

# Issue Brief: Excessive Alcohol Use

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## Introduction

Excessive alcohol use is a serious public health issue associated with significant health and economic burdens. This NACDD Issue Brief provides information about the current state of the research and evidence around alcohol use and its impact on chronic disease. It will also present a selection of policies that are evidence-based as well as promising practices to address alcohol use. This Issue Brief is intended to support the work by our Members to address excessive alcohol use in their states.

## Background

Excessive alcohol use is responsible for roughly 88,000 deaths a year, making alcohol use the third leading preventable cause of death in the United States.<sup>1,2</sup> Binge drinking is responsible for more than half of those deaths.<sup>1</sup> The total cost of excessive alcohol use in the United States was \$249 billion in 2010 (77% of those costs were due to binge drinking).<sup>3</sup> The median cost to states and the District of Columbia for excessive alcohol use was \$3.5 billion, with costs coming in the form of loss of workplace productivity, healthcare expenses, law enforcement and criminal justice expenses, and losses from motor vehicle crashes.<sup>3</sup>

### Health risks:<sup>1,4</sup>

Short-term health risks from excessive alcohol use include:

- Injuries
- Violence, including suicide
- Alcohol poisoning
- Risky sexual behaviors
- Adverse pregnancy and fetal outcomes

In the long term, excessive alcohol use can lead to:

- High blood pressure, heart disease, stroke, liver disease, and digestive problems
- Cancer of the breast, mouth, throat, esophagus, liver, and colon
- Learning and memory problems, including dementia
- Social problems
- Alcohol dependence or alcoholism

productivity, health expenses, and other costs. The economic impact of excessive drinking also can vary by state and region, with New Mexico having the highest cost per drink (\$2.77 versus the national average of \$2.05).

### Categories of Alcohol Consumption

There are different categories of alcohol consumption based on who is consuming alcohol, how much they are consuming, and how often they are consuming it. Moderate drinking is defined by the Dietary Guidelines for America as up to one drink per day for women and up to two drinks per day for men.<sup>4</sup> The next category is excessive alcohol use, which includes heavy drinking and binge drinking, any alcohol use by people under 21, and any alcohol use by pregnant women.<sup>1</sup> It is important to note that most people who drink excessively do not have alcoholism nor are alcohol dependent.<sup>5</sup>

Heavy drinking for women is defined as consuming eight or more drinks per week and binge drinking is consuming four or more drinks on one occasion. For men, heavy drinking is 15 or more drinks per week, while binge drinking is consuming five or more drinks on one occasion. Nine in 10 adults who binge drink do not have an alcohol use disorder.<sup>1</sup>

### Cost of Alcohol to Communities<sup>3</sup>

The cost of excessive drinking has been estimated at \$2.05 per drink or \$807 per person in lost worker

## Issue Overview: Alcohol and Chronic Disease

### Diabetes

Higher alcohol consumption is associated with an increased risk for diabetes.<sup>7</sup> Alcoholic beverages contain calories and can contribute to weight gain, which can make managing diabetes more difficult.<sup>8</sup> Alcohol also can interact with diabetes medications causing blood glucose to increase or decrease.<sup>8</sup>

### Cancer

Cancer is a leading cause of death, and alcohol is a leading risk factor for cancer.<sup>9</sup> Alcohol consumption is responsible for 3.2%-3.7% of U.S. cancer deaths annually.<sup>9</sup> Recently updated guidelines from the American Cancer Society (ACS) encourage people not to drink alcohol at all, but if they chose to, ACS recommends limiting consumption to one drink per day for women and two drinks per day for men.<sup>10</sup>

### Alcohol Use and COVID-19<sup>27</sup>

According to the CDC, alcohol use can weaken the body's immune system, increasing the risk of infection and complications from the disease. Additionally, alcohol use can increase the risk for respiratory problems and pneumonia.

### Cardiovascular Disease<sup>11</sup>

Drinking too much alcohol can raise the levels of fats in the blood known as triglycerides. High triglycerides combined with high LDL or low HDL cholesterol can increase the risk of heart attack and stroke. Excessive drinking can lead to high blood pressure, disease in the heart muscle (cardiomyopathy), and irregular heartbeat (cardiac arrhythmia). Binge drinking may increase the risk of atrial fibrillation (an irregular heartbeat that can lead to blood clots, stroke, and heart failure).

### Obesity<sup>12</sup>

When combined with other modifiable and non-modifiable risk factors (including personal and environmental factors) alcohol consumption can contribute to obesity. Light-to-moderate alcohol intake is less likely to be a risk factor for obesity than heavy drinking. Heavy drinking and binge drinking have been more consistently linked with obesity.

## Policy Options

More restrictive alcohol policies are related to lower levels of alcohol consumption.<sup>13</sup> States and localities can have greater impact on alcohol consumption by combining policies and implementing those policies effectively. Some examples of effective policies to reduce excessive alcohol consumption are included in this section.

### Increasing the Price of Alcohol

There is strong evidence that raising alcohol excise taxes is an effective strategy for reducing excessive alcohol consumption and alcohol-related harm.<sup>14</sup> In the United States, excise taxes on alcohol range from \$1.50 per gallon (D.C. and MD) to \$14.27 per gallon (WA) for distilled spirits; \$.02 per gallon (WY) to \$1.29 per gallon (TN) for beer; and \$.20 per gallon (CA and TX) to \$1.96 per gallon (AL) for wine.<sup>15</sup>

### Regulating Outlet Density

Outlet density refers to the number of alcohol outlets in a given area. Most studies have found that greater outlet density is associated with increased alcohol consumption and related harms.<sup>16</sup> Licensing or zoning policies often are used to reduce outlet density.<sup>17</sup>

### Resisting the Privatization of Retail Alcohol Sales

Privatization is the repeal of government control over the retail sales of one or more types of alcoholic beverages (allows commercial retailing of those beverages). States with government control of alcohol sales are referred to as control states, and states with privatized sales are referred to as license states.<sup>18</sup> There is strong evidence that privatization increases per capita alcohol consumption (a well-established proxy for excessive consumption and related harms).<sup>19</sup>

## Maintaining Limits on Days and Hours of Sale<sup>20,21</sup>

Policies limiting days and hours of sale can apply to places where alcohol is consumed onsite or elsewhere. There is strong evidence to recommend maintaining existing limits on the days when alcoholic beverages are sold. There is sufficient evidence to recommend maintaining existing limits on the hours during which alcoholic beverages are sold onsite at bars, restaurants, and other locations.

## Health Equity Perspective

Social and economic inequities that fuel health disparities also drive alcohol exposure, consumption, and addiction disparities. Communities are exposed to alcohol products at different levels, and research has shown that exposure to alcohol advertisements increases youth drinking.<sup>22</sup>

Researchers looking at alcohol advertising in New York subway stations found more ads in stations in high poverty areas. In addition, stations with alcohol ads were located disproportionately in neighborhoods with greater poverty, lower educational attainment, and higher percentages of Black and Latinx residents.<sup>23</sup>

Additionally, some communities of color are at higher risk for the worst outcomes related to alcohol misuse. For example, alcohol played a role in nearly 12% of American Indian deaths, a rate double that of the rest of the American public.<sup>24</sup>

Finally, compared to white people, Black, American Indian, Alaskan Native, and other people of color have less access to an alcohol treatment intervention. So, efforts to promote routine alcohol screening and intervention in primary care might not benefit all racial and ethnic groups equally. This could increase disparities in access to quality treatment and ultimately exacerbate disparities in alcohol problems.<sup>25</sup>

## What is the Role of Chronic Disease Directors?

State Health Departments and their Chronic Disease Units have different approaches to addressing alcohol use and implementing public health approaches to reducing harmful drinking and its consequences. Depending on their oversight role and how involved they are in alcohol regulation, Chronic Disease Directors and other public health professionals can:

- Collect and analyze data, including learning the status of Community Guide strategies in the state and conducting an environmental scan to identify alcohol-related policies.<sup>26</sup>
- Identify and engage potential partners through activities such as providing education about the health impact of excessive alcohol use, identifying potential partners at the local and national level, and ensuring that health promotion activities support reducing excessive alcohol use.<sup>26</sup> This can include partnering with higher education to address youth binge drinking.
- Work with health groups and systems to support and encourage reimbursement for preventive services that happen in clinical and community settings. This can include promoting Screening, Brief Intervention, and Referral to Treatment, an alcohol screening and brief intervention that involves a validated set of screening questions to identify patients' drinking patterns (how much and how often they drink). The Community Preventive Services Task Force recommends electronic screening and brief intervention to reduce excessive alcohol consumption and alcohol-related problems.
- Incorporate messages about safe alcohol consumption in public education campaigns.

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