wine.cfm

National survey links teen binge drinking and alcohol brand references in pop music

Binge drinking by teenagers and young adults is strongly associated with liking, owning, and correctly identifying music that references alcohol by brand name according to a study by the University of Pittsburgh and Dartmouth-Hitchcock Norris Cotton Cancer Center.

These findings, based on a US randomised survey of more than 2,500 people ages 15 to 23, suggests that policy and educational interventions designed to limit the influence of alcohol brand references in popular music could be important in reducing alcohol consumption in teens and young adults.

In the survey participants were given the titles of popular songs with alcohol mentions and asked if they liked the song or owned the song. They were also tested to determine if they could spontaneously recall what brand of alcohol was mentioned in the song.

Survey participants who could correctly recall alcohol brands in songs had more than twice the odds of having had a complete alcoholic drink, compared to those who could not recall the alcohol brand, even after adjusting for factors including age, socioeconomic status, and alcohol use by a parent or friend. The participants who could identify the alcohol brands in songs also had greater odds of binge alcohol use.

Perceived peer drinking norms and responsible drinking in UK university settings

A project tested whether there is an association between perceived campus drinking norms and usual drinking behaviour in UK university students and whether norm messages about responsible drinking correct normative misperceptions and increase students' intentions to drink responsibly.

1,020 UK university students took part in an online study. Participants were exposed to one of five message types: a descriptive norm, an injunctive norm, a descriptive and injunctive norm, or one of two control messages. Message credibility was assessed. Afterwards participants completed measures of intentions to drink responsibly and the researchers measured usual drinking habits and perceptions of peer drinking.

Perceptions of peer drinking were associated modestly with usual drinking behaviour, whereby

Lead author Brian A. Primack, MD, PhD, associate professor of medicine and pediatrics and director of the Programme for Research on Media and Health, University of Pittsburgh School of Medicine said "A surprising result of our analysis was that the association between recalling alcohol brands in popular music and alcohol drinking in adolescents was as strong as the influence of parental and peer drinking, and an adolescent's tendency toward sensation-seeking... This may illustrate the value that this age group places in the perceived opinions and actions of music stars."

The authors suggest that one possible solution could be to empower adolescents with critical thinking skills. "Media literacy is a growing educational methodology that may be successful in helping young people make healthier decisions," Primack said. "In the case of alcohol, it may be valuable to help them understand how alcohol brand references in music may manipulate their thoughts and emotions to sell them a product."

Source: Receptivity to and Recall of Alcohol Brand Appearances in U.S. Popular Music and Alcohol-Related Behaviors. Brian A. Primack, Auden C. McClure Zhigang Li and James D. Sargent. *Alcoholism: Clinical & Experimental Research*. Article first published online: 9 Apr 2014.

participants who believed other students drank responsibly also drank responsibly. Norm messages changed normative perceptions, but not in the target population of participants who underestimated responsible drinking in their peers at baseline. Norm messages did not increase intentions to drink responsibly and although based on accurate data, norm messages were not seen as credible.

In this UK based study, although perceived social norms about peer drinking were associated with individual differences in drinking habits, campus wide norm messages about responsible drinking did not affect students' intentions to drink more responsibly. More research is required to determine if this approach can be applied to UK settings.

Source: Perceived Peer Drinking Norms and Responsible Drinking in UK University Settings. Robinson E, Jones A, Christiansen P, Field M. *Subst Use Misuse*. 2014 Apr 14.

Three-year changes in drinking patterns in Spain

A study examined changes in alcohol drinking patterns (DP) and associated variables in a Mediterranean country. Changes in drinking pattern between baseline (2008-2010) and follow-up (2012-2013) were examined on a Spanish population-based cohort of 2254 adults (18-59 years).

Heavy consumption was defined as ≥ 40 g/day of alcohol in men (≥ 24 g/day in women) and binge drinking (BD) as the intake of ≥ 80 g of alcohol in men (≥ 60 g in women) on one occasion in the previous month.

Six patterns were defined: 1) Non-drinkers; 2) Ex-drinkers; 3) Moderate drinkers without BD (MNB); 4) Moderate drinkers with BD (MB); 5) Heavy drinkers without BD (HNB); and 6) Heavy drinkers with BD (HB).

Overall, 45.2% of participants changed DP during follow-up. Over 24% of non-drinkers and 19.4% of ex-drinkers at baseline qualified as MNB at follow-up. The largest flow was from HNB to MNB (57.1%). Light-drinking patterns experienced the largest gains (ex-drinkers: 37.5% and MNB: 66.7%) by absorbing

individuals lost by heavy-drinking patterns (MB: 50.8% and HNB: 48.4%). Men, younger individuals, and current smokers were more likely to report heavy-drinking patterns at one or both assessments. Being married or employed increased the likelihood of reporting light-drinking patterns at both surveys ($p < 0.05$). Improving physical quality of life and exercise were associated with a shift from light- to heavy-drinking pattern during follow-up ($p < 0.05$).

The authors conclude that drinking pattern in Spain changed over 3 years with a tendency to "regress" towards moderate patterns. They comment that repeated measures of alcohol intake may reduce classification errors and biased results when examining the impact of alcohol on health.

Source: Three-year changes in drinking patterns in Spain: a prospective population-based cohort study. Hosanna Soler-Vila, Iñaki Galán, Juan Donado-Campos, Fernando Sánchez-Alfonso, José Lorenzo Valencia-Martín, Fernando Morilla, Luz M León-Muñoz, Fernando Rodríguez-Artalejo. *Drug and Alcohol Dependence*. Available online 23 April 2014.

Binge drinking at University: a social network study in Belgium

Many university students engage in risky alcohol consumption behaviour during their stay at university. So far, however, most studies have relied on cross-sectional surveys and paid little attention to the role of social ties. University students, however, are socially connected, so it is likely that their alcohol consumption behaviour is also connected.

The authors hypothesised that university students' social positions within their networks are related to their drinking behaviour. They carried out a social network analysis within a whole network approach with undergraduates in two faculties ($n = 487$), those of Engineering and Psychology, in a Belgian university. All students filled out a questionnaire recording their drinking behaviour and their social ties (friendship, working with, partying with and room-mate). For each individual, indicators of centrality, social capital, and cross-gender relationships were computed.

Results indicated that being socially close to binge drinkers was associated with a higher frequency of binge drinking. The risk of binge drinking increased with centrality but decreased with social capital. Having cross-gender relationships decreased the risk of binge drinking.

The study authors found indications that the effect of centrality and gender on binge drinking depends on the composition of the network. They conclude that social position has important effects on risky drinking behaviour and that the composition of the network may affect these factors. Those developing health promotion strategies could investigate the benefits of targeting central individuals in order to prevent binge drinking among university students.

Source: Binge drinking at University: a social network study in Belgium. Lorant V, Nicaise P. *Health Promot Int*. 2014 Mar 22.

A UK defence minister to address heavy drinking in armed forces

Anna Soubry, Parliamentary Under Secretary of State and Minister for Defence Personnel, Welfare and Veterans, told an MPs committee that the Government should do more to reduce heavy drinking within the Armed Forces.

"The incidence of binge drinking, the quantities of alcohol, across society are beginning to diminish. I would hope that would be the same in the armed forces," she said.

Madeleine Moon MP said ending the "high level of subsidy" enjoyed at military bars would help to curb drinking.

An MoD spokesman said: *"Much like wider society, the armed forces accept that the moderate consumption of alcohol can be part of service life."*

"However, we always encourage sensible drinking and have a number of programmes designed to raise awareness and prevent alcohol misuse."

Advice on the dangers of excessive drinking forms part of wider initiatives to encourage a healthy lifestyle among recruits. Cheap drink is available to officers and senior NCOs in mess bars, though it is sold at a profit and not subsidised, while military bars on or near bases are most often operated by commercial outfits.

PSHE government enquiry

In the UK, the Education Committee has announced an inquiry into Personal, Social, Health and Economic education (PSHE) and Sex and Relationships Education (SRE) in schools.

Submissions of written evidence are invited addressing the following points:

- Whether PSHE ought to be statutory, either as part of the National Curriculum or through some other means of entitlement.
- Whether the current accountability system is sufficient to ensure that schools focus on PSHE.

The Committee asks for written submissions in accordance with the guidelines below by 12pm on Friday 6 June 2014.

parliament.uk/business/committees/committees-a-z/commons-select/education-committee/inquiries/parliament-2010/pshe-and-sre-in-schools/

Community Alcohol Partnerships promotional film

Evans Woolfe Media has produced a promotional film/DVD which is designed to promote the uptake and development of new Community Alcohol Partnerships (CAP) schemes. The film tells the story of CAP through the stakeholders and young people already involved in and benefiting from the existence of a CAP scheme in their community and features footage from the Edinburgh, Brecon and Hayling Island CAPs. The narrative is organised around three key areas of focus: Business engagement and enforcement ; Diversionary activity; and Education.

The film can be downloaded from the CAP website here and DVDs are available on request.

communityalcoholpartnerships.co.uk/news/8-news/63-an-introduction-to-community-alcohol-partnerships-promotional-film

Responsibility deal pledge on alcohol unit reduction: First report

The UK Department of Health has published the first interim monitoring report on the Responsibility deal alcohol network's pledge to remove 1 billion units of alcohol from the market by the end of 2015:

It shows that so far the number of units of alcohol sold has been reduced by a quarter of a billion. Pledges are expected shortly on alcohol education and around high strength issues.

gov.uk/government/publications/responsibility-deal-pledge-on-alcohol-unit-reduction-1st-report

Children under 10 treated for drugs and alcohol

Children aged 10 or lower are among hundreds of young people being referred to specialist drug and alcohol treatment services, an investigation by the UK Press Association (PA) has found.

The investigation identified that 15 local authorities had referred at least one child aged 10 or lower for treatment in the past three years and in South Ayrshire, one case involved a four-year-old.

Some 366 children aged 12 or under were referred for drug or alcohol treatment in 2012/13 in England, according to the most recent figures from Public Health England, a decrease from 433 in 2011/12.

Implementation of the late night levy in the UK

Pubs and clubs in Cheltenham that serve alcohol after midnight will have to pay a charge towards policing and cleaning up the streets. It is the second town in the country to bring in a "late-night levy" after Newcastle introduced the charge in November last year. The charge of between £299 and £4,440 a year will be paid by venues selling alcohol between midnight and 06:00.

Cheltenham Borough Council said the levy was expected to raise about £200,000 with 70% going to the police and 30% retained by the council to spend on preventing public nuisance and cleaning the streets. Southampton, Plymouth, Leeds and York are also considering introducing a levy.

Limiting the exposure of young people to alcohol advertising in Ireland

The Alcohol Marketing Communications Monitoring Body in Ireland has presented its seventh Annual Report (for 2012) to the Minister for Health.

The Monitoring Body oversees the implementation of and adherence to Voluntary Codes of Practice to limit the exposure of young people, under the age of 18 years, to alcohol advertising.

The seventh Annual Report shows, there was overall compliance in 2012 by television, radio, cinema, outdoor advertisers and newspapers and magazines with the obligations set down in the Codes.

Mr Peter Cassells, Chairman of the Monitoring Body said in the reports foreword "In that context, I would like to thank the television stations, the radio stations, the cinema contractors, the Outdoor Media Association and the print media for their cooperation with the monitoring process and their prompt response to our requests for information.

There was one breach of the Codes during the year. The Monitoring Body requested that immediate remedial action be taken to rectify the position. We also asked that procedures be put in place to prevent further breaches occurring.

In addition, from time to time, we reminded media players of the need to adhere to the 'spirit' of the Codes. The aim of the Codes is to limit the exposure of young people to alcohol advertisements. As a Monitoring Body, we have determined that this overall obligation will take precedence when doubts arise about the meaning of certain sections of the Codes".

drugsandalcohol.ie/21771/1/AMCMB-Annual-Report-2012.pdf

Drinkaware says 'unit guidelines just aren't working'

New research conducted for Drinkaware into the UK's drinking attitudes and behaviours shows the majority of 25-65 year olds aren't clear about how much they can drink without harming their health. Just over two thirds of those surveyed don't recognise how many units they can drink if they want to stay inside the lower risk guidelines and most can't say how many units there are in a glass of wine or a pint of beer.

Drinkaware is calling for three simple measures which will make it easier for everyone to understand how to drink in a low risk way:

- All glasses in pubs and restaurants should have a unit line marked on them
- Pubs and restaurants should promote the 125ml wine glass

- Alcohol retailers should be required to give unit information for all bottles and cans.

The Chief Medical Officer, Dame Sally Davies, is currently reviewing the guidelines on alcohol consumption. Drinkaware is urging her to make them clearer and simpler so consumers will find it easier to use them.

Drinkaware commented that units have got more difficult to understand over the years. When they were first introduced the guidelines advised that a standard glass of wine was the equivalent of a unit of alcohol. Now a standard glass is larger and the average ABV of a glass of wine is higher, so a standard glass of wine is around 2.3 units.

Binge drinking and drug abuse worries majority of youths in Northern Ireland

A major poll for the Belfast Telegraph revealed that in Northern Ireland, binge drinking and drug abuse among teenagers is a cause of concern for most young people in Northern Ireland.

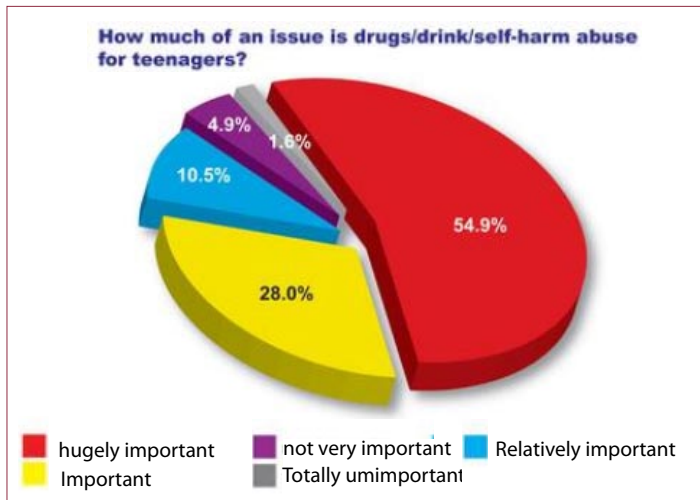
83% say drink and drug abuse among teenagers is an issue of importance or huge importance to them.

The poll asked 550 young people aged between 16 and 24, about how big an issue drink and substance abuse is for teens.

The LucidTalk research showed the bulk of those who took part saw the issue of alcohol and substance abuse as important (28%) or very important (54.9%). Just 1.6% of those who took part believed drugs and drink were not important issues for teenagers.

There was no particular patterns of demographic variations, with equal concern voiced among Protestant and Catholic young people, and those from various areas across Northern Ireland.

belfasttelegraph.co.uk



Global Alcohol Producers Group to merge with ICAP

The Global Alcohol Producers Group, a group which includes many of the world's leading producers of beer, wine and spirits have decided to merge the International Center for Alcohol Policies (ICAP; www.icap.org). In addition to promoting understanding of the role of alcohol in society, providing evidence-based scientific research, and communicating the perspectives of producers, the new organisation will be dedicated to supporting implementation of the Beer, Wine and Spirits Producers' Commitments to Reduce Harmful Drinking.

www.producerscommitments.org

CSO figures show alcohol consumption down 7.6% in past year

An analysis commissioned by Drinks Industry Group of Ireland calculated the 2013 level of average per adult consumption of alcohol and the change since 2012. The data used are from the CSO Population and Migration Estimates for April 2013 (September 2013) and the Revenue Commissioners' alcohol clearances data (the 2013 figures were made available on March 31st 2014).

The analysis shows that alcohol consumption in Ireland has continued to decline.

drugsandalcohol.ie/21703/1/Alcohol_Consumption_Figures_in_2013_Report.pdf

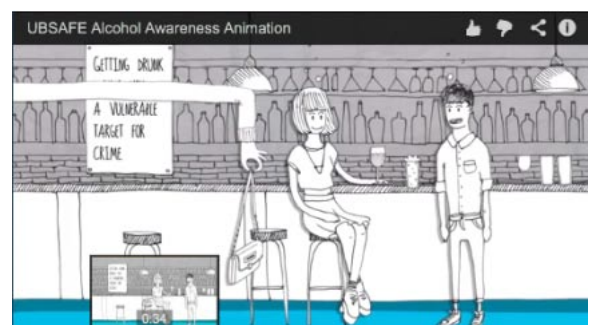
Average per adult alcohol consumption 2012 and 2013

	2012	2013	% change
Million litres of pure alcohol (MPLA), Total consumption	41.703160	38.472436	-7.7
Population aged 15 and over, millions	3.5906	3.5854	-0.1
Litres of pure alcohol per adult (LPA)	11.615	10.730	-7.6
Beer (MLPA)	19.282539	18.089538	-6.2
Cider (MPLA)	3.188155	3.106897	-2.5
Spirits (MPLA)	8.261387	7.281334	-11.9
Wine (MPLA)	10.971079	9.994667	-8.9

Birmingham University films clips on staying safe

An animation film to communicate to students the importance of alcohol awareness has been commissioned by the University of Birmingham security department, as part of their UBSAFE campaign. The film is composed of original hand-drawn artwork and illustrated the potential effects of heavy drinking and how it might impact a student's life.

youtube.com/watch?v=dtZKk6DROpA



Responsible drinking campaigns by students for students reach over half a million on social media

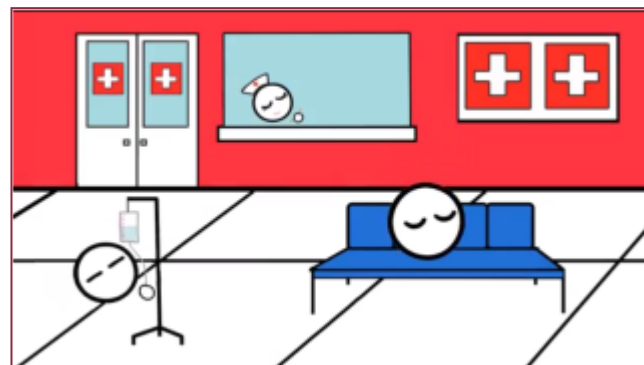
Student-led campaigns aimed at raising awareness of the importance of responsible drinking have reached over half a million people through social media, while videos from the campaigns have been viewed more than 34,000 times. These figures were announced by Fionnuala Sheehan, Chief Executive of drinkaware.ie, at the gala final of the 2014 DARE2BDRINKAWARE.ie competition 30 April. Sheehan highlighted the significant numbers of students who participated in the campaigns' workshops, quizzes and experiential events, which were rolled out on campuses across the Ireland.

The DARE2BDRINKAWARE.ie competition challenged third-level students to develop creative campaigns that highlight responsible drinking. Seven teams were shortlisted in the competition, and received up to €2,000 each to implement their proposed campaigns. The shortlisted teams were invited to pitch their campaigns to a high-profile judging panel.

The winning team's campaign, 'No Sleep Lost – Don't Lose Sleep over Where You'll Wake Up', reached an audience of over 165,000 on Facebook and included a number of elements, including a website, interactive drinks calculator, animation piece and viral video, which focused on the real-life consequences arising from excessive alcohol consumption. They also mounted an extensive marketing and PR campaign

to support the project, gaining significant coverage across the media in recent months.

drinkaware.ie/sleep-lost/



Speaking from the ceremony, CEO of drinkaware.ie, Fionnuala Sheehan said:

"The idea behind this year's competition was to empower students to create campaigns that raised awareness of the importance of responsible attitudes to drinking and engaged their peers. By enabling young people to create awareness-raising campaigns by students for students, the campaigns that have been rolled out over the past few months have not only been more creative than ever, they have also resonated on a different level with their target audience".

dare2bdrinkaware.ie.

SpiritsEUROPE call on EU Commission to reconsider evidence used in European policy making

The spirits sector has called on the EU Commission to reconsider the evidence used in European policy-making. They argue that efforts by some to exclude business from funding, discussing or even challenging science and research are short sighted.

SpiritsEUROPE considers that there is an urgent need for a debate about the evidence used in EU public policy making and the way research is funded, conducted and presented. In many fields - including alcohol harm - discussions have become more polemic and more polarised between business on the one hand and temperance and health activists on the other. Positions become harder as research is challenged and contested. It is a situation that satisfies no one and spiritsEUROPE believes the time has come for a new dialogue and a refreshed understanding.

Paul Skehan, Director General of spiritsEUROPE stated "Our view is that 'good' research is 'good' no matter who funds it, provided it is carried out by real experts, and generates reputable, credible and reproducible findings that derive from sound methods, and using fair assumptions and verifiable, correct data inputs. The principles and strictures that apply to industry-funded research should equally apply to research carried out by advocate-academics who hold strong anti-alcohol views.

There is constant and justifiable focus on the need for good judgment in policy making. That focus will not diminish with the changeover to a new Commission and new Parliament. It is time for an honest debate on an important topic."

Impact of minimum alcohol pricing in Ireland & Northern Ireland

Members of the Sheffield Alcohol Research Group (SARG) have been commissioned jointly by the Irish and Northern Irish governments to produce a report on the estimated impact of minimum unit pricing (MUP) in both countries.

The modelling team of Yang Meng, Colin Angus and Abdallah Ally, led by Alan Brennan, will adapt and extend the group's previous work in England and Scotland to produce detailed estimates of the effect of MUP on alcohol consumption, population health, crime and workplace absence.

Minimum alcohol price plan referred to European court by Scottish judges

A plan to set a minimum price for all alcoholic drinks in Scotland has been referred by appeal judges to the European court of justice, after a long legal battle by the whisky industry.

The court of session in Edinburgh said there were several complex issues involving EU law on free trade and the right of ministers to set price controls to protect public health that could only be decided in the European court.

The judgment will mean further delays for a final decision on the Scottish government's bid to charge a minimum price for alcohol of 50p a unit, but sidesteps a possible referral to the supreme court in London.

Health secretary Alex Neil today said he "regretted" the prospect of a delay. He said: "While it is regrettable that this means we will not be able to implement minimum unit pricing sooner, we will continue our ongoing and productive dialogue with EU officials."

SWA chief executive David Frost said: "We are pleased that the Court of Session in Edinburgh is referring the minimum unit pricing (MUP) case to the Court of Justice of the European Union. From the outset we said that we believed MUP was contrary to European Union law and that it was likely in the end to go to the European Court."

No minimum price for alcohol in New Zealand

Minimum pricing on alcohol will not get the green light in New Zealand, Justice Minister Judith Collins has said. She argued that such a policy would "hit moderate drinkers in the pocket".

Collins announcement follows a report from Ministry of Justice officials based on a minimum price of between \$1 and \$1.20 a unit. The report recommended waiting five years while alcohol reforms took effect.

Its authors said a minimum price would financially benefit the industry, retailers and suppliers to the tune of \$131 million a year and have only a modest effect on harmful consumption. Implementation, enforcement and monitoring would be difficult, and the regime was internationally untested, they said.

Collins said there was no compelling evidence in favour of minimum pricing and that changes to the Sale and Supply of Alcohol Act instead "aimed to strike a sensible balance to curb the harm of alcohol abuse without penalising moderate drinkers".

justice.govt.nz/policy/sale-and-supply-of-alcohol/alcohol-minimum-pricing-report

Alcohol related hospital admissions and crime mapped to license premises

A new digital tool which collects data on crime, ambulance call-outs and hospital admissions is being used to help limit binge drinking in London.

Rates for alcohol-related hospital admissions have risen in London since 2006, but the London borough of Islington's state-of-the-art software, which maps alcohol-related health and crime data against existing on and off-licensed premises, could help curb the harm caused by excess alcohol.

The council's public health team is using the data, produced in partnership with colleagues in licensing, the Safer Islington Partnership and the police, to systematically assess all licencing applications. Evidence collected in this way has led to 13 alcohol licensing applications being turned down and two amended to reduce the hours of sale.

The initiative is one of a series of good practice case studies being released by London Councils to coincide with the first anniversary of public health responsibilities moving to local government.

www.londoncouncils.gov.uk

New UK figures show a continued decline in alcohol-related deaths

New figures from Public Health England (PHE), published 29 April, show a continued decline in alcohol-related deaths.

The figures are the latest update to the Local Alcohol Profiles for England (LAPE) data tool and include a new measure of alcohol-related harm. The last update was published in 2012, with the earliest comparable data published in 2006.

National figures for alcohol-related mortality for men are down 1.9% since the last update and 7.3% over a 5-year period. For women, alcohol-related mortality figures are down 1.4% since the last update and 6.8% over a 5-year period.

The LAPE tool presents data for 26 alcohol-related indicators in an interactive tool, which helps local areas assess alcohol-related harm and monitor the progress of efforts to reduce this. However, while the overall trend is downward there are still large variations between affluent and deprived areas, with some of the deprived communities seeing an increase in deaths. Of the 326 local authorities included in the data, 145 have seen an increase in alcohol-related deaths among men and 154 among women – compared to the last update in 2012.

Nutrition in European Parliament's motion for resolution on gastronomic heritage

Is all European food good enough to be considered healthy? This newly adopted motion for a resolution drafted by Santiago Fisas Ayxela MEP (EPP, ES) from the European Parliament (EP) Committee on Culture and Education calls for improved food literacy among the European population through full realisation of cultural and educational aspects of the European gastronomic heritage.

The report makes strong links between food and nutrition, education and health-related issues, notably poor-diet related non-communicable diseases (NCDs). However, it also aims to promote "responsible drinking", taking pleasure from the taste of "quality European wines".

epha.org/a/6022

Hospital admissions for alcohol-related conditions remain at similar levels with over a million admissions in 2012 to 2013. However, the figures do show a continued decline in the overall numbers of young people, aged under 18, being admitted to hospital as a result of alcohol: hospital admissions caused by alcohol in England for under 18s were down by 13.9% since the last update in 2012 and by 34.4% over the past 5 years. Overall 81.3% of the 326 local authorities, showed a decline in the numbers among under 18s since the last update.

Professor Kevin Fenton, Director of Health and Wellbeing at PHE said: "We welcome the continuing decline in alcohol related deaths nationally but current levels of harm caused by alcohol remain unacceptably high, especially those in deprived communities, who are not seeing reductions.

Much of this harm is preventable and we need further action at a national and local level to implement the most effective evidence based policies. Public Health England will continue to provide leadership and support to enable this and reduce the devastating harm that alcohol can cause to individuals, families and communities".

SpiritsEUROPE workshop on initiatives to reduce alcohol-related harm for minors and young adults

SpiritsEUROPE are holding a workshop in Brussels on 23 May 2014, 10.30 to 13.00.

The EU Strategy to reduce alcohol-related harm invites stakeholders to engage in concrete interventions, including to address trends towards underage and binge drinking among young adults in a number of EU countries. Against this background, the workshop will provide an opportunity to:

- Share experiences from a number of prevention campaigns targeting underage and binge drinking... and which are delivering results.
- Learn from their measurement and evaluation.

Stakeholders from the European institutions, media, NGOs and private sector are all welcome.

spirits.eu

Alcohol: The French consume lower quantity but higher quality

The Barometer report for 2014 from Entreprise & Prévention was released in April. Alexis Capitant, General Manager Entreprise & Prévention said **“The trends have been consistent for several years - that the French have become more casual consumers, who drink less but better by focusing on quality over quantity”.**

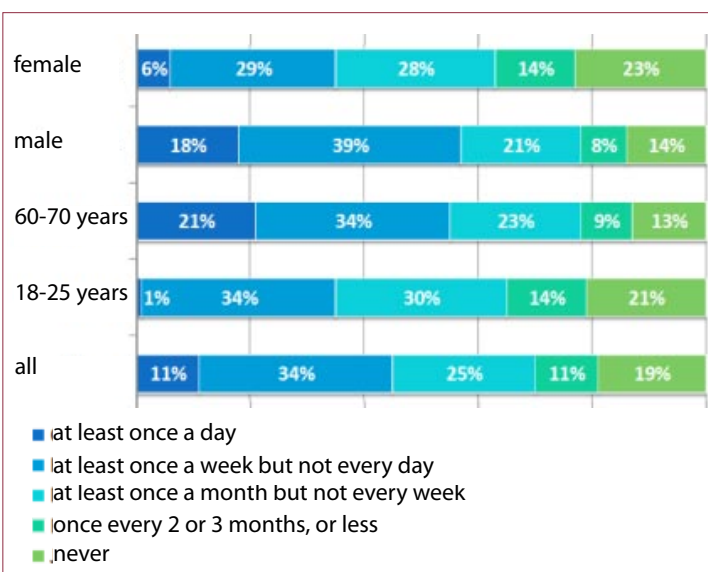
The Ifop study, found that only one in ten French still consume alcoholic beverages daily. Among these consumers there are essentially men and older people, 21% of 60-70 years and 18% of men consume daily effect compared to 1% of 18-25 year olds and 6% of women. The French are mostly weekly consumers (34%) or monthly (25%). 11% of French consume less often (every two or three months) or not at all (19%).

Research by Kantar Worldpanel from a representative panel of 12,000 French households gives information on purchases from the off trade (hypermarkets and supermarkets, convenience stores, discount stores, etc.). Almost all French households buy alcoholic beverages (96%). It confirms data from previous years, that the French are buying in smaller quantities (1.4l less than in 2008) and more expensive products. This increase in range continues with an annual purchasing budget up € 24.5 since 2008.

For the first time the Barometer report offers a European comparison with other countries including

Germany, the United Kingdom, Spain, Italy and Russia. The Russians and the French go out less often to cafes, bars, restaurants and nightclubs with 19 and 20 visits respectively in 2013 against 48 in Spain and 33 for England. A decline in going out was observed in all countries (excluding Russia), particularly in Italy and Spain. The level of alcohol consumption continues to decline in France with 44% ordering alcoholic beverages, lower than Spain (55.2%) and Germany (48.3%) but ahead of Italy (43.9%) and the UK (39.9%).

preventionalcool.com/



100% ZERO Campaign in Portugal

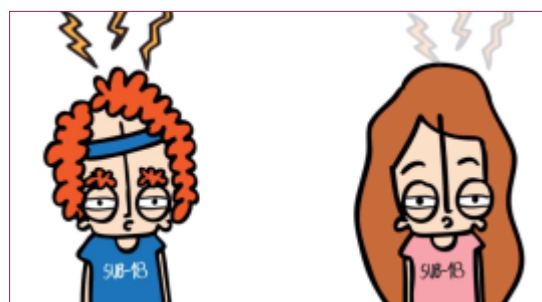
In Portugal a campaign, 100% ZERO aims to raise awareness amongst young people of the harmful effects of consuming alcohol underage. It is also promoting a debate on the existing legislation for consumption of alcohol by young people. The campaign was presented at the end of March to the National Youth Council (CNJ).

The 100% ZERO Campaign is part of the European Triangle project, a pilot initiative to create a space for sharing best practices and learning from three European countries, Portugal, Lithuania and Slovenia.

The CNJ want to highlight current legislation in Portugal regarding the minimum legal age for alcohol consumption, (18 for spirits and 16 for all other alcoholic beverages). The CNJ stresses that in most

European countries the minimum legal age for the consumption of any alcoholic beverage is 18 years. The CNJ state that in Portugal, “the first experiences of alcohol consumption are very early,” on average at 12 years. In the countries of southern Europe, such as Portugal, more than one in every 11 deaths for men and one in 16 for women are due to alcohol.

cmjornal.xl.pt/detalhe/noticias/ultima-hora/campanha-100-zero-quer-sensibilizar-jovens-para-efeitos-nocivos-do-alcool



The Wine In Moderation – Art De Vivre programme scores 93/100 for its reporting to the EAHF

Accountability is at the heart of the European Alcohol and Health Forum (EAHF). Every year, each member of the Forum has the responsibility to report on the efforts and results of their commitment. Based on Input and Output Key Performance Indicators and evaluated by a third independent body, the reporting is an essential tool demonstrating the effective implementation of the commitment in an objective and measurable manner.

The Wine in Moderation (WIM) report brings together the accumulative efforts made at national and European level by WIM members. The 2013

intermediate report for the WIM commitment received the outstanding score of 93% in the 2013 assessment of EAHF monitoring activities, executed by the independent consultant appointed by EC DG SANCO Milieu, scoring way above the EAHF's commitment average.

In their main conclusion the evaluators commented "The monitoring report is a laudable example of a very comprehensively written report, achieving very high scores in all four scoring areas (specificity, clarity, focus and measurement)".

SpiritsEUROPE reports on delivery of commitments towards harm reduction

The spiritsEUROPE Road Map 2015 sets out spiritsEUROPE's actions to deliver increased consumer information and awareness and also to develop more responsible attitudes towards alcohol. It builds on the progress made in previous commitments to the European Alcohol and Health Forum while seeking to increase the coverage, scale and visibility as well as the involvement of external stakeholder and quality of monitoring and evaluation. In parallel, the sector reinforces its commitment to responsible marketing communications through effective self-regulation.



The third year report to the official database of DG SANCO shows progress in 3 areas:

- Training seminars on responsible marketing communications, with specific focus on digital media. In 2013 and early 2014, four countries hosted seminars: Ireland, Germany, Hungary and Estonia, gathering about 120 professionals. Belgium, Portugal and Austria have expressed interest in hosting similar events in the coming months. This is in addition to the 9 countries already visited in the last two years. The seminars are a complement to the online training facility (marketresponsibly.eu).

- Progress in the use of responsible drinking message (RDM) on advertising and on product labels, in the form of a consumer information website. Progress has been made in the use of RDMs on advertising, particularly in central eastern European countries, a very positive signal that underlines the efforts of our members. While the overall percentage of coverage of RDM on labels remains difficult to assess due to the absence of a comprehensive labelling monitoring project in 2013, voluntary sectoral agreements are being taken and an increasing number of companies are displaying either the responsibledrinking.eu portal or their own consumer information website addresses.
- Tackling underage drinking and irresponsible drinking by adults: incentivising action along the value chain. Thanks to the great amount of work produced by our members and partners, numerous prevention and education programmes are now well established and copied from one country to another (www.drinksinitiatives.eu). SpiritsEUROPE have managed to involve a wide range of partners, from medical professionals to the retail and hospitality sectors, an essential link in the value chain as their staffs are the ones in direct contact with consumers. Improvements in measurement and evaluation of such initiatives have to be made and SpiritsEUROPE believe they are contributing to making a significant difference in changing awareness, attitudes and in the long term, behaviour.

Campaign in Spain to discourage buying by proxy

The Rioja Government is collaborating with local town halls, police and supermarket chains in a campaign to discourage adults from buying alcoholic beverages for underage youths, particularly on weekends.

President of the Government of La Rioja, Pedro Sanz, presided over the signing of the agreement. The campaign will raise awareness of the penalties that may result from buying alcohol for underage drinkers - between 600 and 30,000 euros.

The agreement for this campaign has been signed by the heads of the malls in La Rioja six chains (Auchan, Carrefour, Day, Eroski, Lidl and Simply) and the Association of Supermarkets in La Rioja. As part of the campaign, the supermarkets themselves will collaborate in identifying adults who purchase alcohol for minors. Within this campaign, each will display signs that the purchase of alcoholic beverages by adults where it is intended for consumption by children can lead to an administrative penalty and a fine.

This campaign is included in the Rioja Minors and Alcohol Strategy 2014-2020, which with a budget of 7.5 million euros, aims to prevent consumption alcohol and other drugs in the region.

The efforts of the Ministry are aimed at delaying the age of first use of drugs and alcohol, reduce their overall consumption and reduce the harm caused to the health of young people.

Sanz has appealed to the responsibility of adults **“who are complicit in the abuse of alcohol among young people”**. He claimed that youth access to alcoholic beverages is made easy by adults and this leads to children have a low perception of risks that have the use of these substances. The ultimate goal, he said, is to achieve **“a sound and healthy region, rich in values, something for which the performance of the regional government is insufficient and requires the collaboration of all society”**.

Public health community encourages European Commission to “revive” scientific group of Alcohol Forum

On March 20, the European Health Alliance (EHA) along with UEG, EASL, Eurocare and the Royal College of Physicians wrote an open letter welcoming the initiative by the European Commission to reframe and potentially expand the competences of the EU Alcohol Health Forum (EAHF).

The Forum, which aims at providing scientific advice and guidance on alcohol research, has been inactive for about two years.

However, signatories of the letter believe that the EAHF can play an important role in breaking through the status quo by stimulating discussions between forum members, for instance by identifying European research priorities that could potentially be included in the Horizon 2020 Programme.

The letter makes recommendations for the future tasks and structure of the Science Group:

- A new call for experts should be launched to refresh the reserve list and fill up the empty seats in the Science Group.

- The current workload may be too heavy for the group members and (additional) financial means should be made available for calling on external research institutes to support the work of the Group.

Proposed future tasks:

- Identify European research priorities that would potentially be included in the Horizon 2020 programme.
- To contribute to reducing the many current gaps in alcohol research.
- To continue providing scientific opinions to the EAHF on the basis of existing research studies.
- To be a scientific broker for discussions within the EAHF.
- To be proactive and also monitor and communicate newly conducted research relevant for the alcohol field to the EAHF.

epha.org/6000

Driving while intoxicated in Italy: towards zero tolerance

According to European Commission figures, every year more than 10 thousand people in Europe die in accidents caused by alcohol and driving while intoxicated, representing over a third of the 28 thousand registered deaths on the roads in 27 European countries in 2012.

These figures were released during the first Italian event within the project SMART (Sober Mobility Across Road Transport), organised by the ANIA Foundation for Road Safety and the European Transport Safety Council, which took place in Rome on 3rd April.

The meeting, titled "Driving while intoxicated in Italy: towards zero tolerance", was attended by representatives of the European Union, politicians and stakeholders who discussed the most effective measures to reduce the number of road deaths caused alcohol from a social and political perspective.

Antonio Avenoso, executive director ETSC, said "If all drivers would comply with the European laws on driving while intoxicated, we could save thousands of lives each year. Now we finally have the tools to do this". He cited progress in Ireland, where increased penalties have had a great effect in recent years.

The Secretary General of the ANIA Foundation, Umberto Guidoni - the Institute of Medicine estimated that alcohol-related traffic accidents in Italy account for 30-35% of the total. Of concern, particularly in the last decade is the increasing proportion of alcohol consumers in Italy and the changed places and times of intake of alcohol. Habits have changed, especially among the younger consumers, who are more likely to binge drink. These attitudes have an impact on driving styles and road safety, he said.

The "pan-European" SMART partnership is managed by ETSC, and supported by The Brewers of Europe. SMART is one of the commitments of the two organisations as part of the "European Alcohol and Health Forum.

Filippo Terzaghi of AssoBirrareported on the campaign "Drink Or Drive", a three-year project created by AssoBira and UNASCA, the main association of driving schools and automotive consultancies in Italy.

The first two editions in 2009 and 2011 involved more than 3,000 driving schools belonging to UNASCA, where those applying for driver's licence followed a lesson devoted to the risks associated with the consumption of alcohol when driving and the rules of the new Highway Code. (For a three year period, newly qualified drivers are not allowed to consumer any alcohol when they intend to drive). The editions also targeted some of the most important Italian universities, with the goal of reaching young students.

In the 2012-2013 the campaign included a national tour of 9 cities and tested over 13 thousand Italians.

etsc.eu/3-april-2014-drink-driving-in-italy-towards-zero-tolerance/



Belgian Brewers apply for UNESCO recognition

Together with the culture ministers from the Communities of French- and German-speaking Belgium, Flemish minister Joke Schauvliege has submitted an application to Unesco requesting that Belgium's beer culture be recognised as Intangible Cultural Heritage. The application was completed with the help of the Belgian Brewers federation and the input of several beer-related associations, including the International Trappist Association and the High Council of Artisanal Lambic Beers.

There are thought to be more that 1000 Belgian beers on the market including "the largest selection of authentic, locally produced beers of any country in the world," they said in a joint statement. "This unbelievable diversity in terms of colour, taste and production methods makes up a huge part of the pride taken in our cultural and gastronomic heritage."

The request will be considered next year.

unesco-vlaanderen.be

University of Kentucky modifies drinking rules

University of Kentucky officials are drawing up new rules to allow students to drink on campus, as part of an effort to limit off-campus drinking after a series of student riots. The move is a recognition that the school's dry campus policy isn't working and that by restricting alcohol consumption on campus, drinking has moved off campus, causing problems for residents living in those areas and pushing students further from the sight of university officials.

"Off-campus drinking is a major problem at universities," says East Carolina University's Jennifer Cremeens, who studies campus alcohol policies. *"And I think many of them are moving to a harm-reduction policy, finding ways to monitor and control students' drinking rather than trying to stop it altogether."*

Dry campus policies were introduced in the US a few decades ago as universities wanted to show that they were providing a healthy environment for their students. Historically, student unions often included bars for those over 21, but many colleges closed them down believing that would influence students' drinking behaviour.

Cremeens published a study last year in the American Journal of Health Studies finding that 24% of schools surveyed prohibited all possession of alcohol on campus compared with 32% in 2005. Stuart Usdan, a co-author of the survey, says that when bars were on campus, university officials could oversee the establishment and make sure it didn't promote outrageous drink specials that could lead to binge drinking.

"The thought was that you could monitor this, that it was a more controlled environment," Usdan says. *"So allowing more drinking on campus may be a way for universities to regain some of that control."*

The university has yet to say under what guidelines drinking will be allowed, but the hope is that the shift will help prevent situations like the off-campus riots in the last few years that led to multiple arrests and property damage.

"This might give off a negative impression that they're being too care-free about this, but off-campus drinking is a much bigger problem," Usdan says. *"By bringing it on campus, they may be able to minimise some of the problems."*

Michigan study shows positive results on DUI recidivism rates

In 2010, the Foundation for Advancing Alcohol Responsibility (FAAR) supported a new law enacted by the Michigan Legislature that would allow repeat drunk driving offenders to receive restricted licenses after a 45-day license suspension if they had an ignition interlock device (IID) installed on their vehicles, and if they were participants in one of Michigan's DWI Courts. The restricted licenses allow offenders to drive to and from work in the course of employment, as well as to school, court, probation meetings, treatment, drug and alcohol testing, interlock facilities, and court ordered self-help meetings and others. The law required the Michigan Association of Drug Court Professionals (MADCP) to undertake an evaluation of the effectiveness of the programme, which FAAR helped to fund.

At a press conference at the State Capitol in Lansing, the MADCP reported the success of the programme in the third and final year to reduce recidivism among repeat drunk driving offenders.

Among its key findings, the study shows:

- Repeat offenders who had an IID installed and also

participated in a DWI Court had significantly lower recidivism as compared to offenders who were in a DWI court without the IID requirement, and among offenders on traditional probation.

- Repeat offenders in the programme had an IID compliance rate of 98.2%.
- The Programme Failure Rate for offenders who installed an IID and participated in the DWI court programme was 10%, compared to 34% for offenders who did not install the IID but participated in the DWI.

There is now a waiting list for participation in Michigan's DWI courts and MADCP is expanding DWI courts across the state to accommodate the increased demand. The MADCP Board has agreed to extend the study for an additional two years to acquire five years of programme data that will allow examination of the programme's long-term success in preventive recidivism.

responsibility.org/eaton-county-michigan-dwi-court-ignition-interlock-pilot-project

US adults aged ≥25 years smokers and regular drinkers analysed by education level

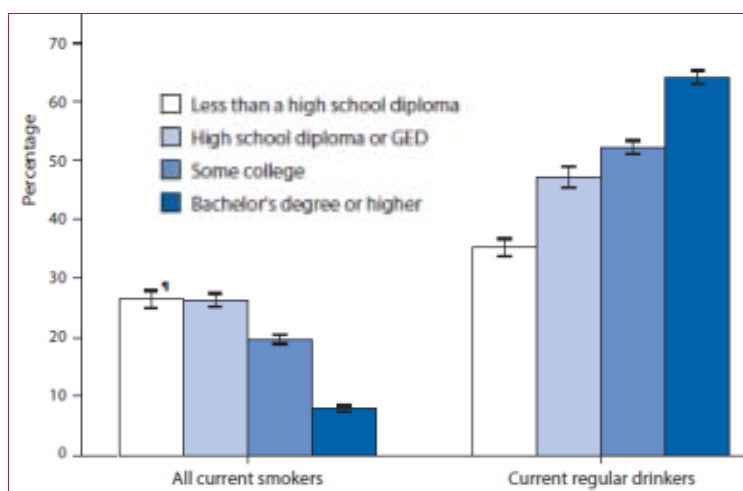
The US Centre for Disease Control (CDC) has issued a report on the percentage of adults aged ≥25 years who were current smokers or current regular drinkers, by education level based on data from the National Health Interview Survey, United States, 2012

Current smokers have smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days. A current regular drinker had at least 12 drinks in his or her lifetime and at least 12 drinks in the past year. Highest education completed consists of four categories: 1) adults with less than a high school diploma, 2) adults with a high school diploma or general equivalency diploma (GED), 3) adults who attended some college including those receiving associate's degrees ("some college"), and 4) adults who completed a bachelor's degree or higher.

Among adults aged ≥25 years in 2012, 26.5% of those who did not graduate from high school and 26.4% who had a high school diploma or GED were current smokers, compared with 19.7% who had attended some college and 7.9% with a college degree. In contrast, 64.2% of college graduates were current

regular drinkers, compared with 52.3% of adults with some college, 47.3% of high school graduates or GED recipients, and 35.3% of adults who did not finish high school.

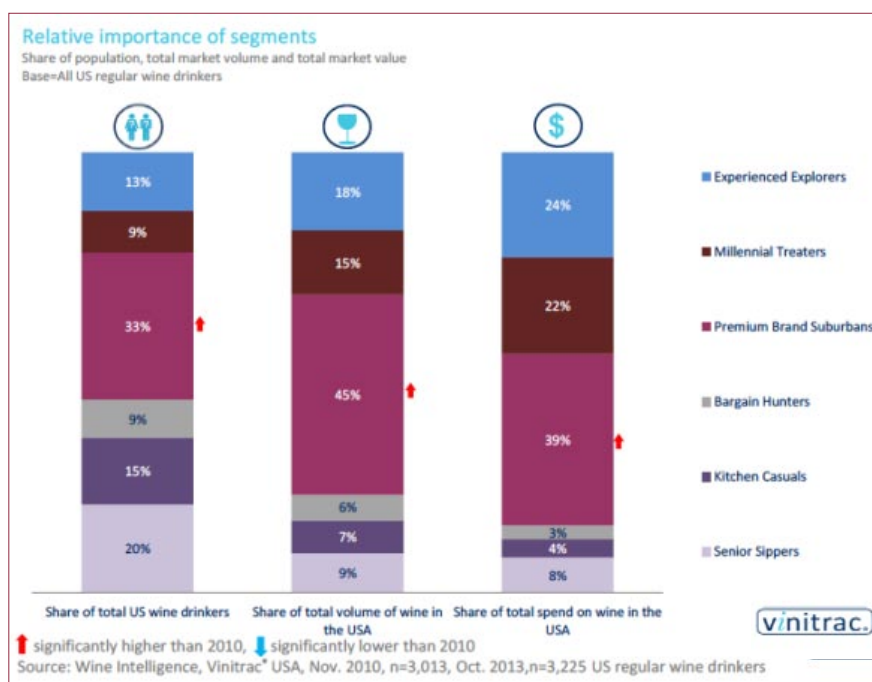
Source: Blackwell DL, Lucas JW, Clarke TC. Summary health statistics for U.S. adults: National Health Interview Survey, 2012 (provisional report). Vital Health Stat 2014;10(260). cdc.gov/nchs/data/series/sr_10/sr10_260.pdf



Wine Intelligence US Portraits 2014

A Wine Intelligence report identifies six consumer types, or Portraits, which between them classify the behaviours of the US monthly wine drinking population currently estimated at 90 million. These groups vary considerably in their different approaches

to wine consumption. Some –the Experienced Explorers –are experimental in their choices and will pay top prices for the right bottle. Kitchen Casuals, by contrast, are generally more concerned about a bargain than where a wine comes from.



“Since the 2010 US Portraits study there has been a noticeable shift in the tectonic plates of the American wine market. In some ways not much has changed –the proportion of Experienced Explorers, Millennial Treaters, Bargain Hunters and Kitchen Casuals is not far off where it was four years ago. But it’s a very different story when it comes to the largest Portrait group of all: the Premium Brand Suburbans.” Premium Brand Suburbans have an average age of 48, are “frequently brand savvy, seek value, and know what they like”. Wine is part of their lives but is “a fairly routine purchase”.

wineintelligence.com

Powdered alcohol approved in 'error'

The Alcohol and Tobacco Tax and Trade Bureau rescinded its April 8 'label approval' of controversial new product Palcohol.

The federal government admitted that its recent approval of Palcohol—a powdered alcohol which turns water into vodka and rum—was actually done in "error." The Alcohol and Tobacco Tax and Trade Bureau granted Palcohol "label approval" on April 8 only to withdraw it 13 days later. **"TTB did approve labels for Palcohol,"** it said in a statement. **"Those label approvals were issued in error and have since been surrendered."**

Palcohol's parent company Lipsmark said in a statement that "there seemed to be a discrepancy on

our fill level, how much powder is in the bag" and that the approvals were surrendered on the afternoon of April 21. "This doesn't mean that Palcohol isn't approved... It just means that these labels aren't approved. We will re-submit labels." Palcohol will have to resubmit labels for approval to the bureau, which is part of the Department of Treasury.

The government had originally approved various types of Palcohol—ranging from lemon drops to cosmopolitans. Various news outlets noted the approval of the product more than a week later, when it began covering the science and safety of the powdered drink.

New research and recommendations on teens and distracted driving in US

Motor vehicle crashes are the leading cause of death for teens – one-third of those crashes involve a teen driver who had been drinking and 10% of 15 to 19 year old drivers involved in a fatal crash were reported as distracted at the time of the crash. These statistics are included in the Journal of Adolescent Health Supplement 'Driver Distraction: A Perennial but Preventable Public Health Threat to Adolescents'. The report is important and timely as the prom and graduation season, May's annual Global Youth Traffic Safety Month and the summer approaches.

The Supplement, sponsored by the Foundation for Advancing Alcohol Responsibility (FAAR), explores causes of distracted driving among our nation's teens and the contributing researchers offer recommendations that are both useful and practical to help reduce the incidence of distracted driving among teens.

The Supplement opens with a letter from former Secretary of the US Department of Transportation Ray LaHood who led the fight to raise awareness of the dangers of distracted driving among both youth and adults during his tenure from 2009 to 2013. Followed by ten peer-reviewed articles that explore a range of distracted driving topics from attention to peer and parental influence, to passenger distractions and intervention strategies such as bans on text messaging. With a focus on identifying the risk and protective factors, and designing effective interventions for novice drivers, the Supplement also reviews current literature and identifies future research needs.

jahonline.org/issues?issue_key=S1054-139X%2814%29X0002-9

Industry launches TV ad highlighting right to complain about alcohol commercials in Australia

In Australia, the alcohol industry has launched a TV ad that aims to remind consumers about their right to complain about alcohol advertisements they think fall foul of the advertising regulations.

The ad was created by Clemenger BBDO, has been launched by the Alcohol Beverages Advertising Code Scheme, a body involving the three major alcohol industry associations – the Brewers' Association, the Distilled Spirits Council of Australia and the Winemakers' Federation of Australia – as well as leading retailers Woolworths and Coles. It comes

amid current debate about alcohol related violence and the role of marketing in fuelling that behaviour.

Spokeswoman for the campaign Denita Wawn, who is also CEO of the Brewers' Association, said their research showed a lack of awareness of existing regulation and the avenues for consumers to complain about alcohol advertising. The ad will air on Free TV and subscription television.

mumbrella.com.au/wp-content/uploads/2014/03/ABAC-video-2.mp4

New liquor laws proving effective in New Zealand

In New Zealand, Alcohol Healthwatch director Rebecca Williams praised early results following the introduction of the Sale and Supply of Liquor Act, saying they were a positive demonstration of what could be achieved with effective laws.

The Sale and Supply of Liquor Act gave stronger powers to authorities on December 18 last year, including spot fines for breaching liquor bans, closing bars at 4am and one-way door policies. Police say the laws are working — from December 18 to February 26, they recorded 1,258 fewer alcohol-related violent incidents compared with the corresponding time last year.

Official figures show that more than 2,500 fines have been issued in the first 10 weeks of the laws aimed at quelling alcohol-fuelled violence. And officers are sheeting responsibility home to families — taking young drunks home and handing \$250 fines to parents. In some cases, siblings have been fined after letting younger family members use their IDs.

Police have also been issuing fines to under-age drinkers in bars. Police national alcohol harm prevention manager Inspector Ben Offner said 61

spot fines were issued in the first two months to mainly under-age drinkers caught trying to dupe bar staff. In several instances sisters were each given an instant \$250 fine after the older one shared her identification with an under-aged sibling.

In the first 10 weeks of the new liquor laws, police issued 2,503 alcohol infringement notices and 1,719 warnings throughout New Zealand. Most fines were for drinking where there was an alcohol ban.

The Waikato police district, which includes New Year holiday trouble spots Whitianga and Whangamata, recorded the highest number of offences with 634 instant fines and 470 warnings. It was followed by Wellington with 748 people receiving fines and warnings. The capital city also recorded the most pronounced drop in violent crime with a 31% fall in night-time disorder compared with a year ago. Queenstown had the highest number of fines for a provincial centre.

The police district of Waitemata, which encompasses West Auckland and the North Shore, recorded the lowest number of warnings and infringement notices.

Adolescent “non-drinkers” increases sharply over a decade in Australia

Rates of non-drinking among Australian adolescents aged 14-17 years have increased sharply over the past decade with over half now abstaining from alcohol.

The percentage of Australian adolescents who did not drink, defined as not drinking alcohol over the past 12 months, jumped from 33% in 2001 to just over 50% in 2010.

Dr Michael Livingston from the National Drug and Alcohol Research Centre (NDARC) said that the changes had occurred at roughly the same rate over a wide range of regional, socio-economic and demographic subgroups.

For example while young people living in remote areas were less likely to abstain than city dwellers, abstention in both groups had increased at roughly the same rate.

Nearly two thirds of young people living in homes where a second language is spoken do not drink alcohol compared with just under half of those in English-only speaking households.

But the rate of increase in abstainers compared with 2001 was roughly the same in both groups.

Rates of abstention declined sharply with age, with 73% of 14 year-olds classified as non-drinkers in 2010 compared with just under a third of 17 year-olds. However rates of abstention in both age groups had increased significantly compared with 2001, when 57% of 14 year-olds and 18% of 17 year-olds had abstained from alcohol.

“The shift in drinking behaviour is likely the result of broad cultural factors,” said Dr Livingston. “The Australian population is increasingly multicultural, with a steady rise in residents from typically lighter-drinking cultures. So the trend toward alcohol abstention among Australian adolescents could have something to do with deep cultural beliefs, increased social concerns about young drinkers, and subtle changes in immigration.”

Source: Trends in non-drinking amongst Australian adolescents. Livingston M. *Addiction*, vol 109, iss 6, p922–929, June 2014. Article first published online 10 Apr 2014.

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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