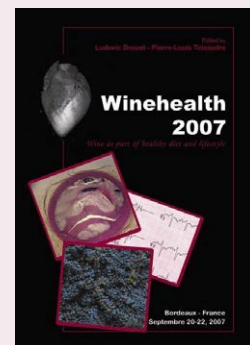


This month, the issue of alcohol advertising has continued to stay centre stage with the release of a series of papers by ELSA calling for stricter European monitoring of standards and findings on 'alcoholic beverages appealing to minors'. See our lead article on alcohol advertising on page 3.

This edition features reports on the Winehealth Congress held in France in September, including a paper 'Wine, alcohol and cardiovascular risk: an epidemiological perspective' that was presented to the congress by G. de Gaetano. Professor R. Curtis Ellison also summarises three papers from the conference on page 15.



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Finland

Finland's Health Ministry has announced that health warnings on bottles of beer, wine, and liquor will be mandatory starting in 2009. The warning labels, on the side of a bottle or packaging, will state "VAROITUS" ("warning" in Finnish) in capital letters, along with the message "Alcohol endangers the development of a fetus and your health." The labels will be in both Finnish and Swedish, because Finland is a bilingual country with a 6% Swedish-speaking minority.

France

As of October 3rd, the mandatory warning label for pregnant women must appear on all drinks labels retailed in France. Suppliers have a choice between a logo, depicting a pregnant women inside a red circle with a red line through it, or a mandatory statement: "Drinking alcoholic drinks during pregnancy, even in small quantities, may have serious consequences for the child's health".

South Africa

The South African Minister of Health has published regulations to implement warning labels on packaging and promotion materials for alcoholic drinks. It is proposed that these regulations will come into effect in 18 months time. It is currently unclear exactly what statement will be required, and there has not been discussion with industry and partners. The South African Government is being asked to accept the French pregnancy logo, rather than insist on a written warning.

New Zealand

The New Zealand Ministry of Health has issued new guidelines on alcohol and pregnancy. Previous guidelines said alcohol was not recommended during pregnancy while the new guidelines recommend total abstinence from alcohol by pregnant women or those planning a pregnancy. The Alcohol advisory Council of New Zealand (ALAC) is also managing an application for the labelling of alcohol beverages with a health advisory notice advising of the dangers of drinking while pregnant.

Russia

Sun InBev has announced a new campaign of social advertising to help tackle drunk driving in Russia.

The company said that the next stage of its 'Do Not Drink!' campaign uses social advertising to remind drivers it is better to not consume any alcohol before driving.

The next stage of outdoor advertising, using the tagline: "Drunk Driving Kills. Early or Late. Always", follows on from the television advertising it began in May and poster advertising introduced in Moscow and St. Petersburg in August

Sun InBev president Joseph Strella said: "This campaign is a small input in development and propaganda of a more conscientious, responsible view of life. It is an attempt to make people think about seriousness of consequences of drunk driving."

Alcohol advertising – in the spotlight by Helena Conibear

The issue of alcohol advertising has continued to stay centre stage with the release of a series of papers by ELSA (see report in summaries) calling for stricter European monitoring of standards and findings on 'alcoholic beverages appealing to minors' This follows calls for a 9pm watershed throughout Europe with the 'NotB49' campaign continuing (rejected by MEPS in December 2006) and a campaign by the 'Children First Party' calling for tight restrictions and a similar watershed in Australia.

Codes and guidelines

The monitoring of Alcohol advertising is addressed in a number of ways, particularly in relation to the protection of children and minors. ELSA found 79 regulations in the 24 EU countries it analysed, 49 are statutory (in 23 countries), 27 are non-statutory (in 17 countries) and 3 are co-regulations .

Many voluntary codes, such as those of the Portman Group, The Beer Institute and DISCUS Codes are re-enforced by independent complaints panels, whereby the public can submit complaints concerning inappropriate advertising or marketing. The codes are then policed by regulatory bodies such as Ofcom in the UK and the EASA, ruled by Audiovisual Directive at EU level – this was recently updated to 'protect children from harmful content' and separates alcohol advertising from editorial. In some countries, such as Finland the regulations are so strict that self regulation is not necessary.

Article 15 of the EU Audio Visual Directive sets out the restrictions on alcohol advertising:

- "it may not be aimed specifically at minors or, in particular, depict minors consuming these beverages;
- it shall not link the consumption of alcohol to enhanced physical performance or to driving;
- it shall not create the impression that the consumption of alcohol contributes towards social or sexual success;
- it shall not claim that alcohol has therapeutic qualities or that it is a stimulant, a sedative or a means of resolving personal conflicts;
- it shall not encourage immoderate consumption of alcohol or present abstinence or moderation in a negative light;
- it shall not place emphasis on high alcoholic content as being a positive quality of the beverages."

The debate

The issue at stake is whether, by viewing adverts, children and youth are enticed into drinking at an earlier age by funny and attractive advertising. Brand owners would argue – and indeed a substantial evidence base suggests that advertising influences brand and beverage choice amongst existing drinkers, rather than affecting consumption levels per se. However, research also shows that young people are aware of and 'enjoy' alcohol advertising (88% of 10-13 year olds) and could identify three or more brands from the adverts. So, a balance has to be struck between the right of brand owners to market and promote a legal consumable product and increase their market share and the 'right' of young people to be protected from unsuitable influences and content. Rules ensuring that target audiences are made up of 75% adults (EU) or 70% (US) help in this regard.

The decision of whether and when to drink alcohol is influenced by a number of factors including ethnic group, religion, parental example, rites of passage, peer group, perceptions of pleasure, income, media, local traditions and culture. Parents and peers play by far the most important roles in influencing age and pattern of drinking, often to the surprise of parents themselves, who underestimate their role.

Advertising plays a small part and so, the tone of alcohol advertising must be suitable and avoid encouraging excessive drinking or behaviour, should not be overtly attractive to minors by using cartoons or animals, or suggest the enhancement of social, sexual or physical ability. Codes, guidelines and regulations exist to ensure this compliance.

Does alcohol advertising encourage us all to drink more?

Advertising brands is one way of building consumer loyalty - to use Alcohol Concern's words, 'it is a weapon in the war between brands for market share'. Although alcohol has formed part of many nations' religions and culture over the millennia, the development of 'brands' and an extensive consumer choice of beers, wines and spirits is a century or more 'young' and advertising is one tool producers can use to make us aware of their

brands USP's, new products, innovations, price change and to defend or increase their market share.

Two conflicting views are held: Social learning theories argue that advertising creates positive images of alcohol consumption and so increases the demand for alcohol and may increase competition and reduce prices. Thus, advertising bans are predicted to lower alcohol consumption.

On the other hand, advertising may primarily affect brand and beverage shares, with little or no effect on total consumption. This theory holds that advertising may increase product differentiation and/or signal product quality, resulting in higher prices and lower consumption. If this is the case, advertising bans, it is argued, could increase consumption; evidence suggests where bans do exist that they do not lower mean consumption.

To conclude, advertising cannot be viewed in isolation, but must be understood in the context of local culture, the maturity of the market and traditions of the society in which it appears. If alcohol advertising is to be allowed, codes and guidelines must continue to be backed up by effective mechanisms for applying standards and ensuring compliance and enforcement. Some producers have been guilty of the creation of some inappropriate advertising in the past – a risk the industry cannot afford to take and that most producers understand, in the context of a complex political and social environment where a product, when used in the wrong context or in excess, can cause harm.

Interesting links:

ESA www.sponsorship.org

ASA www.asa.org.uk

BCAP www.cap.org www.cap.org.uk/cap/codes.

Ofcom www.ofcom.org.uk

www.notbefore9.eu

Do bans work?

The research Evidence

'Econometric studies to estimate the effect of advertising on total alcohol consumption have found no association between total spending on advertising and levels of consumption in the population. Also earlier studies of bans on alcohol advertising have suggested that these do not result in a reduction in total consumption'.

Source: Cooke E (2002) 100% Proof: Research for Action on Alcohol, Alcohol Concern

'Scientific research around the world conducted by governments, health agencies and universities has, over decades, been unable to demonstrate any causal relationship between alcohol beverage advertising and alcohol consumption. It has, however, demonstrated that effective alcohol campaigns can increase both a producer's market share and also brand loyalty'.

Reference: Federal Trade Commission. Alcohol Marketing and Advertising: A Report to Congress. Washington, DC: September, 2003 Fisher; Frankena et al.

'The results indicate that advertising bans in OECD countries have not decreased alcohol consumption or alcohol abuse'.

Source: Nelson JP and Young DJ 'Do advertising bans work? An International comparison' International Journal of advertising 20: 273 –296, 2001

A case study

The Loi Evin French law restricts the media in which alcohol may be advertised and regulates the content of alcohol advertising. Advertising on television and in cinemas, and alcohol sponsorship of sports or cultural events are banned. Alcohol advertising is permitted in print media and on radio and billboards, but may only use messages and images related to product qualities.

The quantitative effect of the law is difficult to assess as per capita consumption was already declining in 1991 when the regulations were introduced.

Alexis Capitant from Entreprise and Prevention comments: 'The loi Evin has no effect on market share or brand building because advertising is still allowed on billboards, radio and written medias. Of course the content of messages has to respect the law but brands can still reach consumers and speak to them'.

Younger drinkers in the UK are prepared to change habits

According to a new survey, 18-24 year olds and people living in Northern England are the most likely groups in the UK to change or consider changing their drinking habits after learning about alcohol use and misuse.

The findings are from a survey of visitors to www.drinkaware.co.uk, assessing how the site is used and whether it has a positive effect on consumers' drinking attitudes and habits.

When asked whether they were likely to change their drinking habits as a result of visiting [drinkaware.co.uk](http://www.drinkaware.co.uk), 59% of people said they would or would consider doing so. The survey has shown that men and women are almost equally likely to make changes but that there are considerable variations throughout the regions and according to age.

The results suggest that younger people are leading the way towards making positive changes. 65% of 18 to 25 year olds said they would change or consider changing their drinking habits making them nearly twice as likely to do so as those aged 66 or over.

People living in the North of England, closely followed by those in Northern Ireland and Scotland are the most likely to reconsider their drinking habits. People living in Wales are the least likely to make changes although one in two say they will alter or consider altering their habits.

The survey, which had 2,030 responses, ran between the end of June and the end of August on the website.

Drink Aware challenges for youth

Drink AWARE has produced its first project as The Drink AWARE Trust, with a body of material called 'The Drink AWARE Challenges'. The work book, DVD and CD's were launched via a UK Youth conference to youth education workers and other interested parties in June. UK Youth supports a network involving 750,000 young people, 7000 youth groups and 40,000 youth workers around the UK. The Drink AWARE challenges feeds into their Youth Achievement awards developed to encourage young people (aged 14 -24) to take responsibility for selecting planning and leading activities based on their own interests and concerns.

The challenge to UK Youth members covers units, the effects of alcohol on the body, the personal legal issues and facts and figures. It also looks at the psychology of drinking - asking young people to analyse why they drink, how to deal with peer pressure and how

to develop alternatives to drinking being the focus of the evening. It also looks at how alcohol is portrayed by the media. Health is covered by looking at personal risk of accident or violence, the issues of drinking and driving, how to deal with emergencies and the long term health risks.

The aim of the challenges is to produce a peer group of knowledgeable young people who can influence their friends and neighbourhoods through their work and engagement via their clubs and groups.

The work sheets are presented in bullet points and should inspire debate and includes games to play. For further details contact: info@ukyouth.org

Debra Shipley, has stepped down as the first Chair of The Drink AWARE Trust, who are also looking to recruit two more trustees. For more information visit www.drinkaware.co.uk

EU - Alcohol advertising compliance hits 95.6% in 2007

The monitoring of almost 5,700 adverts for alcoholic drinks across the Europe found an overall compliance rate of 95.6%, compared to 96% in 2006 and 96.4% in 2005. The survey, published 25 September by EFRD, was conducted by National Advertising Standards bodies and reviewed by an independent panel of reviewers.

"The 2007 monitoring shows again that the industry abides by the self-regulatory rules," the EFRD comments. "The report looked for

the second time at the inclusion of responsible drinking messages in print and TV ads to remind and inform consumers about risky use of alcoholic beverages and to promote responsible consumption. The compliance rate in this area is at 85%."

The benchmarks for the monitoring are the EFRD 'Common Standards', which apply to all commercial communications channels, and national and sector frameworks. For more information, please visit www.efrd.org.

Industry association responses to Scottish regulations of alcohol

The Scottish Retail Consortium (SRC) and Wine & Spirit Trade Association (WSTA) believe that measures announced in September will unfairly penalise the majority of Scots who are responsible consumers without having the desired effect of reducing alcohol misuse. The Scottish Government announced that it will place restrictions on the way retailers can promote alcohol, preventing them from offering the range of promotional deals on prices that consumers are used to (such as 3 for 2 or multi-buy discounts). The Government is also considering setting minimum alcohol prices. Cabinet Secretary Kenny MacAskill also announced proposals to restrict the areas in which retailers can display alcohol in stores. Alcohol related products would be sold in specially designated areas.

The SRC and WSTA have commented that the proposals are not evidence-based. They cite Northern Ireland who have already introduced restrictions on the areas in which retailers can display alcohol in stores. 'There is no evidence to suggest it has led to a reduction in alcohol consumption. Nor is there strong evidence to suggest that action to increase the price of alcohol will successfully combat alcohol misuse or address the behaviour of the minority of people who cause problems', comment the SRC and WSTA. They are concerned that any attempts to restrict these legal business practices will result in major distortions to the UK market. 'Introducing the proposed restrictions could potentially create differing regulatory and competitive markets within the UK which may lead to a whole range of unintended and unforeseen consequences'.

SRC Director Fiona Moriarty states "It is hard to see what the Government is hoping to achieve aside from looking tough on alcohol... This decision unfairly penalises the overwhelming number of responsible consumers who purchase alcohol as part of their weekly shop'.

What this decision will do is throw up an expensive practical snare for a lot of small to medium sized retailers who, in a number of cases, will find compliance extremely difficult."

WSTA Chief Executive Jeremy Beadles said: 'We understand and share the Scottish Government's desire to take action to reduce alcohol related harm, but we do not believe that today's announcements will do anything except restrict consumer choice and damage the Scottish economy. These measures are not based on evidence and have been announced without proper consideration of the impact on the wider Scottish population... The Scottish Government recognises that alcohol is a legal substance enjoyed responsibly by most of the adult population. Rather than hiding alcohol away and penalising the whole population with controls on pricing and promotions, we should continue to work together to find evidence-based, targeted solutions that will actually make a difference to the underlying problems of misuse'.

Alcohol sales in garage forecourts

Garages and petrol station forecourt shops across Scotland may be forced to stop selling alcohol within two years under new laws. Licensing chiefs in Glasgow are the first in

the country to have signalled their intention to prevent garages selling alcohol unless the premises can prove it is the main source of fuel and groceries for the local community. The 2005 Licensing Act allows all boards across Scotland to introduce the measure and with the country's largest board formally indicating that it will be a matter of policy to refuse permission for garages to sell alcohol most others are expected to follow suit. Trade associations believe 'it does little more than punish small retailers, while major supermarkets continue to sell both alcohol and petrol'.

Scotland / Alcohol awareness week 21/27 October 2007

The Scottish Government and Industry Partnership are working collaboratively on a number of new projects including a National Alcohol Awareness Week between the 21 and 27 October 2007. The aims of the programme are to get the drinking public in Scotland to be more aware, as individuals, of how much alcohol they consume; and understand how these personal drinking habits compare with sensible drinking behaviour.

For more information, please visit <http://www.alcoholawarenessweek.com/>



Price, promotion and advertising review

The Department of Health in the UK has advertised and invited tenders for a PPA Review.

The research will have two elements: (i) a review of the evidence from published and grey literature with the purpose of ensuring that all relevant evidence is captured; (ii) a modelling exercise to explore the impact of potential policy changes in this area. The research team should be multidisciplinary including various relevant disciplines such as social science, economics, modelling and those with expertise and knowledge of business/retail research. The budget for the work will be a maximum of £200,000 for both elements of the research and the Department of Health have said that it must be completed within eight months.

Launch of the BIIAB 'Certificate in Alcohol Awareness'

BII, the professional body for the licensed retail sector, launched its new Certificate in Alcohol Awareness (CAA) at the Phoenix High School.

BII has been working on this project for over a year and the pilot of the qualification took place at this London school in the summer. The qualification is now available.

John McNamara, BII Chief Executive, said, "In 2005 22% of 11-15 year olds had drunk alcohol in the previous week and 46% of 15 year olds had drunk alcohol. This qualification is not aimed at teaching young people to drink but to teach them about personal choice and responsibility. Education is

key to changing young peoples' attitudes to alcohol and hopefully will take a step towards tackling the binge drinkers of tomorrow".

He added, "The recent Government initiative to improve the alcohol based interventions for children and young people has led to new proposals for alcohol education to be an integral part of both the national science and personal, social and health education (PSHE) curricula, in line with DCFS guidance. The BIIAB CAA meets this need, by ensuring that alcohol education can be tailored for different age groups and their learning needs". For more details visit <http://www.bii.org>

Students ready for a 'No Nonsense' approach to alcohol

Northern Irish students are being asked to spare just five minutes of their time to have a look at 'No Nonsense' - a drinkaware.ie guide for students, which was launched in October. Available to download free from the drinkaware.ie website, this straight talking guide gives students the know-how on surviving those first few weeks on campus.

'No Nonsense is all about getting the know-how to know when,' said Fionnuala Sheehan, Chief Executive of MEAS. "This guide proves that being drinkaware isn't at odds with having a vibrant student social life.'

Together with a nationwide on-campus poster campaign, the 'No Nonsense' student guide has been produced in collaboration with the Union of Students in Ireland.

'The 'No Nonsense' guide isn't about lecturing students about drinking or throwing alcohol-related statistics at them, it is simply full of very practical advice.' said Peadar Hayes, USI Welfare Officer.

As part of the current advertising campaign, entitled 'Had Enough', which highlights the unacceptable impact of drunken behaviour on a range of innocent parties, drinkaware.ie is now challenging students to reject the cultural acceptance of anti-social drunken behaviour which is tolerated in Ireland.

'Research into how young adults feel about excessive drinking and the entrenched cultural perceptions in Ireland around the whole issue of alcohol consumption, showed

that Irish society is ready for a new approach to addressing the negative consequences of alcohol abuse and misuse', said Fionnuala Sheehan.

'The message of the Had Enough campaign is powerful in its simplicity: the days of public drunkenness and anti-social behaviour being acceptable to Irish society are over'.

'No Nonsense' is available free from www.drinkaware.ie



European Parliament report

In September, the European Parliament adopted an amended own-initiative report supporting the Commission's proposal for an EU strategy to support member states in reducing alcohol-related harm.

The report rejected a number of amendments tabled by the Green party on advertising restrictions and tobacco style warning labels, but the report calls for comparative surveys of information across the EU and exchange of best practice along with information campaigns to promote the healthy and moderate consumption of alcohol. Particular concerns expressed in this report include reducing drink driving. It is proposed that member states consider setting the Blood Alcohol Content (BAC) limit as close as workable to zero for professional and newly qualified drivers. The report also focuses on groups vulnerable

to alcohol related harm, such as pregnant women and children, and calls for the promotion of higher taxes on RTDs as an alcoholic product that may appeal to young people.

Other recommendations of the report include:

- Stricter controls on on-and off-trade and more effective prevention of underage sales;
- Ensuring marketing and labelling of RTDs clearly emphasise that they are alcoholic beverages;
- Development of national guidelines on age limits for purchasing, selling and serving alcohol;
- EU proposal for harmonising health warnings across Europe;
- Exchange of best practice in combating alcohol harm in young people;

- Zero BAC for new drivers;
- Promotion of healthy lifestyles at workplace.

Two interesting changes from earlier drafts are that the report now calls for a comparative study on the impact and effectiveness of the information tools, including labelling and advertising, used at national level to tackle alcohol-related harm, to be published by 2009. This replaces an earlier call for harmonised labelling across the EU.

Another amendment is that the wording around alcohol and pregnancy has been changed so that the report emphasizes that appropriate communication, rather than warnings on the packaging of alcoholic beverages, may prevent women from drinking if planning to conceive or during pregnancy.

Queensland pubs and clubs urged to improve design of venues

Owners and operators of Queensland pubs and clubs are being urged to improve the design of their venues as a way of reducing alcohol related violence.

DrinkWise Australia CEO, Doctor Mike MacAvoy, said drunken related violence, both in and around licensed venues, was an issue many Australians were becoming less tolerant of.

Speaking at a two-day QLD conference on liquor accords, Dr MacAvoy said accords traditionally looked at initiatives such as enhanced policing and training of bar staff to tackle violence and other problems

arising from drunkenness in pubs and clubs.

Dr MacAvoy said when tackling alcohol related problems in licensed venues, people often forgot about the power of the drinking environment.

“The environment, or the place, where we drink actually plays a significant role in how we behave. The worst environment for creating problems in a licensed environment is overcrowding, poor lighting, loud music, few places to sit and nowhere to put your glass or bottle down,” Dr MacAvoy said.

A recent study of violence in the UK found that the three most important

factors associated with violence were poorly designed and overcrowded bars, poorly trained staff and rivalry between customers. Issues which UK on-trade have addressed over the last 5 years with excellent results.

“Certainly, owners of licensed venues can do more, by improving lighting, security, seating and providing more tables and benches for seating and to rest patrons”. Much can be learned by programmes put into place in other countries, such as server training schemes, pub watch and public/private cooperation.

Positive parenting on MySpace focuses on preventing underage drinking

According to online monitoring source comScore Media Metrix, 16.6 million US 35- to 54-year-olds with children visited MySpace last month. To capitalize on that audience, a new online resource, Positive Parenting Connection (www.myspace.com/positiveparenting), launched on MySpace and offers parents helpful advice from authorities on how to help prevent underage drinking.

Positive Parenting Connection is a community service sponsored by Anheuser-Busch and endorsed by The Association of Junior Leagues International (AJLI), the International Association of Fire Chiefs (IAFC) and the National Fatherhood Initiative (NFI).

The site includes materials, tips and links to expert-designed resources to help parents use their positive parent power to communicate with their children about making smart and responsible choices, including not drinking when underage.

According to a new survey featured on the site and conducted on behalf of Anheuser-Busch by Harris Interactive®, most parents with children aged 0-20 years do not think it's okay for parents to provide alcohol (82%) or purchase alcohol (85%) for their teens or others' teens at parties or gatherings.

The survey shows most parents (79%) would not allow their older teens to attend a party where other teens are drinking, even if parents will be present.

To guide parents on how to handle these kinds of situations, Positive Parenting Connection contains a series of vignettes in which a parent and teen work through three real-life scenarios about the challenges of underage drinking. Each video is reviewed by noted family therapist and authority on adolescent behavior Lonnie Carton, Ph.D. Carton is an advisory panel member of 'Family Talk About Drinking', a programme that encourages open and honest conversations between parents and children about the topic.

"Like many other moms out there, I'm constantly being told 'Everyone else's parents let them drink before they're 21,' when I know that's not the case," said Francine Katz, vice president of Communications and Consumer Affairs for Anheuser-Busch Companies, Inc.

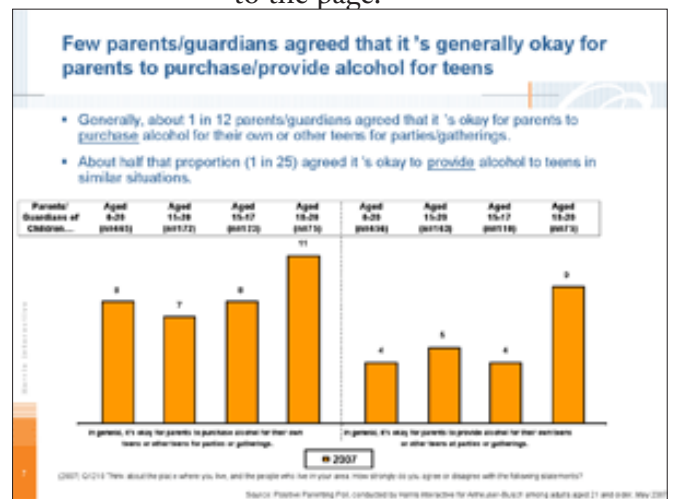
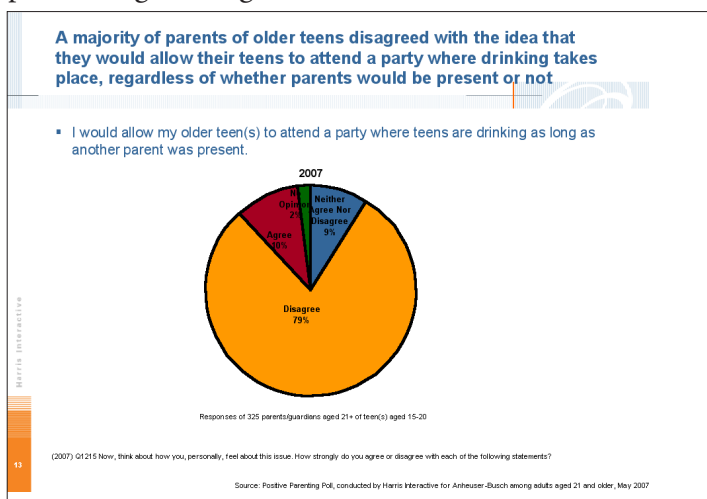
"Having this new resource on MySpace is invaluable because it allows like-minded adults to connect and underscores that, as parents, we really do have the power to prevent underage drinking."

Dr. Carton notes that prime time for parents to talk with their children about drinking is between ages 9 and 11, and then they must keep the lines of communication open throughout the teen years, and even when teens leave for college. She explains, "It's very important to talk with children early about the consequences of underage drinking because it prepares them with information about why drinking is not for their age group, and it helps prevent actions they might be asked to take by peers."

"Empowering parents with useful information to help keep their children safe—and specially in this exciting new way—reflects our mission of improving communities and the welfare of children and families," said Sandi Kemmish, AJLI President.

Positive Parenting Connection also features underage-drinking statistics, tips for hosting safe teen celebrations that don't include alcohol and information from 'Family Talk About Drinking' and 'College Talk: Talking With Your College-Bound Student About Drinking'.

The site will be supported with targeted banner ads on MySpace that will direct users ages 35 to 54 to the page.



BBPA figures show a fall in UK alcohol consumption

Alcohol consumption in the UK has fallen for the second consecutive year, according to figures compiled by the British Beer & Pub Association. The new figures are contained, along with a wealth of other drinks' industry data, in the BBPA's newly published Statistical Handbook 2007.

The fall of 3.3% in 2006 is the largest in 15 years and comes on top of a 2% drop in 2005. In total, consumption has fallen by 5.3% over the past two years. Alcohol consumption has therefore been in decline since the introduction of the new Licensing Act.

The BBPA analysis is based on data compiled from HM Revenue & Customs.

The volume of alcohol consumed is now 8.9 litres per person per year, compared with 9.4 litres in 2004. There have also been significant shifts in choice of beverage over the past 25 years. In 1980, 60% of consumers favoured beer, 24% spirits and 14% wine. By 1990 that had changed to 57% beer, 22% spirits and 18% wine. In 2006 beer accounts for 43% of consumption, with spirits at 20% and with wine increasing to 29%.

Mark Hastings, BBPA Director of Communications, comments: "These figures indicate that, contrary to perceptions, the amount we drink as a nation is falling. Since the Licensing Act, we have seen a noticeable drop in consumption – the second annual fall in a row, and the largest fall for 15 years".

Binge drinkers who feel regret less likely to repeat behaviour

People who binge drink are less likely to do so again if they feel regret for their actions, suggests a study by psychologist Dr Richard Cooke of Aston University in Birmingham.

Working in collaboration with Dr Falko Sniehotta of Aberdeen University and Dr Benjamin Schuz of Free University Berlin, Dr Cooke sampled 178 Scottish students for the study.

The results showed that participants who felt regret at their previous drinking behaviour were less likely to intend to binge-drink in the future.

'Before embarking on this research I was keen to find out motivations that would make people limit their drinking. Interestingly out of the studies already available on binge drinking none of the studies had focused on the impact regret has on binge drinking,' said Dr Cooke.

'The study suggests that modifying attitudes and inducing regret may be effective strategies for reducing binge-drinking intentions among undergraduates, which should reduce subsequent binge-drinking behaviour,' he continued.

The research was carried out through students completing a questionnaire regarding their previous drinking habits, their future drinking habits and subsequent feelings of regret. 64% of these students admitted to binge drinking at least once within the last week. A week following this questionnaire they were asked to complete another which focused on their drinking behaviour during the previous week.

Dr Richard Cooke recently revealed his findings at the Division of Health Psychology Annual Conference at the University of Nottingham.

WBA issue 'Global Social Responsibility Initiatives' catalogue

The World Brewing Alliance has issued an updated catalogue of the programmes that brewers are engaged in around the world in their efforts to improve knowledge amongst consumers about the responsible and sensible enjoyment of alcohol and to reduce misuse. The detailed publication also contains details of the relevant work of Social Aspect Organisations and associations that Brewers support globally. Initiatives are split into chapters that include: drink drive and designated driver schemes and server training for example.



NHMRC releases revised draft Australian alcohol guidelines for low-risk drinking

The National Health and Medical Research Council (NHMRC) released a revised draft of the 'Australian alcohol guidelines for low-risk drinking' on the 12th October.

NHMRC CEO Professor Warwick Anderson commented "We are inviting comment from a wide range of groups and individuals—including health professionals, community groups, professional and educational organisations, policy makers, the general public and those businesses responsible for providing alcohol".

The public consultation period is for 60 days and closes on 11 December 2007.

The new Guidelines contains three distinct types of health advice:

- A single, universal guideline for Australian adults that provides a recommended low-risk drinking level to reduce both the immediate and long-term harm from alcohol consumption (Guideline 1).
- Two guidelines with special precautions for children and adolescents, and for pregnant and breastfeeding women (Guidelines 2 and 3).
- Additional health advice and precautions for specific groups of adults who have an increased risk (such as young adults under 25, older people, people with a family history of alcohol dependence), for people with physical or mental conditions made worse by alcohol, and for specific situations (such as taking part in high-risk activities or using illicit drugs).

The guidelines also present data that clearly show the level of risk associated with different patterns and levels of drinking. Increasing levels of alcohol intake are associated with increasing risk of alcohol-related accidents, injuries, disease and death.

The report summary states that 'Guideline 1 recommends a single, universal low-risk level of alcohol intake for both men and women. In setting the guideline, the NHMRC considered the risks of increasing levels of alcohol intake for two patterns of drinking and two types of harm:

- drinking on any single occasion with the attendant risk of accidents and injuries
- regular drinking over a period of time with the attendant risk of developing alcohol related diseases.

In each case, 'low-risk' has been conservatively defined as the level of alcohol intake that, for healthy adults, will:

- keep the risk of accidents and injuries, or of developing alcohol-related diseases, at tolerably low levels (compared with not drinking)
- reduce the lifetime risk of death from an alcohol-related injury, or from an alcohol-related, disease, to less than 1 in 100 (that is, one death for every 100 people who drink at that specified level and pattern).

To achieve these outcomes, the recommended alcohol intake for both men and women is the same:

two standard drinks or less in any one day.

Importantly, Guideline 1 does not represent a 'safe' or 'no-risk' drinking level; neither is it a proscriptive level of drinking that must be followed in all situations. Rather, it is an advisory drinking level that will enable healthy adults to maintain a low risk of alcohol-related accidents, injuries, diseases and death. Drinking at levels higher than this recommended level of alcohol intake is associated with a significantly increasing risk of these complications and the risk of death from alcohol-related disease escalates much more rapidly for women than for men'.

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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 sensible and responsible consumption of alcohol
- To encourage informed debate on alcohol issues
- To communicate and publicise relevant medical and scientific research in a clear and concise format via AIM Digest and the AIM Research Highlights
- To publish information via the ‘AIM Gateway to Responsible Drinking and Health’ on moderate drinking and health – comprehensively indexed and fully searchable without charge
- To communicate with consumers on responsible drinking and health via www.drinkingandyou.com and via publications based on national government guidelines
- To distribute AIM Digest without charge to the media, legislators and researchers involved in alcohol affairs
- To direct enquiries from the media and others towards full and accurate sources of information.

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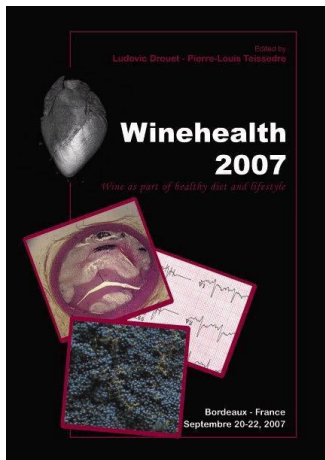
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Polyphenols – much being learnt about the role and pathways of antioxidants in our bodies



‘Perhaps happily, it seems to be the combination of drinking moderately, preferably at meal times, in conjunction with a Mediterranean style diet that confers the most benefit rather than any one ingredient of wine or antioxidants generally’.

A fascinating wine and health congress took place in Graves, Bordeaux between the 20th and 22nd September, attended by the ‘pioneers’ of alcohol related research. Evidence showed the protective effect of wine on the cardiovascular system and total mortality. Attendees included Serge Renaud, Arthur Klatsky, R Curtis Ellison and Fulvio Ursini, as well as many younger researchers from all over the world.

Scientists from many countries met to discuss and analyse the latest findings regarding wine, and particularly its polyphenols, and the wider issues regarding moderate alcohol consumption, diet and health. There is no question that wine and especially red wine is a potent source of antioxidants, or that alcohol assists the solubility of these antioxidants. But what is still far from proved is whether

our bodies absorb and assimilate these antioxidants in quantities high enough to have any biological effect. Increasingly, many of the polyphenols, and especially their metabolites, are being found to not only be absorbed but to have important biological effects in humans. Some well known antioxidants, such as resveratrol are less well absorbed than lesser known compounds such as gallic acid and procyanidins.

What was clear from data reported at the conference was that people who begin to consume a Mediterranean diet, especially when including the regular consumption of wine, showed a marked improvement in health. (Ellison analyses findings reported by Federico Leighton at the meeting later). Furthermore, the combination of such a diet with other lifestyle factors -- not smoking, staying slim, exercising regularly -- resulted in greater health benefits. But somewhat surprising was a report of a recent study at Harvard University showing that even among the “healthiest” men (non-smokers, lean, ate a Mediterranean diet, and exercised regularly) those who also drank moderately had their risk of a heart attack lowered, indicating an independent protective effect from alcohol.

Arthur Klatsky looked at the evidence over the last 100 years concerning alcohol and cardiovascular conditions. He was able to make the following statements:

- Blood pressure increases at consumption levels above 30g a day, irrespective of beverage choice,

further more high blood pressure carries risk, whatever your intake of alcohol is.

- Problems he faces as a researcher in the Kaiser Permanente study, is the under reporting of consumption by a proportion of so called ‘moderate drinkers’, who they managed to isolate and study further, by analysing their liver enzyme activity and find they do show different health outcomes to genuine moderate drinkers – such as higher blood pressure.

- There is also the issue of ‘The healthy user’, whereby many moderate drinkers are generally healthier than abstainers or heavy drinkers – i.e. they eat better, exercise more and are generally of a higher socio economic status.

- Ex drinkers should be excluded from studies as ‘abstainers’ due to lower health status.

- However, taking into account and adjusting for the above, more than 100 studies have reaffirmed the J shaped curve illustrating the cardio protective effect of moderate alcohol consumption in populations at greater risk of heart disease, i.e. men over 40 and post menopausal women, with a more U shaped association for elderly populations.

- Drinking above moderate levels (30g a day) increases blood pressure, cardiomyopathy, risk of hemorrhagic stroke and heart rhythm disturbances, in line with sensible drinking guidelines from around the world.

Klatsky concluded **‘The amount of alcohol taken is a crucial**

consideration in all alcohol health relations. Defining a sensible limit is made difficult by inconsistency among studies in categorisation of alcohol intake, by differences in drinking habits and patterns and probably by under reporting of intake. Advice to concerned persons needs to take into account individual risk/benefit factor in drinkers or potential drinkers’.

Do polyphenols show extra protective effects for the heart?

Ludovic Drouet reported on his studies of polyphenols in mice and pigs and their effects on blood pressure, thrombosis and atherosclerosis. 30 former studies have suggested that polyphenols may reduce atherosclerosis or (thickening of the arteries). These investigators found that polyphenols had an anti – thrombotic affect (ie helped blood flow and reduced ‘stickiness of platelets), but did not reduce the build up of cholesterol on artery walls (lesions) or reduce serum lipids. Their experiments on pigs fed a diet of high fat (lard supplement) and red wine extract (without alcohol) saw no reduction in atherosclerosis after two years or improvement in ‘good’ HDL cholesterol or reduction in blood pressure. The authors conclude therefore that polyphenols may protect the heart via an anti thrombotic reaction, but do not reduce thickening of the arterial walls or lesions.

Why should wine protect against cardiovascular disease (CVD)?

Professor Bertelli from the Department of Human Morphology at the University of Milan, reviewed the biological basis of the beneficial effects of wine and CVD.

Professor Bertelli has spent 15 years studying resveratrol and other antioxidants and believes ‘we are just at the beginning’. Resveratrol is unique to wine and grapes but is badly absorbed – whether in wine or pill form. However, evidence of his research over the years concludes that:

1. phenol compounds in wine are bioavailable if consumption is regular (little and often)
2. These phenolic compounds may react with other similar compounds ingested with other foods.
3. Small daily doses allows polyphenols to accumulate in body tissues, affecting bioavailability, even in low doses

The importance of drinking at meal times

Fulvio Ursini from the University of Padua discussed the fact that for anti oxidants to be useful, they need to be taken with foods which contain fats which oxidise – ie if you drink with your meal it helps break damaging fats and oxidants, which contribute to the accumulation of bad LDL cholesterol. Ursini concluded ‘Although it is unlikely the sole mechanism of LDL production, the intake of foods prone to oxidation seems relevant, accounting for the known harmful effect of some dietary habits and for the protective effect of fruit, vegetables and wine taken with food’.

Fascinating human diet change experiment in Chile

Professor Federico Leighton reported on the results of an experiment in changing the diet of Chilean Miners, who had historically needed 8000 calories a day to maintain their

highly physical work, but now due to mechanisation were ‘sedantry’, eating badly and well beyond their dietary needs. The intervention was through an improvement of the food offered in their canteen, combined with education, part of a ‘food and work’ initiative. Their health was measured in terms of predictors for ‘The metabolic syndrome’ (MS) which is a predictor of heart disease, late-onset diabetes and stroke – it includes suffering from symptoms including elevated blood pressure, high cholesterol and a high abdominal fat level - 25% of the 150 workers had MS. Twelve months later after the ‘Mediterraneanisation’ of their diet, the workers had slimmed, had a redistribution of fat away from their abdomens, had lower blood pressure and better antioxidant activity (reduced oxidative stress) – their risk of MS fell by 32%. It would be interesting to see if the workers stick to a healthier diet long term; the signs were good in that they asked for their wives and families to be taught about a ‘heart healthy lifestyle’. For further details visit www.pam-chile.cl

We will report on the latest research and debate surrounding ‘the French paradox’ in the next edition of AIM, together with Professor Alan Crosier’s presentation on phenolics and vascular health. Professor R. Curtis Ellison summarises three papers from the conference on page 15. For further information and abstracts of the conference, please contact organiser Professor Pierre Louis Teissedre via: p.teissedre@u-bordeaux2.fr

Wine, alcohol and cardiovascular risk: an epidemiological perspective

presented by G. de Gaetano at Winehealth 2007

A number of questions still remain controversial in the topic of wine, alcohol and health. Epidemiological studies have explored the hypothesis that consuming alcohol in the form of wine might confer a significant protection against cardiovascular disease above that expected from its alcohol content. Wine might indeed show additional non-ethanol related beneficial effects due to specific properties of its polyphenolic constituents. In spite of a large number of experimental studies that confirm this hypothesis, epidemiological evidence of a greater effect of wine has not been definitely established. A meta-analysis from our group tested such a hypothesis.

The overall protective effect against cardiovascular disease was 32 % (95% CI: 23% to 41%; 13 studies, 209,418 subjects) in favour of moderate (1-2 drinks a day) wine drinkers versus abstainers and 22% (95% CI: 14% to 30%; 15 studies, 208,036 persons) in favour of moderate beer drinkers versus abstainers.

In addition, there was strong evidence from 10 studies (involving 176,042 persons) to support a J-shaped relationship between different amounts of wine intake and vascular risk (a statistically significant inverse association was found up to a daily intake of 150 ml of wine), whereas no significant relationship between different amounts of beer intake and vascular risk could be found.

Some authors investigated the hypothesis that any coronary

protection from moderate alcohol drinking is unlikely to outweigh the known harms, mainly because of uncontrolled confounding by associated lifestyle factors; the hypothesis is that drinkers may have many healthier characteristics than nondrinkers, leading them to a lower ischemic heart disease risk. However, Mukamal et al., in a recent large USA population study, found that moderate drinking is only modestly associated with healthier lifestyle characteristics, the association being lower after adjustment for race and education.

We paid special attention to the possible effect of confounding in a metaanalysis including 34 prospective studies on alcohol and mortality. We pooled findings from more than one million subjects and about 95,000 deaths from any cause.

The expected J-shaped relationship between total mortality and increasing amounts of alcohol consumed, showed that low to moderate consumption of alcohol (<1 drink/day in women and < 2 drink/day in men) significantly reduces total mortality, while higher doses increase it. 29 studies showed adjusted relative risks at least for age; among them, 15 were adjusted for social status too, and 6 for social status and dietary markers. P for difference was highly significant ($P < 0.0001$), showing that part of heterogeneity is indeed attributable to adjustment. However, while the protection decreased in adjusted studies (from 36% to 17%), it remained substantial and statistically significant. Moreover, we compared

adjusted or not unadjusted data from the same studies. In this case the effect due to known confounders (age, smoking, social status, dietary factors) led to the reduction of the maximum protection from 19% to 16%; by analogy, even in the pessimistic hypothesis that residual confounding would have a similar strength as the known one in lowering the protection, one can assume that the « real » (maximum) protection against total mortality associated with low consumption of alcohol would be largely higher than 10%. Although the protection by alcohol or wine decreases when data are adjusted, thus confirming the importance of confounding in assessing drinking effects, it remains significant and in a range of undoubted public health value.

A meta-analysis of 54 studies on moderate alcohol and total mortality investigated the degree to which the inclusion of abstainers in control group influences the results. Most of the prospective studies analyzed "C the authors argue "C were plagued by the error of including in the control group people who had stopped drinking owing to illness. The analysis of the studies judged to be error-free did not show any significant cardiovascular protection, suggesting that the cardiovascular protection by moderate alcohol consumption may have been overestimated. However, in our meta-analysis on alcohol dosing and total mortality, we tested the same hypothesis by comparing studies that used as reference group the category of no alcohol intake and/or excluded former drinkers

with studies which, in contrast, included in the reference group occasional or former drinkers or people reporting low alcohol intake: the protection was indeed lower in the first studies, but remained statistically significant.

In conclusion, a review of the most recent literature confirms that light-to-moderate alcohol consumption is protective for cardiovascular morbidity and total mortality. Whether wine possesses some additional beneficial properties in respect to other alcoholic beverages is suggested but not definitely established.

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Review of recent presentations on the mediterranean diet

by R. Curtis Ellison, MD Institute on Lifestyle & Health Boston
University School of Medicine

Cottin Y. Evaluation of alcohol consumption based on the Mediterranean diet adherence score after myocardial infarction in patients with coronary artery disease. Data from the Observatoire des Infarctus du myocarde de Côte d'Or (RICO), The RICO Survey, CHU Dijon, France.

Corresponding author: yves.cottin@chu-dijon.fr.

Cottin described the level of a Mediterranean diet adherence score (MDS-1), proposed by Trichopoulos in Greece, when applied to French patients having had a myocardial infarction. In the adherence score, alcohol consumption is given 5 points for a consumption of up to 300 ml of an alcoholic beverage per day (the equivalent of up to about 3 drinks/day). Four points to 1 point are given for greater amounts of alcohol (between 300 and 700 ml), and 0 points for a consumption of more than 700 ml per day or total abstinence from alcohol. (Thus, maximum points are given for moderate drinking but no points if abstaining or drinking greater amounts of alcohol.)

In an earlier study from Greece, the mean score was 24 out of 55. In RICO, the mean score of the French subjects was higher, 27.5. Subjects with dyslipidemia had higher scores than those with normal lipids, and there were lower scores among smokers and higher scores among patients over 60 years of age. A total of 48% of subjects

in the RICO study consumed between 1 and 3 drinks/day, which contributed 5 points to their scores. The author states that the better adherence among their patients with dyslipidemia suggests that such patients are more sensitive to the relationship between eating habits and cardiovascular disease. He suggests that this adherence score is easily implemented and serves as a useful evaluation tool to assess the dietary status of patients with coronary artery disease in both clinical and research situations.

Comment: This paper describes the application of an adherence score for judging how closely someone is following a Mediterranean-type diet (which is increasingly being shown to lower the risks of heart disease and most other diseases of ageing). In this study of people who had had a myocardial infarction, those with abnormal lipids and older subjects appeared to be better at following such a diet.

Another way of estimating overall lifestyle can be based on the 5-component definition of a "healthy lifestyle" from the epidemiologists at Harvard: (1) not smoking, (2) eating a Mediterranean-type diet, (3) not being obese, (4) getting regular moderate exercise, and (5) consuming 1/2 to 2 drinks/day (unless alcohol is contraindicated). With each approach, moderate drinking makes a significant contribution to the score.

Goñi I, Perez-Jimenez J, Saura-Calixto F*. **Contribution of wine to the total antioxidant capacity of the Mediterranean diet.** *Unidad de Nutrición y Salud Gastrointestinal (CSIC-UCM) Instituto del Frio-Facultad de Farmacia, 28040 Madrid, Spain.*

*Corresponding author: fsaura@if.csic.es

In a paper by Goñi and colleagues, it was stated that dietary antioxidants may be a critical mediator of the beneficial effects of the Mediterranean diet (MD), and a greater adherence to the MD is associated with a high antioxidant capacity levels in serum. The objective of this work was to estimate the contribution of wine consumption in Southern France to total intake of antioxidants using a measurement termed the total dietary antioxidant capacity (TDAC). In their earlier studies in Spain, wine consumption (90 mL/person/day) represented 19% of the TDAC (with a greater percentage of antioxidants coming from coffee.)

The MONICA epidemiological study found the lowest coronary heart disease mortality in the region of Toulouse, France, where a daily intake of 383 ml of wine was reported. The authors stated that if they assume that the antioxidant capacity of the Toulouse wine is comparable to that of Spanish red wine, the antioxidant capacity solely from wine intake in Toulouse is equivalent to the TDAC of the whole Spanish diet. Adding the reported intake of 238 g of fruit and 306 g of vegetables to wine consumption, the estimated antioxidant intake in Toulouse is very high and could be a key factor

in the low coronary heart disease mortality in this region.

Comment: The TDAC is a measure of the intake of phenolics, and may be a reasonable index of anti-oxidant capacity. The dramatic percentage of the TDAC from wine among subjects in Toulouse suggests that wine may be an important factor in the demonstrated very low rates of coronary heart disease in that area of France.

Leighton F*, Urquiaga I. **Mediterranean diets and oxidative stress in the metabolic syndrome.** *Molecular Nutrition and Chronic Diseases Center, Universidad Católica de Chile, Casilla 114-D, Santiago, Chile.*

*Corresponding author: fleighton@bio.puc.cl - www.pam-chile.cl

Striking results from an intervention study were reported by Leighton and Urquiaga. It was stated that Mediterranean Diets are associated with reduced incidence of the metabolic syndrome (MS), which adversely affects endothelial function, haemostatic parameters, inflammatory markers and antioxidants. In a 12-month intervention study in an industrial plant, the authors studied approximately 150 workers, of whom 24% had MS at baseline. As part of the intervention, the authors conducted educational lectures with workers, modified the arrangement of foods at the plant cafeteria, and presented additional fresh vegetables in a salad bar.

At the end of the intervention, there was a 71% increase in vegetable consumption and a 71% decrease in red meat consumption. There was a

significant decrease in triglycerides, and a striking lowering of blood pressure. The number of subjects meeting criteria for MS decreased by 48%.

Comment: Using interventions at the work place has been tried for several decades, with mixed results in terms of lowering blood pressure or blood cholesterol. The dramatic benefits in this study (reducing metabolic syndrome by 48%) suggests that Dr. Leighton and his colleagues were very effective in increasing the consumption of a Mediterranean diet. This study demonstrates that a combination of education and modification of food presentation (including re-arranging the plant's cafeteria to make healthier foods more available and making the workers search to find foods such as bread, hi-fat and hi-sugar foods, and red meat) markedly reduced the prevalence of MS, and could be especially important in reducing the risk of cardiovascular disease.

Alcohol use, bone density, and hip fractures in older adults

Moderate drinking has been consistently linked with higher bone mineral density but not hip fracture risk. Researchers in this study analyzed the impact of alcohol consumption on hip fracture risk using data from a study of 5865 adults aged 65 and older from 4 US communities.

All participants had reported their alcohol use yearly and had their hospital records examined for hip fracture diagnoses. A subgroup of 1567 in 2 communities underwent a single scan to assess bone mineral density (BMD).

During about 12 years of follow-up, 412 hip fractures occurred. and the authors, after adjusting for potential confounders (e.g., age, sex, weight) found that light-to-moderate drinkers (both men and women) had a lower risk of hip fracture than abstainers while heavy drinkers had a higher risk (e.g., hazard ratio [HR], 0.9 for 1–6 drinks per week, 1.3 for TM14 drinks per week; P for trend=0.02). Among participants who underwent scans, BMD of both the total hip and femoral neck increased with consumption, suggesting that hip fracture risk in heavy drinkers is probably associated with more falls, and issue not studied in this research.

Source: Mukamal KJ, Robbins JA, Cauley JA, et al. Alcohol consumption, bone density, and hip fracture among older adults: the Cardiovascular Health Study. *Osteoporos Int.* 2007;18(5):593–602.

Kaiser Permanente study finds alcohol amount, not type related to breast cancer

One of the largest individual studies of the effects of alcohol on the risk of breast cancer shows that it makes no difference whether a woman drinks wine, beer or spirits, it is the alcohol itself and the quantity consumed that increases breast cancer risk

‘Population studies have consistently linked drinking alcohol to an increased risk of female breast cancer, but until now there has been little data, most of it conflicting, about an independent role played by the choice of beverage type,’ said Klatsky, who presented these findings on September 27th at the European Cancer Conference (ECCO 14) in Barcelona, Spain.

Klatsky and colleagues studied the drinking habits of 70,033 multi-ethnic women who had supplied information during health examinations between 1978-1985. By 2004, 2,829 of these women were diagnosed with breast cancer. In one analysis, researchers compared the role of total alcohol intake among women who favoured one type of drink over another with women who had no clear preference. In another analysis, researchers looked at the possible independent role of frequency of drinking each beverage type. Finally, they examined the role of total alcohol intake, comparing it with women who drank less than one alcoholic drink a day.

The study found there was no difference between wine, beer or spirits in the risk of developing breast cancer. Even when wine was divided into red and white,

there was no difference. However, when researchers looked at the relationship between breast cancer risk and total alcohol intake, they found that women who drank between one and two alcoholic drinks per day increased their risk of breast cancer by 10% compared with light drinkers who drank less than one drink a day. The risk of breast cancer increased by 30% in women who drank more than three drinks a day.

Results were similar when researchers looked at groups stratified by age and ethnicity. *‘Statistical analyses limited to strata of wine preferers, beer preferers, spirits preferers or non-preferers each showed that heavier drinking – compared to light drinking – was related to breast cancer risk in each group. This strongly confirms the relation of ethyl alcohol to increased risk,’* stated Klatsky.

‘A 30% increased risk is not trivial. To put it into context, it is not much different from the increased risk associated with women taking estrogenic hormones. Although breast cancer incidence varies between populations and only a small proportion of women are heavy drinkers,’ Dr Klatsky said.

Other studies, including research from the same authors, show that light-moderate alcohol drinking can protect against heart attacks, but Klatsky said that different mechanisms were probably at work.

Source: European Cancer Conference. Date:, September 28, 2007

Combining alcohol with sleep restriction can affect young men's alertness and performance behind the wheel

Combining low-dose alcohol with moderate sleep restriction can have a significant adverse effect on young men's subjective alertness and performance behind the wheel.

The study, authored by Andrew Vakulin, of the Adelaide Institute for Sleep Health at Repatriation General Hospital in Australia, focused on 21 healthy young men, aged 18-30 years, who all had normal sleep patterns and no sleep disorders. The participants completed a 70-minute simulated driving session, which included steering deviation, braking reaction time, and number of collisions, and underwent repeated measures

with four experimental conditions: normal sleep without alcohol, sleep restriction alone (four hours) and sleep restriction in combination with two different low BACs (0.025 g/dL and 0.035 g/dL).

According to the results, steering deviation increased significantly when sleep restriction was combined with the higher dose alcohol. This combination also resulted in a greater subjective sleepiness and negative driving performance ratings compared to control or sleep restriction alone.

"The ability to keep the car in the middle of the lane is critical

to safe driving, and is one of the more sensitive measures of driving impairment," said Vakulin. "Although steering deviation was not significantly affected by sleep restriction alone, alcohol at a BAC as low as 0.025 g/dL in combination with sleep restriction was sufficient to significantly impair steering ability. This combination may considerably reduce the threshold for safe driving, as suggested by the steering deviation data and an increase in off-road collisions following sleep restriction and alcohol ingestion in this study."

Source: SLEEP Volume: 30 Issue:10 Pages:1327-1333

More than moderate drinking may be linked to endometrial cancer risk

Older women who drink above 30g alcohol a day may have an elevated risk of endometrial cancer, a new study suggests.

Endometrial cancer begins in the lining of the uterus, and certain factors that raise a woman's lifetime exposure to estrogen are thought to contribute to the disease. Obesity, late menopause and early menarche (the beginning of menstruation) have been linked to a heightened risk of endometrial cancer.

Alcohol has been shown to raise postmenopausal women's estrogen levels -- a fact that may explain the new findings, according to the study authors.

While the link between alcohol and endometrial cancer needs to be confirmed in other studies, the current results underscore the potential risks of too much alcohol,

according to Dr. Veronica Wendy Setiawan, an assistant professor of preventive medicine at the University of Southern California in Los Angeles.

"Moderation is the key," she said. Setiawan and her colleagues report the findings in the International Journal of Cancer.

The findings are based on data from 41,574 postmenopausal women who reported their drinking habits and other lifestyle and health factors when they entered the study. Over the next eight years, 324 women developed endometrial cancer.

Overall, the researchers found, women who averaged two or more alcoholic drinks (a US drink is 14g) a day were twice as likely to develop the cancer as non-drinkers were. No such risk was seen among lighter drinkers.

The findings don't prove a direct cause-and-effect relationship. But, the researchers note, they are in line with studies showing that alcohol spurs an increase in blood estrogen levels in postmenopausal women.

Because the current study did not include premenopausal women, it's not possible to speculate about the possible effects of alcohol on younger women's long-term risk of endometrial cancer, according to Setiawan.

However, she noted, there is evidence that younger women who drink relatively heavily -- about two drinks or more a day -- have higher estrogen levels than non-drinkers do.

Source: International Journal of Cancer, November 1, 2007.

Low doses of resveratrol may fight diabetes

The study, by researchers at the Chinese Academy of Sciences in Shanghai, showed that resveratrol activates an enzyme called SIRT1. This enzyme, in turn, suppresses the activity of a molecule called PTP1B, which ordinarily works to decrease insulin activity. SIRT1 levels were reduced in the animals' insulin-resistant cells. Increasing SIRT1 activity with resveratrol improved insulin sensitivity by acting on PTP1B.

“When you suppress PTP1B, insulin activity improves,” said Young-

Bum Kim, an assistant professor of medicine at Beth Israel Deaconess Medical Center in Boston, one author of an accompanying editorial in the journal.

“SIRT1 has a variety of functions in the body,” Kim said. **“Now we can move on to other tissues, such as the brain. It is possible that regulating the hypothalamus with SIRT1 can prevent diet-induced obesity.”**

That is clearly a long-term goal, said Janice M. Zabolotny, an instructor in medicine at Beth Israel Deaconess, and the other author of

the editorial.

“But it can make animals want less food and lower body weight,” she said. **“By activating SIRT1, you could block the expression of PTP1B and get the same hopeful benefit. Further studies are needed by other researchers and on different tissues in animals,”** Zabolotny said.

One striking finding was that much lower levels of resveratrol than in previous trials were able to increase the animals' sensitivity to insulin.

The study is published in the October issue of *Cell Metabolism*.

Moderate wine consumption improves fasting plasma glucose levels in diabetics

A Dutch randomized trial conducted in diabetic teetotalers suggests that a glass of wine with dinner may improve glucose control, particularly in those with higher HbA1c levels to begin with. The study, while small, adds to anecdotal evidence and meta-analyses that suggest wine, whose cardiovascular benefits have been widely touted, may hold specific benefits for diabetics.

Dr Iris Shai (Ben Gurion University, Beer-Sheva, Israel) presented the results of the study here at the European Association for the Study of Diabetes 2007 Meeting.

Shai noted that the proportion of alcohol abstainers is relatively high in Israel, where the study was conducted; however, the potential health benefits of moderate alcohol consumption persuaded 109 adults between the ages of 40 and 75 to participate. Indeed, dropouts during the three-month trial were higher among those randomized

to the nonalcoholic diet malt beer than among those randomized to their choice of red or white wine, with many of the dropouts citing their disappointment over not being assigned to the alcohol group.

At the end of three months, 91 subjects remained in the study; those in the alcohol-intervention group experienced a statistically significant drop in fasting plasma glucose, from a mean of 139.6 mg/dL to 118 mg/dL. By contrast, subjects in the nonalcoholic-beer group experienced no real change in fasting plasma glucose.

Of note, alcohol consumption did not appear to affect two-hour postprandial glucose levels. Shai pointed out that ethanol metabolism is believed to inhibit gluconeogenesis, which could increase the risk of hypoglycemia. **“Because of this, patients were guided to drink their beverage during dinner, which was a carbohydrate-based meal. But this**

process largely controls fasting, rather than postmeal, glycemia,” she said, which might help explain the lack of an effect on two-hour postprandial glucose.

Better glucose, better sleep

Changes in fasting plasma glucose levels were particularly marked among patients who had higher baseline HbA1c levels, Shai noted. Waist circumference and LDL levels were also reduced from baseline over the three-month period in the alcohol-intervention group, but no changes from baseline were seen in HDL levels. While “surprising,” Shai suggested that the lack of effect on HDL might be due to the relatively short duration of the trial.

Three months after the termination of the trial, 61% of the study subjects told investigators that they believed alcohol was likely beneficial and 49% were continuing to drink alcohol in moderation.

Source : European Association for the Study of Diabetes 2007 Meeting

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