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UK

AIM Digest
PO Box 2282
BATH, BA1 2QY, UK
T: +44 (0)1225 471444
F: +44 (0)1225 427444

E: info@Aim-Digest.com
Web sites: www.aim-digest.com
www.drinkingandyou.com

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Please contact Sherry.Webster@aim-digest.com for information about AIM's sponsorship levels.

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Peter Duff – Chairman,
T: +44 (0)1225 471444
E: peter.duff@aim-digest.com

Helena Conibear – Executive Director,
T: +44 (0)1300 341601
E: helena.conibear@aim-digest.com

Alison Rees - Deputy Editor
E: alison.rees@aim-digest.com

Sherry Webster – Finance and
Administration Director
T: +44 (0)1225 471444
E: sherry.webster@aim-digest.com

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Sweden

A new form of punishment for drunk drivers under consideration in Sweden would allow some offenders to keep their driver's licences provided they installed an alco-lock on their vehicles.

A report issued in October by a government commission studying the use of alcohol locks did not propose implementing a general requirement that all new cars be outfitted with an alcohol lock because, according to the commission, a general requirement for alcohol locks could be considered to impede competition, and would thus require approval by European Union authorities in Brussels.

Under the new proposal, those convicted of drunk driving would be required to drive using an alcohol lock for one or two years, depending on the severity of the offence.

The government is expected to put forward a formal legislative proposal regarding alcohol locks sometime next year.

Uruguay

A campaign has been launched to promote moderate drinking in Montevideo, Uruguay. The scheme, called Consumo Cuidado, targets 1,800 bars, pubs and restaurants across the Uruguayan capital city. The campaign was initiated by a local NGO called El Abrojo, the Psychology department of the state-run Universidad de la Republica, the city council and Uruguay's drugs commission JND.

Rather than targeting drinkers, the organisations have focussed their efforts on bar and pub attendants and restaurant waiters, giving them advice on how to help people who tend to drink in excess and providing information on what to do in case of alcohol poisoning or other problems.

Lithuania

The Lithuanian parliament has imposed new restrictions on the sale of alcoholic beverages. As of 2009, the sale of spirits will be prohibited after 10pm. Trade in alcohol will only be permitted from 8am until 10pm. Having an open bottle of alcohol inside a car will also be prohibited. A ban preventing the sale of beer in kiosks will come into effect from 2010.

Westminster Health Forum on Alcohol and Responsibility

On the 20th October, an interesting debate was hosted by the Westminster Health Forum on Alcohol and Responsibility. An array of speakers with differing viewpoints and backgrounds were given an opportunity to present for 10 minutes, before joining a panel on the topic they were contributing to:

Binge drinking, everyday drinking who is at risk and why?

A public health perspective was given by Professor Mark Bellis of the North West Public Health Observatory (NWPHO) and Professor Sir Charles George, Chair of the Board of Science at the British Medical Association (BMA).

The BMA has defined (in its report on alcohol), 'binge drinking' at six units (8g) or more for women and eight or more for men. Sir Charles cited UK confusion concerning units, a switch to more alcoholic drinks by consumers and called for targeted interventions to reduce alcohol related harm.

Professor Mark Bellis drew on the North West Public Health Observatory new calculations, of which he is lead author, for alcohol attributable fractions, which implicate alcohol in 44 diseases, to a greater or lesser degree and, questionably, lay a large burden of alcohol attributable fractions (including late onset diabetes, cardio vascular disease and stroke) to women consuming between 1-20g a day. The new figures estimate that there are 811,000 alcohol related hospital admissions and deaths a year and claim that the figure will increase by 80,000 a year.

Cathie Smith from the Qualifications Department of the British Institute of Innkeeping (BII) cited targeted approaches from the Institute that are attempting to reduce alcohol related harm. This includes the training of bar staff and member employees in server training and licence compliance for example. The BII have also developed an alcohol awareness qualification for 17 and 18 year olds as part of 'the schools project', which is informing pupils in participating schools about alcohol its effects, the law and potential consequences. This is estimated to have reached 12,000 pupils in a year, with 4000 achieving the alcohol awareness certificate.

Simon Clarke, founder of 'The Free society' cited the importance of personal decision making and

responsibility and defended the right of the individual to drink too much if they so wish, as long as their behaviour doesn't have a negative impact on others (violence and disorder). He questioned 'scare mongering' distorted statistics and the consequential reaction of 'imposing exaggerated responses to exaggerated problems' - such as the recent banning of alcohol on public transport in London, such 'gesture politics' and blanket measures do not address the targeted need for the vulnerable according to Mr Clarke.

The health consequences of alcohol and binge drinking

Surprisingly, Crispin Acton did not draw on the Department's success in that for most sectors of the population, across all age groups, alcohol consumption and more importantly, damaging patterns of drinking are falling. This is also reflected in the reduction in alcohol related crime figures. However, alcohol related hospital admissions and alcohol related mortality, are both increasing - This is partly due to alcohol consumption being better accounted for, the list of alcohol related causes being expanded in calculations, and for females, reflect the underlying increase in alcohol consumption over the last 20 years.

The Department of Health (DoH) is delivering a raft of measures including the Know your limits consumer campaign, patient interventions by GP's, local alcohol interventions for primary care and A&E. All the initiatives are too recent to be evaluated concerning their effect. Crispin Acton did state the protective effects of moderate drinking for those over 40. He also made a firm differential between the effects of long term heavy drinking versus occasional episodic drinking. The DoH estimates that 8% of men and 6% of women in the UK drink at higher risk levels - that is above 6 units a day for women and 8 units for men.

According to Crispin Acton, the second stage of price and promotion report will be released in November, which prompted an extensive discussion as to the need or otherwise for a minimum price for alcohol in UK that continued throughout the morning.

The social impact of alcohol related crime and disorder

Chief Inspector Shaun de Souda Brady highlighted the

effectiveness of partnership, targeting and research when seeking to reduce the alcohol related harm and disorder. Police assumptions that residents concerns in Muswell Hill concerned noise from high street night spots, found that, after holding public consultation that crime and disorder revolved around revellers in residential streets after leaving premises, defacing gardens and cars, noise and fighting. A targeted approach that involved better public transport and cab services, police presence and tackling gangs preying on customers on the streets and in buses, a voluntary minimum age of entry to the clubs of 21 and communal barring of antisocial customers combined to halve violent crime during the operation.

Alcohol and Young People

Tania Rawle, Senior Policy Advisor to The Department of Schools and Families on substance misuse reported on the progress of the Youth Alcohol Action plan and where they are in producing an integrated alcohol module for 11-15 year olds in schools. A social marketing campaign targeted at parents is planned for Spring 2009 after a 12 week period of consultation. Resistance is still a problem regarding including drug and alcohol education in the curriculum due to the amount of material teachers have to fit in already.

A report on progress and possible mechanisms for progress was released on the 24th October. The Youth Alcohol Action Plan has clearly highlighted the 'window' when children need to be reached - with a tipping point of age 13 when trying alcohol moves from the home on special occasions to more regular consumption in different environments by age 15. The strategy recognises that alcohol consumption is part of 15 year olds' society and the education is being tailored accordingly with coping mechanisms, how to resist peer pressure and equipping parents for example. Consumption among under eighteens is reducing significantly, although the marginalised 15% of youth are drinking more units than 10 years ago (11 units a week). This 15% are often 'poly users' of various drugs, tobacco and alcohol and suffer high rates of truancy and social exclusion, making them a difficult sector to reach conventionally.

What more needs to be done to reduce alcohol related harm in the UK?

Mike Benner spoke on behalf of the consumer group CAMRA, emphasizing the importance of the community

pub as a safe, social and regulated environment where people can enjoy a drink. His association also asks for targeted measures rather than blanket policies which punish all drinkers - such as higher taxes, he is, however happy for a minimum price for alcohol in the retail sector as the disparity in price between the off trade and on trade has diverged significantly

Peter McKenna from London Ambulance service confirmed that alcohol related ambulance call outs were increasing (04/05 - 07/08). When questioned as to whether this was due to more effective recording and attribution of call outs to alcohol during the period, he didn't believe this was the case. The service is employing imaginative programmes to reduce alcohol related admissions to A&E by the commissioning of a 'booze bus' at weekends in Camden and Waterloo and a similar 'safe space' at Liverpool street station, where drunk people or those with minor injuries can be treated and left to sober up without taking up valuable beds and time at A&E.

Avis Johns, Director of External Affairs at The Drink AWARE Trust, presented the Trust's new campaign, targeting middle age drinkers by questioning 'what's in your recycling?', the campaign has been launched as a pilot in London and two major cities initially. John's wants Drink Aware to be seen as the consumer's friend and a hub of good information.

Kate Blakeley, Head of Social Responsibility at Diageo called for co-regulation between authorities and the industry to move the social responsibility standards and the Portman Group code forward effectively without making more laws, extending it to the retail sector. Penalties would be applied through existing powers held by local authorities if premises flout regulations. Blakeley called for any policy to be evidence based, joined up and targeted, rather than piecemeal. Finally she called for a social marketing partnership between all those aiming to reduce alcohol related harm through consumer outreaches - to include government and Drink AWARE.

Deirdre Boyd, Editor of Addiction today, focused on the importance of family values and parental example. Boyd also highlighted the danger of teaching use through education if not very carefully handled - i.e. this is how you do it, rather than effective strategies of avoiding peer pressure and difficult situations. Boyd

dismissed health warnings as ineffective, unless very large with alternating messages and called for better training on alcohol in medical schools.

Guy Mason, Public Affairs Director at ASDA, employing 170,000 staff in 347 stores, defended retailers stance on selling alcohol cheaply. The group has responded by suspending the sale of alcohol in town centre stores between midnight and 6am and rigorously training staff in refusing under age sales and removing irresponsible products such as shots and super strength lager and cider. ASDA's social marketing is to include tips on responsible drinking on it's milk in the run up to Christmas (as this way the message will therefore reach almost every household in Britain and provoke conversations).

Finally, Nick Sheron Head of Clinical Hepatology at The University of Southampton spoke of his front line experience as a hepatologist dealing with the effects of excessive alcohol consumption. He illustrated the downward curve of alcoholic liver disease in traditionally high alcohol consuming countries such as France and Spain, and the UK's increase over the same time period. What is unclear in data collection in the UK, at present, is to what degree alcohol is responsible for this increase, in comparison with the contribution from to liver disease from the increase in obesity, sedentary lifestyles and poor diet in the UK over the same time period. Don Shenker of Alcohol Concern and Nick Sheron admitted this is not possible to separate out and that the contribution of obesity over the next decade to liver disease will increase significantly.

To conclude, the conference provoked some interesting debate on already well aired opinions, policy options and ways forward, voluntary and statutory.

For more information email info@westminsterforumprojects.co.uk.

Does drinking pattern modify the effect of alcohol on the risk of coronary heart disease?

A recent Italian study evaluated the strength of the evidence provided by epidemiological literature investigating drinking pattern modifies the effect of alcohol intake on the risk of coronary heart disease (CHD).

The study was based on a meta-analysis of observational studies, using data from Medline, citation tracking, from 1966 to 2006.

The researchers reviewed previous studies investigating the level of alcohol intake, combined with the frequency of alcohol consumption and/or pattern of alcohol drinking affecting the risk of CHD. The researchers included in their study cohort and case-control studies reporting sufficient data to perform statistical analyses and using people who abstained from alcohol as the reference. Six (4 cohort and 2 case-control) out of 118 studies reviewed met the inclusion criteria.

Compared with those who abstained from alcohol, regular heavy drinkers and heavy irregular or binge drinkers showed significantly different pooled relative risks of 0.75 (95% confidence interval 0.64 to 0.89) and 1.10 (1.03 to 1.17) respectively. The dose-response relation between the amount of alcohol intake and CHD risk was significantly different in regular and irregular drinkers. A J-shaped curve, with nadir around 28 grams of alcohol per week, and last protective dose of 131 grams per week, was obtained including drinkers who consumed alcohol for 2 days a week or less. Conversely, in people who consumed alcohol for more than 2 days a week a significant protective effect was seen even when drinking high amounts of alcohol.

This meta-analysis suggests that binge and heavy irregular drinking modify the favourable effect of alcohol intake on the CHD risk. Small amounts of alcohol consumed regularly offer the most significant CHD protection.

Source: Does drinking pattern modify the effect of alcohol on the risk of coronary heart disease? Evidence from a meta-analysis V Bagnardi W Zatonski, L Scotti, C La Vecchia, G Corrao *Journal of Epidemiology and Community Health* 2008;62:615-619; doi:10.1136/jech.2007.065607

WHO submission - The case for moderate drinking

Alcohol in Moderation was founded in 1991 as a not for profit independent organisation. It monitors scientific publications on the association between moderate alcohol drinking and health for its journal and websites.

It is of increasing concern to AIM and its Council that the public health approach to reduce alcohol related harm takes little account of the acceptable place of moderate drinking in society.

Clear parameters of moderate drinking

Accumulating scientific evidence (more than 100 studies from 25 countries) suggests that consumption of wine, beer and spirits does not pose a health risk to the vast majority of consumers who choose to drink in moderation.

AIM's recommendations also emphasise that adults should enjoy alcohol beverages in a sensible manner, preferably around mealtimes or in other responsible social settings that do not put themselves, or others at risk.

Moderation is the key to a healthy diet and lifestyle. It has not been possible to determine the exact inflection point in dose where a potentially beneficial, or harmless dose changes to a potentially harmful one, hence definitions of a drink and responsible drinking guidelines vary from country to country. Moderate drinking is generally medically defined, however, as up to 20g a day (one or two standard drinks) for women and 30g a day for men. Consumers should follow moderation guidelines such as those in the UK 1995 sensible daily drinking guidelines (2-3 units of 8g a day for women or 3-4 units of 8g for men) or the Dietary Guidelines for Americans which define moderation as up to two drinks (14g) a day for men and up to one drink a day for women.

Further, consumers should avoid alcohol during pregnancy, when driving, working with machinery or at heights, when on certain medications or if there is a personal or family history of certain illnesses.

Our message is that small amounts of alcohol on a regular basis (as little as one drink a day) confers the health benefits to a large segment of the adult population. 'Saving up' units for drinking on one or two occasions a week is not considered moderate drinking.

We endorse the WHO recommendations, where national guidelines do not exist of:

2 – women should not drink more than two drinks a day on average

3 – men should not drink more than three drinks a day on average

4 – Men or women should not to exceed four drinks on any one occasion

0 – Avoid alcohol in some situations, such as when driving, if pregnant or in certain work situations and abstain from drinking at least once a week.

Associated health benefits for certain segments of the population

The well documented beneficial effects of moderate alcohol intake on physical health are generally demonstrable among middle-aged or older adults, and are especially related to reductions in risk of many of the diseases of ageing (e.g., coronary heart disease, ischemic stroke, osteoporosis and bone density, type 2 diabetes, dementia). Often ignored are the less formally documented but still important beneficial effects of moderate alcohol intake on psychological and social well-being.

The beneficial effect of moderate drinking has been questioned by some in public health, hence the evidence base below.

Most recently for those over 70 (see reference report via: www.aim-digest.com/gateway/pages/oldage/articles/summary%20doc%20-%20ES.pdf by Dr Erik Skovenborg - 'Alcohol - boon or bane for the elderly')

Valid component of a balanced lifestyle, irrespective of any health benefit

Although there are few demonstrable physical benefits associated with moderate alcohol use for pre menopausal women or men under 40, it is recognised that alcohol, consumed in the right context, in moderation with friends, at meal times, to celebrate, commiserate or unwind has both psychological and social benefit as a relaxant, stimulant and social lubricant. Alcohol in moderation has been enjoyed by many societies over the millennia and forms part of the Christian and Jewish religion.

Therefore, with or without the associated health benefits of moderate drinking for certain sectors of the population, drinking has a rightful place at the heart of many cultures and societies.

It should be noted, in the context of 'alcohol harm reduction' that the majority of consumers drink moderately most of the time. For example, in the UK it is estimated that 6% of women and 8% of men drink at hazardous levels (Department of Health). It is important that alcohol harm reduction policies do not penalise moderate drinkers, but are targeted at those causing harm to themselves or others through their drinking.

AIM also recognises that nearly half of world's adult population chooses not to drink for cultural, religious or health reasons. AIM does not advocate that non consumers should consume alcohol in order to improve their health, but that moderate drinking and the cultural, agrarian and social contribution of drinking that is interwoven into the fabric of many nations and cultures has a rightful place in society.

Evidence base

One of the first studies to suggest an inverse association between moderate alcohol consumption and coronary heart disease (CHD) was published more than 30 years ago by Professor Arthur Klatsky in 1974. Since then, more than 100 studies from 25 countries have confirmed and strengthened the association, with the protective effect applying predominantly to post menopausal women and men over 40.

Evidence from these studies suggests that beneficial changes in HDL cholesterol levels, clotting factors, insulin sensitivity, and markers of inflammation provide biological plausibility to the association. Moderation, defined as up to 20g a day for women and 30g a day for men, as recognised by most national government sensible drinking guidelines, is key.

Further epidemiological studies have assessed the importance of drinking patterns including frequency, quantity, and beverage choice. Most studies account for potential con-founders of the effect of moderate drinking - such as education, occupation, social status, physical activity, diet, and changes in alcohol consumption during lifetime.

The many epidemiological studies that have shown an inverse relation between alcohol and cardiovascular disease have come from a great variety of nations and cultures. Despite great diversity in the populations, study size, diet and lifestyle factors and length of follow-up the consistency and similarity of outcomes provide further support to the robustness of the findings. Inverse associations have been documented in France, Japan,

Denmark, Germany, Finland, Korea, Great Britain Australia, China, Italy, Puerto Rico, the Netherlands, Sweden, Yugoslavia and the US for example.

Despite the strength and consistency across studies, some still argue that generalisation of the results may not be possible because of the selected nature of several of these study populations. However, general population surveys including the National Health and Nutrition Examination Survey (NHANES) in the US and population based cohorts in the UK, China and Japan have also found benefit from moderate alcohol consumption.

More recent studies of alcohol and CHD have focused on subgroups defined by age or health status. Although alcohol in moderation will likely provide greater benefit for older populations where rates of CHD are highest, the etiology of CHD is such that moderate consumption in middle age also is beneficial. Several important risk factors for CHD, such as obesity and the prevalence of type 2 diabetes, both of which have been increasing in younger adults around the world, are consistently reported to be inversely associated with moderate alcohol consumption.

In addition studies show moderate alcohol consumption is inversely associated with second heart attack risk and indeed all cause mortality. Thus, in summary, the epidemiological evidence for an inverse association between moderate alcohol consumption and health amongst older populations is extensive and general to populations defined by age, ethnicity, geography, and prevalent health conditions.

A notable exception to the inverse association may be for breast cancer risk. A growing body of epidemiological studies show evidence for a positive association, even at moderate levels, (estimated lifetime increased risk of 6% per daily drink) for alcohol consumption and breast cancer risk. Lifestyle factors such as diet and adequate folate intake may weaken the positive association, but this is an area still under study.

It has been suggested that the inverse association between alcohol and all cause mortality may not be causal but because moderate drinkers may be better off, more likely to eat better, exercise more, and live a healthier life. Although most prospective studies of alcohol and cardiovascular risk are observational, trials have been conducted to study changes in markers of CHD such as HDL cholesterol, triglycerides, glycemic control, and clotting factors and support the conclusions of

the observational studies. Long-term trials of alcohol consumption and subsequent cardiovascular events are difficult to conduct due to the long follow up required, cost and ethical considerations regarding the randomization to alcohol or no alcohol consumption over many years, but are not impossible.

Parameters of misuse

Heavy or hazardous drinking (more than twice the moderation guidelines), inappropriate drinking (drinking to drunkenness), and binge drinking (more than five drinks in quick succession) have no health

benefits and are associated with both acute and chronic harms to health, both short and long term drinking at all in some circumstances is hazardous, such as when pregnant, on certain medications, when driving, suffering from some illnesses, working with machinery or at heights.

Alcohol misuse also includes the sale or marketing of alcohol to minors, the antisocial or violent behaviour that can be associated with excess drinking and drink drive.

For a list of references, please contact alison.rees@aim-digest.com

Adverse reactions to wine

The author states that wine contains chemical and biological contaminants. Symptoms such as facial flushing, asthma and oral allergic swelling and burning (oral syndrome) have been attributed to these contaminants and food additives. Their clinical implications should be known. Recent studies have reported a high prevalence of hypersensitivity symptoms after intake of alcoholic drinks in the general population. Red wine was the most common beverage implicated. Wine contains many contaminants. Some of them come from Hymenoptera insects that fall into the wine when grapes are collected and pressed. It has previously been reported that patients may be sensitised to Hymenoptera venom without previous stings and may develop allergic symptoms related to wine consumption. The aim of this study was to assess the potential importance of their sensitisation to Hymenoptera antigens as the cause of their symptoms and also to comment on other recent studies on wine hypersensitivity.

Results showed that there were patients with allergic symptoms related to wine consumption who were sensitised to Hymenoptera venoms by products in wine. Challenges were negative with sulfites, other additives and aging wines, but positive with young wines. Sera from all the patients detected Hymenoptera venom antigens. The authors state that this is the first report on cases of sensitisation to venom antigens by the oral route.

Professor R Curtis Ellison comments: This is a paper that is important to allergists as it suggests that the oral administration of substances produced by hymenoptera insects (that includes bees, wasps, and ants) that fall into wine when the grapes are being collected and pressed can lead to allergy when the product (e.g., red

wine) is consumed. The study is based on 5 patients seen in Spain who developed allergic-type symptoms after drinking either grape juice or newly-pressed red or white wine. The present study revealed no evidence of allergy to sulfites or other usual substances in wine, but to allergens produced by two types of wasps.

Allergy to wine is not rare, usually manifest by nasal stuffiness or wheezing, but (unlike what the public believes), it is almost never related to sulfites in wine. Neither is it related to substances such as milk proteins or eggs sometimes used in filtering (fining) the wine, but may relate to histamine substances in wine. Since wine comes from a plant, reaction to many types of plant products could result in an allergic reaction from wine. Further, alcohol itself (whatever the beverage) can lead to vasodilation of the cerebral vessels and result in headaches and other symptoms.

This report adds to this list substances getting into wine from common wasps in Spain (two species of hymenoptera) that apparently caused allergic symptoms even though the patients developing the symptoms had not been previously stung. The authors point out that this is the first report of such allergy developing from sensitisation to venom antigens by the oral route.

Another interesting result of this paper is that the allergic reactions occurred only when the subjects were given “young wines;” they did not show a response to the same types of wines that had been aged (they do not say how long the “aging” wines had been stored). The authors believe that fermentation can lead to denaturation of the antigen, so the potential allergy is eliminated with aging of the wine.

Article: Armentia A. Adverse reactions to wine: Think outside the bottle. *Current Opinion Allergy Clin Immunology* 2008;8:266-269.

Alcohol consumption and risk of heart failure

Heart failure (HF) is the leading cause of hospitalisation among the elderly, and 1 in 5 adults aged 40 years will develop HF in their lifetime. This study sought to evaluate the association between moderate alcohol consumption and incident HF.

A total of 21,601 participants of the Physicians' Health Study I who were free of HF and provided data on alcohol intake at baseline were prospectively followed up from 1982 to 2005. Incident HF cases were ascertained through annual follow-up questionnaires and validated with the use of Framingham criteria. During an

average follow-up of 18.4 years, 904 incident cases of HF occurred. The crude incidence rates of HF were 25.0, 20.0, 24.3, and 20.6 cases per 10 000 person-years for alcohol categories of <1, 1 to 4, 5 to 7, and >7 drinks per week, respectively. Corresponding hazard ratios (95% CI) were 1.0 (reference), 0.90 (0.76 to 1.07), 0.84 (0.71 to 0.99), and 0.62 (0.41 to 0.96), respectively, with P for trend=0.012 adjusted for age, body mass index, smoking, and history of valvular heart disease. There was no evidence for a strong association between moderate alcohol consumption and HF without antecedent coronary artery disease.

The authors conclude that although heavy drinking should be discouraged, the data indicate that moderate drinking may lower the risk of HF. The lack of an association between moderate alcohol intake and HF without antecedent coronary artery disease suggests that possible benefits of moderate drinking on HF may be mediated through beneficial effects of alcohol on coronary artery disease.

Source: Alcohol Consumption and Risk of Heart Failure in the Physicians' Health Study I. Luc Djoussé, MD, MPH, DSc; J. Michael Gaziano, MD, MPH *American Journal of Cardiology* Sept 2008.

Peptide ghrelin may be involved in both alcohol dependence and overeating

Ghrelin is a peptide, mainly produced in the stomach, but also found in small amounts in the brain. It is known to affect food intake by increasing feelings of hunger and the urge to eat. A new study by Jörgen Engel, professor of pharmacology at the Sahlgrenska Academy, University of Gothenburg has examined ghrelin's role in addictive behaviours. Findings indicate that variations in the genes producing ghrelin and its receptor are more common in individuals considered to be heavy drinkers.

For this research, scientists recruited 417 Spanish individuals from the general population (n=279) as well as heavy drinkers (n=138) admitted to a hospital for treatment. The study sample – comprised of abstainers, moderate and heavy alcohol drinkers – was then examined for single nucleotide polymorphisms

(SNPs) in the pro-ghrelin and growth hormone secretagogue receptors (GHS-R1A) gene.

Findings showed that SNP rs2232165 of the GHS-R1A gene was associated with heavy alcohol consumption. SNP rs2948694 of the same gene as well as haplotypes of both the pro-ghrelin and the GHS-R1A genes were associated with an increased body mass in individuals consuming heavy amounts of alcohol.

“Not only are these specific variations in the genes producing ghrelin and its receptor more common in heavy alcohol-using individuals,” said Engel, “these variations also seem to have an influence on the body weight of these heavy drinking individuals, as we found an association with an increased body weight in these patients. In other words, if you are

a carrier of these genetic variants in the ghrelin or ghrelin receptor gene, you are more susceptible to having multiple addictive behaviours such as alcohol dependence and overeating.”

“Our findings may help to explain the comorbidity of different addictive behaviours such as alcohol addiction and compulsive overeating,” said Engel, “providing clues to the genetic basis for the development of these kind of disorders. Ghrelin and its receptor could thus be targets for the development of new drugs for alcohol dependence or a subtype of alcohol-dependent individuals with eating disorders such as compulsive overeating.”

Source: Results will be published in the December issue of *Alcoholism: Clinical & Experimental Research* and are currently available at Early View.

Enzyme may reduce heart damage

US scientists have discovered that an enzyme that breaks down alcohol can also protect heart tissue against damage by free radicals, for instance as a result of heart attack or surgery.

The study was the work of researchers at Stanford University School of Medicine in California, and the Indiana University School of Medicine in Indianapolis. Senior author Dr Daria Mochly-Rosen, a professor of chemical and systems biology at Stanford University School of Medicine explained **“We’ve found a totally new pathway for reducing the damage caused by free radicals, such as the damage that happens during a heart attack.”**

Free radicals are highly unstable molecules that are necessary for many biological processes, but in their search to become stable, they can also cause undesirable damage to cells, including damage to heart tissue following heart attack or surgery.

In their background information the authors state that there is a lot of interest in developing drugs that limit the heart tissue damage that results from a heart attack or certain types of heart surgery. There was already evidence that heart muscle can be pre-conditioned to resist the damage caused by heart attack, and that moderate drinkers tend to have smaller and less severe heart attacks than teetotalers, but the underlying biology was still a mystery.

Mochly-Rosen and colleagues investigated aldehyde dehydrogenase 2 (ALDH2), an enzyme which is involved in breaking down alcohol and has been linked with reduced heart tissue damage following heart attacks in rodents. The researchers looked at the enzymes activated in heart attacks in rats that had been pretreated with alcohol and some that had not. They found that alcohol increased the activity of ALDH2 during heart attack by 20%, and led to a 27% drop in the associated damage.

Mochly-Rosen said that although the enzyme had been known about for some time, the researchers knew nothing about it except that it helped to break down alcohol in the bloodstream. They were not expecting to find ALDH2 to be a key antioxidant fighting the free radicals. The enzyme works by neutralizing the toxins produced by alcohol, aldehydes. But these are also the same chemicals produced when free radicals react with fat molecules, and these are inside every cell.

The body’s cells contain a lot of fat. **“It’s very easy for free radicals to find fat and oxidize it to aldehydes,”** explained Mochly-Rosen. Once the free radicals have turned fat into aldehydes, the aldehydes stick to DNA and other cellular matter and trigger unwanted processes that are

thought to cause many diseases, including heart attack, Parkinson’s and sun-induced skin ageing, said the researchers.

The researchers sought to find a way to increase the activity of ALDH2. With the help Stanford High Throughput Bioscience Center they found a molecule that could do this. Alda-1 is a tiny molecule that reduced heart attack damage by 60% in the rat model. Surprisingly, it works in an unexpected way: it protects ALDH2 from in turn being attacked by the aldehydes it removes.

Although Alda-1 has so far only been tested on rats, the researchers believe it has enormous potential in a range of applications, from reducing damage from heart surgery, neurodegenerative diseases, and skin damage from the sun. Another application could be to help people with a common mutation of ALDH2 that leaves them intolerant to alcohol and more susceptible to free-radical diseases. This mutation affects 40% of people of Asian descent.

Source: **“Activation of Aldehyde Dehydrogenase-2 Reduces Ischemic Damage to the Heart.”** Che-Hong Chen, Grant R. Budas, Eric N. Churchill, Marie-Hélène Disatnik, Thomas D. Hurley, and Daria Mochly-Rosen. *Science*, 12 September 2008, Vol. 321. no. 5895, pp. 1493 - 1495. DOI: 10.1126/science.1158554

Resveratrol prevents fat accumulation in livers of 'alcoholic' mice

Resveratrol may help prevent the development of alcoholic fatty liver by coordinating molecules that control fat metabolism according to a new study with mice. The research found that resveratrol reduced the amount of fat produced in the liver of mice fed alcohol and, at the same time, increased the rate at which fat within the liver is broken down.

Chronic alcohol consumption causes fat to accumulate and can lead to liver diseases, including cirrhosis and fibrosis of the liver. It can also result in liver failure. The study points to resveratrol as a possible treatment for alcoholic fatty liver disease, and as a way to prevent the disease in those who are at risk, but have not developed it.

The study builds on previous research, which suggests that alcohol inhibits two molecules that play a role in cell signaling and the breakdown of fats in the liver: AMP-activated protein kinase (AMPK) and sirtuin 1 (SIRT1). When alcohol inactivates AMPK and SIRT1, it allows fat to accumulate. Resveratrol does the opposite — activating AMPK and SIRT1, and helping to clear out fat.

In this study, the authors wanted to find out more about how this happens, at the molecular level. They divided mice into groups and fed all of them a low-fat diet. Some mice had resveratrol in their diet, some had resveratrol plus ethanol (alcohol), some had ethanol alone and some had neither ethanol nor resveratrol. The researchers used two different dose levels of resveratrol. At the end of the experiment, they examined the livers of the mice.

The researchers found, as they had expected, that resveratrol treatment increased the expression of SIRT1 and stimulated the activity of AMPK in the livers of mice fed alcohol. They further found that the increased expression of SIRT1 and AMPK led to:

- Reduction of sterol regulatory element binding protein (SREBP-1)
- Activation of peroxisome proliferator-activated receptor gamma co-activator alpha (PGC-1)
- Elevation of circulating adiponectin, a hormone produced by fat cells, which helps control obesity
- Enhanced expression of adiponectin receptors in the liver, which increases the effectiveness of the circulating adiponectin.

The findings suggest that resveratrol prevents alcoholic fatty liver by coordinating molecules that control fat metabolism. This prevents accumulation of fat in the mouse liver by both reducing the production of fat and burning off the fat that is there. Interestingly, the combination of alcohol with resveratrol appears to enhance the positive effects of resveratrol, said Dr. You, the study's senior author.

“Our study suggests that resveratrol may serve as a promising agent for preventing or treating human alcoholic fatty liver disease,” the authors concluded.

Source: Resveratrol alleviates alcoholic fatty liver in mice Joanne M. Ajmo, Xiaomei Liang, Christopher Q. Rogers, Brandi Pennock, and Min You. *Am J Physiol Gastrointest Liver Physiol*, Oct 2008; 295: G833 - G842.

Red wine may reduce risk of lung cancer

Cancer experts say drinking red wine may decrease the risk of lung cancer in men who smoke, because of its antioxidant properties.

Dr. Chun Chao, a research scientist at Kaiser Permanente Department of Research and Evaluation in Pasadena, California analysed data collected through the California Men's Health Study, which linked clinical data from California's health system with self-reported data from 84,170 men aged 45 to 69 years 210 cases of lung cancer occurred.

The researchers measured the effect of beer, red wine, white wine and liquor consumption on the risk of lung cancer, after adjustments were made for age, race/ethnicity, education, income, body mass index, history of chronic obstructive pulmonary disease or emphysema, and smoking history and the link was not seen with the consumption of white wine, beer, or liquor.

Among the study participants, there was on average a 2% lower lung cancer risk associated with each glass of red wine consumed per month and the most substantial risk reduction was amongst smokers who drank one to two glasses of red wine per day. The researchers say in these men there was a 60% reduction in lung cancer risk.

The researchers warn men that the best way to reduce lung cancer risk is to stop smoking and say even men who drank one to two glasses of red wine per day still face a higher lung cancer risk than non-smokers.

Source: Alcoholic Beverage Intake and Risk of Lung Cancer: The California Men's Health Study. Chun Chao, Jeff M. Slezak, Bette J. Caan and Virginia P. Quinn. *Cancer Epidemiology Biomarkers & Prevention* 17, 2692-2699, October 1, 2008.

Association of alcohol consumption with brain volume in the Framingham Study

A recent study reported in the October issue of Archives of Neurology suggests that an increase in the level of alcohol consumption is related to a reduction in brain volume.

Brain volume decreases with age at an estimated rate of 1.9% per decade, accompanied by an increase in white matter lesions, according to background information in the article. Lower brain volumes and larger white matter lesions also occur with the progression of dementia and problems with thinking, learning and memory. Moderate alcohol consumption has been associated with a lower risk of cardiovascular disease; because the brain receives blood from this system, researchers have

hypothesised that small amounts of alcohol may also attenuate age-related declines in brain volume.

Carol Ann Paul, M.S., of Wellesley College, Mass., and colleagues studied 1,839 adults (average age 60) who were part of the Framingham Offspring Study, which began in 1971 and includes children of the original Framingham Heart Study participants and their spouses. Between 1999 and 2001, participants underwent magnetic resonance imaging (MRI) and a health examination. They reported the number of alcoholic drinks they consumed per week, along with their age, sex, education, height, body mass index and Framingham Stroke Risk Profile (which calculates stroke risk based on age, sex, blood

pressure and other factors).

“Most participants reported low alcohol consumption, and men were more likely than women to be moderate or heavy drinkers,” the authors write. “There was a significant negative linear relationship between alcohol consumption and total cerebral brain volume.”

Although men were more likely to drink alcohol, the association between drinking and brain volume was stronger in women, they note. This could be due to biological factors, including women’s smaller size and greater susceptibility to alcohol’s effects. Prospective longitudinal studies are needed to confirm these results.

Source: Arch Neurol. 2008;65(10):1363-1367.

Researchers link gene mutations to risk of gout

A team of researchers from the United States and the Netherlands has identified mutations in three genes that are associated with high levels of uric acid in the blood, which is a risk factor for gout.

The team developed a genetic risk score composed of the number of uric acid-increasing mutations that each person carries (0 to 6), which was associated with up to a 40-fold increased risk for developing gout when comparing persons at lowest and highest risk.

The researchers conducted genome-wide association studies of more than 20,000 people enrolled in three large population-based studies investigating cardiovascular disease risk factors: the Framingham Heart Study based at Boston

University Medical Center; the Rotterdam Study based at Erasmus Medical Centre in Rotterdam, the Netherlands; and the Atherosclerosis Risk in Communities (ARIC) study based at Johns Hopkins University. Of more than 500,000 genetic variations that were evaluated, the analysis identified two genes, ABCG2 and SLC17A3, as novel risk genes for gout and confirmed the association of a third gene, SLC2A9.

“This research gives us a better understanding of the underlying causes of gout, which could lead to better prevention and treatment. Our evidence supports that a common pathway, the handling of uric acid by the kidney, is important in uric acid build-up and therefore

for the development of gout,” said study author, Anna Köttgen, MD, MPH, an assistant scientist in the Johns Hopkins Bloomberg School of Public Health’s Department of Epidemiology.

“Genetic risk scores like the one we developed for gout can help alert people at a very early age, well before uric acid levels rise, that they are susceptible to gout. The new insights are promising for drug development,” said Josef Coresh, MD, PhD, MHS, professor in the Bloomberg School’s departments of Epidemiology and Biostatistics.

Source: Association of three genetic loci with uric acid concentration and risk of gout: a genome-wide association study. The Lancet, Early Online Publication, 1 October 2008

Light drinking in pregnancy offers little harm to unborn children

Research led by Dr Yvonne Kelly at University College London suggests that light drinking by pregnant mothers does not increase the risk of behavioural difficulties or cognitive deficits. The study found that boys born to light drinkers get higher scores in vocabulary tests. Girls are also thought to benefit, with researchers finding those born to light drinkers are less likely to have emotional and peer interaction problems.

Dr Yvonne Kelly stated that, for some behavioural outcomes, children born to light drinkers were “less likely” to have problems compared to children of mothers who drank nothing at all. However, Dr Kelly conceded that her findings might be because light drinkers tend to be more socially advantaged than abstainers, but she added: “It may also be that light drinking mothers tend to be more relaxed themselves and this contributes to better behavioural and cognitive outcomes.”

Researchers examined data on 12,495 three-year-olds, looking at the mothers’ drinking patterns during pregnancy and assessments of the behaviour and mental skills of their children. They defined light drinkers as those who consume 1-2 units per week or per occasion.

Source: Light drinking in pregnancy, a risk for behavioural problems and cognitive deficits at 3 years of age? Yvonne Kelly, Amanda Sacker, Ron Gray, John Kelly, Dieter Wolke, and Maria A Quigley. *Int. J. Epidemiol.*, Advance Access published on October 30, 2008; doi: doi:10.1093/ije/dyn230

Research fails to explain alcohol’s preventative effect on diabetes

Researchers were surprised to find that reduced inflammation and improved blood-vessel function do not explain why women who drink moderate amounts of alcohol are less likely to develop type 2 diabetes.

Drinking moderately is known to reduce inflammation and improve endothelial function, as well as improve the body’s sensitivity to insulin. Joline Beulens of the University Medical Center Utrecht and colleagues studied 705 women participating in the Nurses’ Health Study who developed diabetes between 1989 and 2000, and 787 diabetes-free participants as controls. The latter either did not drink or drank, on average, 12.5 grams of alcohol daily.

The researchers found that for every 12.5 grams of increased alcohol intake, the risk of being diagnosed with type 2 diabetes dropped by 42 percent. However, statistical analysis showed that inflammation markers, markers of poor endothelial function, and degree of insulin sensitivity were not involved in the relationship between alcohol intake and diabetes.

On the other hand, the researchers found that levels of adiponectin -- a hormone secreted by fatty tissue that regulates how the body uses fat and glucose -- played a significant role in alcohol’s protective effects in women.

Source: Alcohol Consumption, Mediating Biomarkers, and Risk of Type 2 Diabetes Among Middle-Aged Women. J. Beulens, PhD, E. Rimm, ScD, Frank B. Hu, PhD, Henk F.J. Hendriks, PhD and K Mukamal, MD Research Fails to Explain Alcohol’s Preventative Effect on Diabetes

Cardioprotective effect comparison of red and white wines

Recent studies have indicated that white wine could be as cardioprotective as red wine. The present investigation compares the cardioprotective abilities of red wine, white wine, and their principal cardioprotective constituents. Different groups of rats were gavaged with red wine, white wine, resveratrol, tyrosol, and hydroxytyrosol. Red wine and its constituent resveratrol and white wine and its constituents tyrosol and hydroxytyrosol all showed different degrees of cardioprotection as evidenced by their abilities to improve postischemic ventricular performance, reduce myocardial infarct size and cardiomyocyte apoptosis, and reduce peroxide formation. It was discovered in this study that although each of the wines and their components increased the enzymatic activities of the mitochondrial complex (I-IV) and citrate synthase, which play very important roles in oxidative phosphorylation and ATP synthesis, some of the groups were more complex-specific in inducing the activity compared to the other groups. Cardioprotective ability was further confirmed by increased expression of phospho-Akt, Bcl-2, eNOS, iNOS, COX-1, COX-2, Trx-1, Trx-2, and HO-1. The results of this study suggest that white wine can provide cardioprotection similar to red wine if it is rich in tyrosol and hydroxytyrosol.

Source: Does White Wine Qualify for French Paradox? Comparison of the Cardioprotective Effects of Red and White Wines and Their Constituents: Resveratrol, Tyrosol, and Hydroxytyrosol, J. Dudley, et al *Agric. Food Chem.*, 56 (20), 9362-9373, 2008. 10.1021/jf801791d.

Heavy metal ions in wines: meta-analysis of target hazard quotients reveal health risks

The authors of a recent paper published in the Chemistry Central Journal state that metal ions such as iron and copper are among the key nutrients that must be provided by dietary sources. Numerous foodstuffs have been evaluated for their contributions to the recommended daily allowance both to guide for satisfactory intake and also to prevent over exposure. In the case of heavy metal ions, the focus is often on exposure to potentially toxic levels of ions such as lead and mercury. The aim of this study is to determine target hazard quotients (THQ) from literature reports giving empirical levels of metal ions in table wines using the reference upper safe limit value. Contributions to the THQ value were calculated for seven metal ions along with total values for each wine.

The THQ values were determined as ranges from previously reported ranges of metal ion concentrations and were frequently concerningly high. Apart from the wines selected from Italy, Brazil and Argentina, all other wines exhibited THQ values significantly greater than one, indicating levels of risk. The levels of vanadium, copper and manganese had the highest impact on THQ measures. Typical potential maximum THQ values ranged from 50 to 200 with Hungarian and Slovakian wines reaching 300. THQ values for a sample of red and white wines were high for both having values ranging from 30 to 80 for females based on a 250 mL glass per day.

The authors conclude that the THQ values calculated are concerning in

that they are mainly above the safe level of $THQ < 1$. It is notable that in the absence of upper safe limits, THQ values cannot be calculated for most metal ions, suggesting that further unaccountable risks are associated with intake of these wines.

Professor R Curtis Ellison comments: This paper has received a huge amount of media response within the first 24 hours of its on-line publication. Headlines include “Danger May Lurk in Some Foreign Wines” (LA Times), “Danger Lurking in Your Bottle of Red” (Times of London), “Researchers Question Health Benefits After Metal Found in Wine” (The Guardian), “Wine-drinkers Risking Parkinson’s With Every Glass” (In the News.Co.UK), and “Study: Many Wines Full of Dangerous Metals (FOX News), the latter adding “Researchers say if you’re the type of person who drinks a glass of wine – either red or white – every day, you may be damaging your health.”

Also being widely quoted is the authors’ statement in the Discussion of the paper: “The results from this study also question a popular belief about the health-giving properties of red wine: that drinking red wine daily protects you from heart attacks is often related to levels of anti-oxidants. However the finding of hazardous levels of metal ions which can be pro-oxidants leads to a major question mark over the protective benefits of red wine.”

The investigators took levels of metals that had been previously reported for wine from many

countries, then incorporated the data into an equation to calculate the THQ (Target Hazard Quotients), devised by the US EPA in 1989 to provide an index of heavy metals in seafood. The equation includes concentration and estimated duration of exposure to heavy metals, sex, average adult body size, and other factors to calculate the THQ for the metals.

The data used were from the literature, and no standards were used to judge the accuracy of the measurements from the numerous sources. Further, whether the THQ has relevance for metals in wine has not been shown. Wine has so many other substances, including many anti-oxidants that may operate in opposition to any oxidation products from metals, that it may be premature to estimate harm from only one group of constituents.

The key problem with this paper, however, is that you cannot use levels of any single constituent or group of constituents in wine to determine the long-term net effects on health. Luckily, we have data from hundreds of prospective epidemiologic studies over more than 30 years to estimate such effects. And there has been a remarkable consistency in such reports: moderate consumption of any type of alcoholic beverage is associated with lower risk of coronary heart disease, ischemic stroke, and other types of cardiovascular diseases.

Article: Naughton DP, Petroczi A. Heavy metal ions in wines: meta-analysis of target hazard quotients reveal health risks. Chemistry Central Journal 2008;2:22 doi:10.1186/1752-153X-2-22. (On-line publication October 30, 2008).

Alcohol drinking and risk of hospitalisation for chronic obstructive pulmonary disease

A recent study was presented at the CHEST meeting (The Annual International Scientific Assembly of the American College of Chest Physicians) found that moderate drinkers may be at lower risk for chronic obstructive pulmonary disease (COPD).

They studied 126,263 men and women who supplied baseline data at 1978–85 health examinations. Through 2004 a subsequent primary hospitalization diagnosis of COPD (ICD-9 codes 491–6, except 493) was made in 760 persons. COPD risk was estimated by Cox proportional hazards models including age, sex, ethnicity, education, smoking, body mass index, and 7 alcohol intake categories. Some models

included a yes vs. no composite Coronary artery disease (CAD) risk/symptoms covariate.

With lifelong abstainers as referent, adjusted relative risks (RR), 95 % confidence intervals (CI) for COPD were: exdrinkers = 1.29 (0.95–1.74), < day = " 0.83"> 1–2 dr/day = 0.76 (0.61–0.94, p = 0.01), 3–5 dr/day = 0.85 (0.65–1.12), and > 6 dr/day = 1.52 (1.04–2.24, p = 0.03).

An alcohol-COPD J-curve was present in whites, African-Americans, ex-smokers, light smokers, heavy smokers, younger and older persons, and in subjects with either chronic bronchitis or other COPD diagnoses. However, the apparent benefit at moderate

drinking levels was concentrated in women and subjects free of CAD history/symptoms.

Frequent wine drinking, both of red and white wine, was independently related to lower COPD risk. Covariate relations to COPD risk were as expected, with higher risk for older persons, men, smokers, and persons with low educational level.

These data show that, independent of smoking and CAD, moderate alcohol drinkers are at lower risk than lifelong abstainers of hospitalisation for COPD.

Source: Siu S, et al "Alcohol drinking and risk of hospitalization for COPD" CHEST Meeting 2008; 134: 19004S.

Childhood IQ possibly linked to adult alcohol use

Contrary to expectations, higher intelligence scores at age 10 may be associated with higher levels of alcohol intake and alcohol-related drinking problems during adulthood, study findings suggest.

Moreover, these associations appear "markedly stronger among women than among men," Dr. G. David Batty, from the University of Glasgow in Scotland, and colleagues report in the American Journal of Public Health.

However, "given that these findings ran counter to our expectations," the investigators call for further examination of this relationship.

Batty's team assessed associations between mental ability scores

obtained when 8170 boys and girls were 10 years old and their alcohol intake and alcohol problems when they were about 30 years old.

Of the 3895 men and 4148 women who reported drinking alcohol as adults, those with higher average scores on childhood mental ability tests were also more likely to have indications of alcohol problems in adulthood.

The association between higher mental ability in childhood and adulthood problem drinking became stronger among women than among men after allowing for socioeconomic factors such as social class during both childhood and adulthood.

Specifically, for every 15-point increase in childhood mental ability score, the likelihood of drinking problems increased 1.38 times for women, and 1.17 times for men. These unexpected findings, and the lack of other research in this area, indicate the need for "further examination of the relation between childhood IQ and adult drinking patterns," the investigators conclude.

Source: Childhood Mental Ability and Adult Alcohol Intake and Alcohol Problems: The 1970 British Cohort Study Am J Public Health, Oct 2008; doi:10.2105/AJPH.2007.109488

AIM – Alcohol in Moderation was founded in 1991 as an independent organisation whose role is to communicate ‘The Sensible Drinking Message’ and to act as a conduit for information from the industry, its associations and relevant medical and scientific researchers, legislation, policy and campaigns.

AIM Mission Statement

- To promote the moderate and responsible consumption of alcohol
- 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
- 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 the media, legislators and researchers involved in alcohol issues
- To direct enquiries from the media and others towards full and accurate sources of information
- To work with organisations, companies and associations to create programmes, materials and policies that promote the responsible consumption of alcohol.

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GP, Wine/ Medical Historian and
Author

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President American Council on
Science and Health

Conservative party conference - debate on reducing alcohol related harm and promoting social responsibility by the industry

At the Conservative Party Conference, a fringe meeting entitled “Round We Go: Curbing Problem Drinking” was hosted by the Policy Exchange and SABMiller. Shadow Health Minister Stephen O’Brien MP, Dr Nick Sheron, from the University of Southampton and Gavin Lockhart from Policy Exchange debated a range of issues including how government should deal with alcohol misuse, what role there is for personal accountability and better parenting, whether existing laws were being used effectively and what more the alcohol industry should be doing to promote social responsibility.

Stephen O’Brien MP, Shadow Minister for Health, said that the Conservative Party would seek to tackle alcohol misuse through voluntary agreements in the shape of a “Responsibility Deal” with business on alcohol and public health. Acknowledging the significant economic contribution that the alcohol industry makes to the UK, he said the Conservative Party did not want to criticise the alcohol industry and neither did it want to see alcohol stigmatised. He explained that self regulation was preferable to statutory regulations unless there had been demonstrable market failure. He favoured using the ‘nudge’ approach to changing behaviour rather than further regulation. The Responsibility Deal would include a campaign supported by Community Alcohol Partnerships, based on the successful example from St. Neots in Cambridgeshire. On taxation, he reinforced the Conservative’s focus

on targeting stronger alcoholic drinks.

Dr Nick Sheron, lead consultant hepatologist at Southampton General Hospital and Alcohol Concern Board Trustee, warned that the current rise in alcohol consumption represented a significant health problem for the future. His main concern was the increasingly low age of those suffering from liver disease and the inadequate health services for treatment. **“Alcohol is one of the most important issues the UK has to face, from a health, crime and disorder perspective. We should be looking for evidence-based solutions and we should be aware that if we do not find solutions, things will get worse before they get better.”**

The affordability of alcohol was an issue of concern to both speakers, in particular the affordability in the off trade. The role of parents was also considered key, with Stephen O’Brien highlighting the role and influence that parents can have on young people’s behaviour.

Closing the debate, Gavin Lockhart, Research Director for Health, Crime and Justice at Policy Exchange, said that **“industry efforts to promote individual responsibility should be welcomed and the Conservative plan to devolve licensing to councils is a step forward, but the debate on price continues.”**

To view the debate, please visit <http://www.talkingalcohol.com/index.asp?pageid=106&video=45>

Know your limits social marketing research

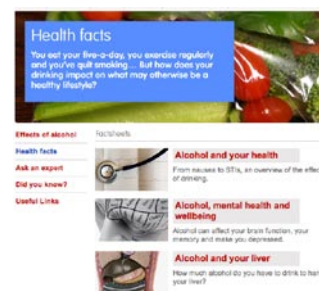
The know your limits campaign has recently developed two research reports as part of the on-going social marketing programme targeting harmful/higher risk drinkers. The two reports are ‘Harmful drinkers social marketing campaign - scoping report’ and ‘Insight & action to help reduce levels of hazardous & harmful drinking’

The DrinkCheck web page (part of the Units campaign), the Your drinking and You handbook, and an enhanced Drinkline service all constitute a “virtual pathway” being developed to help heavy drinkers cut down. This was augmented by work to promote IBAs by health care professionals, along with supporting materials.

Direct marketing is currently being piloted in the North West aimed at leading drinkers to the pathway.

To access the research reports visit www.nhs.uk/alcoholstakeholders and click on the Evidence Base tab on the home page.

Drinkaware Factsheets



Drinkaware are to produce a series of fact sheets. Currently available are fact sheets on ‘Alcohol and your health’, ‘Alcohol, mental health and well being’, and ‘Alcohol and your liver’. Over the next few weeks, topics including oral cancers and breast cancer will be added. For more details visit www.drinkaware.co.uk

Drinkaware Trust's public education campaign links recycling with excessive drinking in the home



The Drinkaware Trust's new £1m poster campaign shows a recycling bin overflowing with bottles with the slogan "Big party at the weekend?" and a bottle bank with the message "Do you come here often?"

The charity said people who drink more than the recommended limits at home are a "forgotten group" as most health campaigns target young people. Older drinkers are more likely to be settled with children, but their drinking can slide out of control.

"Drinking in the home can lull us into a false sense of security because we simply fail to take note of the amount we consume," said its chairman, Derek Lewis. "Many people are unwittingly at risk from the long-term health problems associated with drinking too much alcohol... With this campaign, we're

encouraging everyone to use the evidence of the cans and bottles in their recycling bins to gauge whether or not they're overdoing it."

The campaign comes after a new poll found Britons drink at home more often than in pubs, bars and restaurants. Drinkaware's Urban Life survey of 4,400 people found they drank alcohol at home nearly twice a week, compared with an average 1.5 times at a pub, bar or restaurant. One in six people also worried about the amount they drank, based on the contents of their recycling bin.

Drinkaware said many home drinkers were not drinking heavily, but needed to monitor their consumption. "The trust is not suggesting people give up alcohol. Alcohol does have a very positive part to play: it helps people to relax, it's an important part of our social life," Lewis said. "It can be part of your 'most days' lifestyle without creating risks, providing you manage your consumption." The Drinkaware pilot campaign has launched in London and Manchester initially.

Britain rejects lower drink-drive limit

Road Safety Minister Jim Fitzpatrick has stated that the government consultation document on drink-driving, to be published in coming weeks, will not propose a lower limit. He said: "It will not be recommending a reduction from 80mg to 5mg. We are not convinced that dropping to 50mg is the right answer. Drivers who are between 50mg and 80mg are not the ones we are most worried about. It's the

ones above 100mg. "If you look at a comparison with other countries which have 50mg rather than 80mg, our safety levels compare very favourably." Mr Fitzpatrick said that the consultation would focus instead on better enforcement of the existing limit. Police could gain new powers to stop and test drivers at random rather than, as at present, needing to have suspicion that an offence is being committed.

PASS Director and Administrator

The Proof of Age Standards Scheme (PASS) has announced the appointment of Kate Winstanley as its Director/Administrator.

PASS Chairman, Robert Humphreys said, "I am delighted that Kate Winstanley, well-known to many in the world of sensible alcohol production and retailing, joins us as our first Director and Administrator, charged with the tough task of building on the six years' groundwork done so far and further improving recognition and acceptance of the PASS hologram. As the former Head of Policy at the Portman Group and more recently as the Drinkaware Trust's first Director of Campaigns and Information, Kate is outstandingly well-qualified to address the challenges PASS faces.

"With well over two million PASS hologrammed cards having been issued, and cards held by around 40% of 18- and 19-year-olds, PASS is in many areas the first choice for proof of age, but there remain too many pockets of resistance, usually based on ignorance of the scheme and of the crucial official and retailer support it enjoys, or on a simple misunderstanding of the nature of due diligence.

"With responsible young people, their parents and the authorities increasingly concerned that carrying passports or driving licences on an evening out risks identity theft as well as significant cost and inconvenience, PASS should be the universal standard, but we still have some way to go before this message reaches all the parts it needs to."

For further details visit: <http://www.pass-scheme.org.uk/>

Scotland Alcohol Awareness Week challenge

As part of Alcohol Awareness Week (October 5-11, 2008), members of the public were asked to make positive choices about how and when they drink. The seven Alcohol Awareness Week challenges were:

- choose at least two alcohol-free days per week
- keep a drinking diary
- go for smaller glasses
- try lower alcohol beer
- eat before you drink
- get more out of your weekend by drinking responsibly
- drink plenty of water

The annual awareness week brought together Ministers, sports stars, the alcohol industry, health professionals and the voluntary sector. Chief Executive of Alcohol Focus Scotland Jack Law said:

“We used the week to encourage people to take small steps to cut down their drinking - whether that’s having an extra alcohol-free day every week, pouring smaller measures or choosing a lower alcohol drink. It’s easier than you might think to make a positive change which will benefit your health in the short and longer term.”

Scottish Parliament vote to keep alcohol purchase age of 18

SMPs voted 72 to 47 in favour of the motion, *“That the Parliament rejects the Scottish Government’s proposals to raise the age limit for purchasing alcohol from off-licences and supermarkets from 18 to 21.”*

The proposal was just one of a raft of measures put forward by the Scottish Government as part of a bill aimed at tackling alcohol problems. The Criminal Justice and Licensing Bill also includes proposals to set minimum prices for alcohol and the introduction of separate aisles for alcoholic drinks in supermarkets and shops. Other measures include ending “three for the price of two” type promotions, and introducing a “social responsibility fee” for some alcohol retailers to help pay for the consequences of alcohol misuse.

Serious legal doubts have been raised over the plans to set minimum prices for drinks, with experts warning that the controversial proposals could face court challenges in three different areas – European competition law, UK competition law and judicial review under the Scotland Act.

Councils to be given power to stop under-21s buying alcohol in shops

The Scottish government is to press ahead with plans to reform the licensing system despite its defeat in Holyrood, by giving local authorities the power to ban under-21s buying alcohol in shops.

In a change of emphasis, they will now argue that local licensing boards should be given the power to decide whether bans are appropriate in their areas.

The expectation is that nationalist-controlled councils will adopt the policy as well as those whose communities are blighted by drink-fuelled violence and antisocial behaviour.

While ministers would prefer to legislate on the matter, with the support of opposition MSPs, it may be possible for the scheme to be introduced in the form of guidance to local authorities.

However they believe it will be difficult for opposition MSPs to vote against the move, which they claim is an example of greater local democracy.

Hospitals hand out alcohol measuring cups

Measuring cups that allow people to monitor how much alcohol they are drinking were handed out at hospitals in Lanarkshire, Scotland as part of Alcohol Awareness Week. Specialist nurses were on hand at stalls in the entrance areas of Wishaw General, Monklands and Hairmyres hospitals. NHS Lanarkshire hoped the cups would help people pour more accurate measures when drinking at home.

UK age checking online

Online retailer The Drinks Shop has introduced software to automatically check the age of potential customers on the electoral register. The company said the system broke new ground for age verification in web-based drinks retailing. As well as checking names and ages against the electoral roll, the system will check utility company records to weed out under-age purchasers.

Managing director Tim Francis said: *“Our controls include interfacing automatically with sources such as BT and credit reference agency databases... The development and maintenance is a substantial investment for us and we believe that all online drinks retailers and other industries with similar customer age requirements should implement such controls by law.”*

Model alcohol policy to address workplace alcohol issues in Scotland

A new initiative to help employers across Scotland develop responsible workplace alcohol policies has been developed by the Scottish Government & Alcohol Industry Partnership, in conjunction with the Scottish Centre for Healthy Working Lives, the 'model alcohol policy' provides employers with off the shelf best practice guidelines to deal with alcohol related problems at work.

The policy aims to create a working environment which underpins the health, safety and welfare of employees, as well as corporate responsibility and legislative requirements. The initiative is supported by the Scottish Government and a wide range of organisations, including The Scotch Whisky Association, the Scottish

Trades Union Congress (STUC) and CBI Scotland.

Ian Tasker, Assistant Secretary of the STUC, said: "The STUC welcomes the publication of this model policy to assist employers to educate and support workers with alcohol related workplace problems. Employers too often move quickly to disciplinary procedures without considering positive interventions that have benefits for the employee and the employer. Often this is as a result of absence of useful information on how to draw up policies so we see this as a very positive move by the Scottish Government & Alcohol Industry Partnership."

Douglas Meikle, The Scotch Whisky Association's Alcohol Policy Manager, said: "As major employers in Scotland, distillers strongly

support the new model workplace policy and have been instrumental in its development, building on existing best practice across the industry. Our aim is to support an environment where employers are able to respond to alcohol issues and employees feel able to seek help if facing alcohol problems."

Shona Robison MSP, the Scottish Minister for Public Health, said: "There is a very significant economic cost to Scotland from lost productivity at work and days off sick due to alcohol. It is therefore very important that businesses think about how alcohol consumption can have an impact on their employees, have the processes in place to support staff experiencing difficulties, and manage the effect alcohol can have on their ability to perform their duties effectively."

Scottish survey finds young people are more likely to see their peers as role models than their parents

The majority of secondary school-age children in Scotland do not look up to their parents and have no clear ground rules at home, according to a large-scale survey carried out by the YMCA.

The youth charity analysed the well-being of young people using a measure of assets and deficits which was previously used to assess three million young people in the United States. This is the first time the technique, developed by Minnesota's Search Institute, has been employed in Europe.

Funded by Lloyds TSB, the YMCA spent £47,000 researching the views of 5200 youngsters in Perth and Glasgow, who responded to 156 questions.

The results show that 68% of Scots aged 11-17 say their family life provides high levels of love and support and 72% of young people are optimistic about their own future.

However, most do not look up to their parents or other adults - only 21% said their parents or other adults they knew provided a model of responsible behaviour. The majority - 60% - look instead to their peers as role models.

While 55% of young people say that their school provides clear rules and boundaries, and their behaviour is monitored in the community by neighbours and others, barely a quarter (27%) say they have to abide by clear rules and consequences in

their family, and that their parents keep track of where they are.

The report also reveals high levels of anti-social and risky behaviour by young Scots. One in four boys confesses to having shoplifted once or more in the last 12 months and 49% of boys had hit someone in the past year.

The study found that 35% of young people reported that they had been drunk at least once within the last 30 days.

Girls were just as likely to have been drunk as boys, and some 17% of S1 pupils made this claim, rising to 65% in S6. One in four 12 and 13-year-olds said they had been drunk recently.

Drinkaware.ie takes new approach to student responsible drinking message

According to Drinkaware.ie ‘Students know all about alcohol, they have been lectured, have heard all the sermons and have seen the statistics. What they don’t have is the useful tips on how to save money, ensure they don’t miss the best part of the night, avoid hangovers and fall victim to the beer goggles effect’. ‘No Nonsense’, is a drinkaware.ie guide with a difference, giving students all of the information that proves being drinkaware isn’t at odds with having a vibrant student social life.

“Drinkaware.ie has taken a new approach to the student responsible drinking message with the ‘No Nonsense’ guide. Full of hints and tips, the guide is designed to give students all the information they need to make their night out a better one. In addition to a washroom advertising campaign, over 55,000 copies of the guide have been distributed to colleges nationwide. I would encourage students starting back in college to pick up the guide and take five minutes to check it out for themselves” said Fionnuala Sheehan, drinkaware.ie CEO.

The guide which is available throughout colleges and online at drinkaware.ie has been produced in collaboration with the Union of Students in Ireland.

The student campaign which is being rolled out over the 2008/2009 academic year will also include a drinkaware.ie national film competition and all you need to know about the ‘Top Ten Booze Myths’.

‘No Nonsense’ is available free from www.drinkaware.ie.

8% decline in alcohol consumption predicted in Ireland

The Drinks Industry Group of Ireland [DIGI] has reported a ‘very significant’ decline in alcohol consumption during the first half of this year. An analysis of excise receipts from the Revenue Commissioners reveals that alcohol sales are down 9% in the first nine months of the year (January – September inclusive) and down 12% in the month of August alone compared to August 2007 while beer sales in particular are down 33%.

DIGI Chairman Michael Patten explained that the figures meant that consumption levels were falling sharply.

“On the basis of these figures, it’s likely that we’ll see a decline in alcohol consumption per adult of 8% or more during the current year – that’s more than the decline we saw over the past six years combined (-7%).”

“Despite common perceptions, alcohol consumption in Ireland

peaked in 2001 and has been in decline since. These figures show however that the pace of that decline has picked up dramatically,” he concluded.

Figures from the UK show similar trends. Findings from the latest WSTA poll, show those spending £5-£6 in shops have fallen from 22 to 17% in the last 3 months. Numbers in the on-trade buying wine priced below £12 are up from 48% to 55%.

Alcohol labelling already agreed – DIGI

In response to Alcohol Action Ireland’s call for the introduction of advisory labelling on alcohol containers, the Drinks Industry Group of Ireland (DIGI) pointed out recently that the alcohol industry and the Government had already agreed on the introduction of these very advisory labels on alcohol products.

According to DIGI Spokesman Ray Gordon the industry, Government and other social

partners (including representatives of the health profession) had reached agreement some time ago on the need to introduce labels advising women not to drink while pregnant and information on the number of units in the drink being consumed.

Ray Gordon said that the call from Alcohol Action Ireland on this issue was “surprising given that some of their board members were party to the agreement which has

been reached.”

“The question is not if these warnings will be introduced, it’s when....and the industry is awaiting firm proposals from Government on the detail of how this can be advanced,” stated Ray Gordon who added that the industry looked forward to the introduction of labels which will help consumers make informed choices about their drinking as early as practicable.

EU responsible drinking consumer web portal



The European Forum for Responsible Drinking and CEPS have created a EU responsible drinking consumer web portal with flags leading consumers to the 27 member countries. Where responsible drinking websites exist, consumers are taken to their nation via a flag entry point.

Although many country websites do not yet exist, The EFRD and CEPS commissioned AIM - Alcohol in Moderation to produce a internationally peer reviewed web based responsible drinking template that can be adapted by any of the country's that do not currently have a responsible drinking website for consumers.

EFRD/CEPS are completing this project as part of their commitments to The EU Alcohol and Health Forum. The new web address gives producers an opportunity to take consumers to responsible drinking information.

Visit the site at <http://www.responsibledrinking.eu/>

'Drunk & Disorderly' on-the-spot fines introduced in Ireland

Persons found to be drunk in public can now be fined €100 on the spot (or €140 in respect of disorderly conduct in a public place) following the signing into law by the Minister for Justice, Equality and Law Reform Mr Dermot Ahern TD of new regulations under the provisions of the Intoxicating Liquor Act 2008. The 2008 Act was introduced last July at which time Gardaí were given the power to confiscate alcohol from anyone they suspected to be under 18 years-old or where alcohol was being drunk in public. The new provisions allow for the issue of fixed charge notices for the offences of intoxication in a public place and disorderly conduct in a public place, offences under sections Four and Five of the Criminal Justice (Public Order) Act 1994.

The Gardai have also been given the power to instruct a person to leave an area in a peaceful manner.

A copy of the Regulations is available on www.justice.ie.

Advice for parents of Dutch teenagers

Findings of a survey by the Trimbos Institute suggest that Parents underestimate substance use (alcohol, cannabis and tobacco) of their children. In particular they tend to underestimate beverage use. As the children age the parents gradually lost their grip and vision on the alcohol consumption of their children. Through a new website www.uwkinden.alcohol.nl parents can get tips and advice on how to handle the issue of alcohol in the family.

The survey data was presented to Rouvoet Minister of the Ministry of Youth and Family at the start of a regional campaign aimed at strengthening the knowledge and awareness of parents about alcohol. The website uwkinden.alcohol.nl plays a prominent role.

The Parents survey conducted in 2007 included more than 4,000 parents and more than 7500 students from all levels of the education. The research provides a unique insight into the knowledge, estimates, beliefs and actions of parents with regard to substance use of their children.

European Alcohol and Health Forum: commitments for action by forum members

In line with the process described in the Charter establishing the European Alcohol and Health Forum the members of the European Alcohol and Health Forum have made a series of commitments aimed at reducing alcohol-related harm. A complete overview of the 101 commitments introduced so far is can be viewed at http://ec.europa.eu/health/ph_determinants/life_style/alcohol/Forum/docs/overview_commitments_en.pdf.

An analysis of the 79 commitments received until April 2008 is contained in the Summary Report on Commitments made by members of the European Alcohol and Health Forum. A new summary report, covering all current 101 commitments, will be published after the 3rd plenary meeting of the European Alcohol and Health Forum on 13 November 2008.

The NSDUH Report: Alcohol use among pregnant women and recent mothers: 2002 to 2007

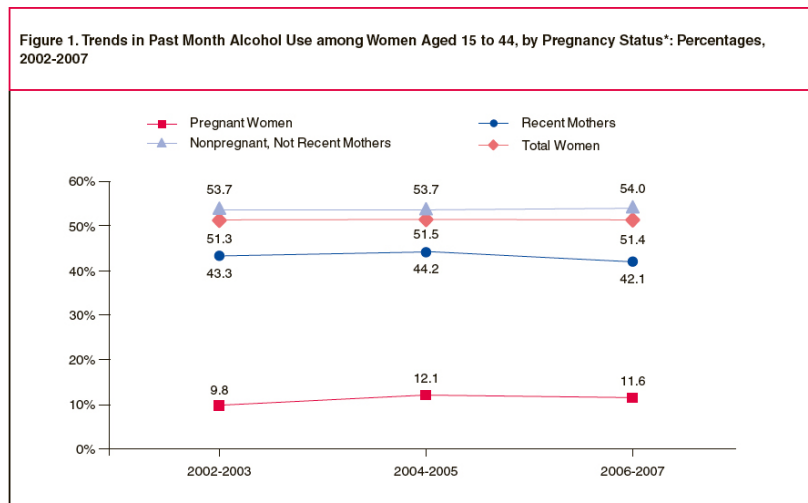
Data from SAMHSA's National Surveys on Drug Use & Health conducted in 2002 through 2007 were used to compare alcohol drinking rates, frequency, and quantity among women aged 15 to 44 divided into three groups: (1) pregnant, (2) recent mother (i.e., had a child within the past 12 months), and (3) all other women in this age group. A stable pattern of drinking was found for all three groups during this period.

0. Combined data from SAMHSA's 2006-2007 National Surveys on Drug Use & Health examined drinking patterns among women aged 15 to 44. Pregnant women (11.6%) were significantly less likely to have used alcohol in the past month than recent mothers (42.1%) or all other women (54.0%). Among current alcohol drinkers, both pregnant women

and recent mothers drank alcohol on fewer days than other women (4.9 days for pregnant women, 4.4 days for recent mothers, and 6.1 days for all other women). Pregnant and recent mothers also drank fewer drinks on their drinking days (2.4 drinks for pregnant women, 2.5 drinks for recent mothers, and 3.0 drinks for all other women).

Of concern is the fact that pregnant women aged 15 to 17 were more likely to drink alcohol in the past month than pregnant women in other age groups and they were likely to consume over 3 drinks on the days they drank.

Read Full Report on <http://oas.samhsa.gov/2k8/pregnantAlc/pregnantAlc.pdf>



Source: SAMHSA, 2002-2007 NSDUHs.

Jim Beam launch 'Talking About Alcohol' booklet



Jim Beam have produced a booklet to help their customers and employees enjoy alcohol responsibly. The booklet addresses questions such as:
 What are Beam Global's beliefs about alcohol and drinking?
 What happens when you drink, and

how should you handle it?
 Are there benefits from drinking?
 How to recognize risky drinking?
 What does being responsible look like?

Beam Global have also extended their web-based information on responsible drinking, linking to programmes it supports around the world which promote alcohol harm reduction.

For more information, please visit http://www.beamglobal.com/cs/social_responsibility

Sweden: Youth a target for drink smugglers

The consumption of smuggled alcohol is three times more common among those aged 16-18 than other age groups. Figures from CAN show that 30% of girls and 26% of boys in class nine admit to drinking smuggled spirits at least once in the past year. This represents an increase of 18% and 22% respectively on 2000.

Smuggled spirits are most commonly found in southern Sweden, near the German border although the goods are sold across the whole of Sweden.

Australian wine researchers first to crack the code

In a world first, scientists at the Australian Wine Research Institute have cracked the genetic code of a wine yeast.

“Availability of improved wine yeast will put winemakers in a stronger position to control fermentation and develop wines with the right quality, character desired alcohol level and flavour”, said Dr Anthony Borneman, a Senior Research Scientist at the AWRI.

“We’ve laid important groundwork for further sequencing and comparative analysis of other wine yeast strains.”

Dr Paul Chambers, Research Manager of AWRI’s Biosciences team said. “We will soon know where to look to find out why some

wine yeasts can be troublesome and we will be better placed to improve and tailor them for production of particular wines for target markets.”

Using the latest technologies available through the Australian Genome Research Facility, the AWRI’s sequencing project took about six months to complete. This is quite amazing in light of the fact that just over ten years ago, the first yeast strain to be sequenced took 70 laboratories, 10 years and cost millions of dollars.

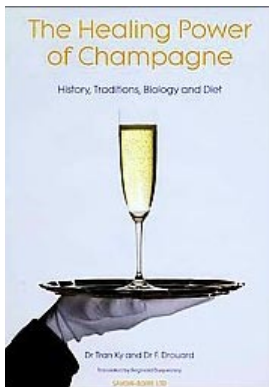
“Today, we are unlocking the potential of yeast for winemakers, using genestour advantage, without resorting to genetic engineering,” said AWRI Managing Director, Professor Sakkie Pretorius.

“By understanding the biology of yeast and the chemistry of wine we can use science to give the Australian wine sector an opportunity to innovate and maximise its market potential.”

Unlocking the secret to what makes wine yeast tick will put winemakers in a stronger position to use science to their advantage. This work paves the way for the development of new yeast strains, potentially leading to innovative solutions to tackle stuck fermentation and to create wines with desired alcohol levels and flavour profiles.

Download the AWRI Report from http://news.reseau-concept.net/images/oiv_uk/client/2008_Borneman.pdf

A light hearted review of a frothy subject... Foaming whirls as white as Cleopatra’s melted pearls by Harvey E. Finkel, M.D.



The Healing Power of Champagne, by Tran Ky and François Drouard; translated from the French by Reginald Duquesnoy (Bristol, UK: Savoir-Boire Limited, 2006, 156 pp, £25 large format).

The combination of healing and Champagne is irresistible to me, and I did enjoy this book by a pair of French doctors. It is written in a pleasantly propulsive style, perhaps

to the credit of the translator, and is generously adorned with amusing historical illustrations. Much of its frequently cited medical “science,” however, seems to me humbug.

The delicious juice of the Champagne hills thus has a dual advantage. It is both incontestably the most agreeable of all wines and also the best adapted to the wise laws the Creator has laid down for the conservation of health and life.

“The wines of Champagne can dilute thickened humours, clear obstructions, provoke urine, stimulate expectoration, fight anemia, ward off gout and destroy stones, and protect against epidemic diseases’ - Jean Claude Navier, Doctor-Regent, Faculty of Medicine, Reims, 1778

Conclusions are not adequately explained in detail, and are seldom referenced to specific up-to-date research. This book is reminiscent of authoritarian tomes of yore that expounded the authors’ views of what ought to be. Alcohol (page 43) and red wine (page 44) are incorrectly indicted as predisposing to atherosclerosis.

Champagne all through the book is lauded as distinctly and specifically healthful.

Despite the humbug, the book contains much truth, and it does strongly advocate moderation. It dispels some of the mythology surrounding *crise de foie*, that peculiarly French affliction. And perhaps its aim is true as it quotes the “astute observer”: Half a bottle of champagne is worth half of Harley Street.

ORGANISATIONS

UNITED KINGDOM

Alcohol Concern

First Floor 8 Shelton Street, London WC2 9JR
Tel: (0207) 395 4000 Fax: (0207) 395 4005
website www.alcoholconcern.org.uk

Alcohol Education And Research Council
Abell House, John Islip Street, London SW1P 4LH
Tel: (0207) 217 5276

The Medical Council on Alcohol
3 St. Andrew's Place, London, NW1 4LB
Tel: (0207) 487 4445 Fax: (0207) 9354479

The Portman Group
7-10 Chandos Street, Cavendish Square,
London W1G 9DQ
Tel: 020 7907 3700 Fax: 020 7907 3710
email: Info@portmangroup.org.uk
website: www.portman-group.org.uk

The Drinkaware Trust
7-10 Chandos Street, Cavendish Square,
London W1G 9DQ
Tel: 020 7307 7450 Fax: 0207 307 7460
email: info@drinkawaretrust.org.uk
website: www.drinkawaretrust.org.uk
www.drinkaware.co.uk

Alcohol Focus Scotland
2nd Floor 166 Buchanan Street, Glasgow G1 2NH
Tel: 0141-572 6700 Fax: 041-333 1606
website: www.alcohol-focus-scotland.org.uk

BBPA British Beer and Pub Association
Market Towers, 1, Nine Elms Lane, London. SW8
5NQ Tel: 020 7627 9191 Fax: 020 7627 9123
email: jwitheridge@beerandpub.com
website: www.beerandpub.com

Wine & Spirit Education Trust
International Wine & Spirit Centre
39-45 Bermondsey Street
London SE1 3XF
Telephone: 020 7089 3800 Fax: 020 7089 3845
Email: wset@wset.co.uk

The Wine and Spirit Trade Association
International Wine & Spirit Centre
39 - 45 Bermondsey Street
London SE1 3XF
tel: +44 (0)20 7089 3877 fax: +44 (0)20 7089 3870
Email: info@wsta.co.uk
website: www.wsta.co.uk

EUROPE

Brewers of Europe

Rue Caroly 23-25, B-1060 Bruxelles Tel: (+32.2) 672
23 92 Fax: (+32.2) 660 94 02
email: info@brewersofEurope.org
website: www.brewersofEurope.org

Forum of Taste and Education
Livornostraat 13 b 5 rue de Livourne – Brussel 1050
Bruxelles, Belgium
Tel: 32 2 539 36 64 Fax: 32 2 537 81 56
email: forum.taste.education@skynet.be

Enterprise et Prevention
13, Rue Monsigny, 75002 Paris, France
Tel: 00-33-53-43-80-75
email: enterprise@wanadoo.fr
website: www.soifdevivre.com

IREB

19, avenue Trudaine, 75009 Paris
Tel: +33 (1) 48 74 82 19 Fax: +33 (1) 48 78 17 56
email: ireb@ireb.com website: www.ireb.com

OIV

18 rue d'Aguesseau, 75008 Paris, France
Tel: +33 (0) 1 44 94 80 94 Fax: +33 (0) 1 42 66 90 63
email: oiv@oiv.int website: www.oiv.int

STIVA

Benoordenhoutseweg 22-23, NL-2596 BA,
The Hague, The Netherlands
Tel: +31 (0)70 314 2480 Fax: +31(0) 70 314 2481
email: info@STIVA.nl
website: www.stiva.nl

Fundacion Alcohol Y Sociedad
Villalar, 4 1º izq. 28001 Madrid
Tel: + 34 91 745 08 44 Fax: + 34 91 561 8955
email: secretaria@alcoholysociedad.org
website: www.alcoholysociedad.org

Scandinavian Medical Alcohol Board
Vandværksvej 11 DK - 5690 Tommerup
Tel: 45 64 75 22 84 Fax: 45 64 75 28 44
email: smab@org
website: www.smabnordic.com

Deutsche Wein Akademie GMBH

Gutenbergplatz 3-5, 55116 Mainz
Tel: 49-2641-9065801 (home office)
49-6131-282948 (head office) Fax: 49-2641-9065802
email: fradera@deutscheweinakademie.de
website: www.deutscheweinakademie.de

FIVIN

Plaza Penedés, 3, 3,08720 Vilafranca del Penedés,
Barcelona, Spain
Tel: 0034 (93) 890 45 45
Fax: 0034 (93) 890 46 11

GODA

Gode Alkoholdninger, Kattesundet 9, DK-1458
København K, Denmark Tel: 33 13 93 83
Fax: 33 13 03 84 email: info@goda.dk
website: www.goda.dk

FIVS International Federation of Wines & Spirits

18, rue d'Aguesseau, F-75008 - PARIS France
Tél. 33 01 42 68 82 48 Fax 33 01 40 06 06 98
email : fivs.ass@wanadoo.fr
website: www.fivs.org

EFRD The European Forum for Responsible Drinking
Place Stéphanie, 6, B -1050 Bruxelles
T: + 32.2.505.60.72
F: + 32.2.502.69.71
website: www.efrd.org

MEAS Limited

Merrion House
1/3 Fitzwilliam Street Lower
Dublin 2, Ireland
Tel: 00 353 1 611 4811 Fax: 00 353 1 611 4808
website: www.meas.ie
www.drinkaware.ie

The European Federation Of Wine & Spirit Importers
And Distributors (EFWSID)
Five Kings House
1 Queen Street Place
London EC4R 1XX
Tel +44 (0) 20 7248 5377 Fax +44(0) 20 7489 0322
email: EFWSID@wsa.org.uk

USA, CANADA, SOUTH AMERICA, AUSTRALIA

American Council On Science And Health
1995 Broadway, 2nd Floor, New York, NY 10023-5860
Tel: (212) 362-7044 Ext. 234 Fax: (212) 362-4919
email: kava@acsh.org website: www.acsh.org

Beer Institute
122 C Street, NW #750,
Washington DC 20001
Tel:(202) 737-2337 Fax: (202) 737-7004
email:info@beerinstitute.org
website: www.beerinstitute.org

Distilled Spirits Council Of The US
1250 Eye Street, NW, Suite 400,
Washington DC 20005
Tel:(202) 628-3544 website: www.discus.org

Proyecto Ciencia Vino Y Salud
Facultad de ciencias Biológicas,
Casilla 114 D. Santiago, Chile
Tel:/Fax: (56-23) 222 2577
email: vinsalud@genes.bio.puc.cl

Éduc' Alcoo
606, Cathcart, Suite 700, Montréal, Québec, H3B 1K9
Canada Tel: (514) 875-7454
email: hsacy@educalcoo.qc.ca
website: www.educalcoo.qc.ca

FISAC

(Fundacion de Investigaciones Sociales A.C.) Francisco
Sosa 230. Coyoacan CP 04000 Mexico DF - Mexico
Tel:+52.5552 2194
Fax: +52 5554 0161
email: iybarra@fisac.org.mx
website: www.alcoholinformate.org.mx

The Wine Institute

425 Market Street, Suite 1000, San Francisco, CA
94105, USA Tel: (415) 512-0151 Fax: (415) 442-0742

Traffic Injury Research Foundation.

Suite 200, 171 Nepean Street, Ottawa, Ontario,
Canada, K2P 0B4 Tel: 613-238-5235
email: barbarak@trafficingjuryresearch.com
website: www.trafficingjuryresearch.com

ICAP

International Center for Alcohol Policies
1519 New Hampshire Avenue, NW
Washington DC 20036
Tel: (202) 986-1159 Fax: (202) 986-2080
website: www.icap.org

The Century Council

1310 G Street, NW, Suite 600,
Washington, DC 20005-3000
Tel: (202) 637-0077 Fax: (202) 637-0079
email: washdc@centurycouncil.org
website: www.centurycouncil.org

California Association Of Winegrape Growers
601 University Avenue, Suite 135 Sacramento, CA
95825 email: karen@cawg.org
website: www.cawg.org

Lodi-Woodridge Winegrape Commission
2545 West Turner Road Lodi, CA 95242 USA
email: mark@lodiwine.com
website: www.lodiwine.com

Oldways Preservation & Exchange Trust
266 Beacon Street Boston, MA 02116 617.421.5500
Fax: 617.421.5511 website: www.oldwayspt.org

The Australian Wine Research Institute
PO Box 197, Glen Osmond 5064, South Australia,
Australia. Tel: 61 8 8303 6600 Fax: 61 6 303 6601
website: www.awri.com.au