# Improving health together



Public Health Factsheet

elcome to this edition of Improving Health Together, which focuses on Alcohol.

Whatever the reasons for wanting to do so, cutting down on alcohol is something that won't be regretted.

Regularly drinking over the guidelines can lead to serious health problems, from liver damage to a greater risk of getting cancer or having a heart attack. Don't forget that alcohol contains calories and can give you a spare tyre!

- Too many bottles of wine and beer in the weekly recycling?
- Too many mid-week hangovers at work?

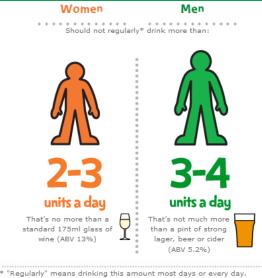
If so, it might be time to take a look at drinking habits.

Reducing alcohol intake has loads of feel-good benefits. It's good for health, and great for relationships. And the good news is there are plenty of practical ways to start to cut down.

# Alcohol

# **Alcohol Units**

#### The NHS recommends:



The UK Chief Medical Officers' advice to women is:

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'Women who are pregnant or trying to conceive should avoid alcohol altogether. However, if they do choose to drink, to minimise the risk to the baby, we recommend they should not drink more than 1-2 units once or twice a week and should not get drunk.'

The Department of Health defines alcohol misuse into three categories:

- Hazardous drinking (also known as increasing risk) these people are drinking above recognised sensible levels but not yet experiencing harm. Increasing risk limits are defined by the Department of Health as drinking more than 3-4 units a day for men and more than 2-3 units a day for women on a regular basis.
- Harmful drinking (also known as higher risk drinking) this group are drinking above recommended levels for sensible drinking and experiencing physical and/or mental harm. Higher risk drinking is classified as the regular consumption of more than 8 units a day for a man (more than 50 units a week) or more than 6 units per day for a woman (more than 35 units a week). Individuals categorised as higher risk drinkers are not dependent on alcohol.
- **Dependent drinkers** this group are drinking above recommended levels, experiencing an increased drive to use alcohol and feel it is difficult to function without alcohol. Dependent drinking can be sub-divided into two categories; moderate dependence and severe dependence, traditionally known as chronic alcoholism.

In addition **binge drinking** is defined as drinking at least twice the daily recommended amount of alcohol in a single drinking session (8 or more units for men and 6 or more units for women). Binge drinking usually refers to people drinking a lot of alcohol in a short space of time or drinking to get drunk.

**Lower risk drinking** is defined as men drinking no more than 3-4 units a day and women drinking no more than 2-3 units a day on a regular basis.

# What is a unit of alcohol?

One unit of alcohol is about half a pint of bitter or ordinary lager (ABV [alcohol by volume] 4.5%), or a single measure of spirits (25ml). However, a 175ml glass of wine (13% ABV) is 2.3 units and a pint of strong beer (ABV 8%) is 4.5 units. The number of units in particular drinks are different, depending on the strength of the alcohol in them and the volume of the drink .



- The 2012 National Alcohol Strategy states that alcohol-related harm is now estimated to cost society £21 billion annually.
- Increasing numbers of people drinking excessively at home, including many who do so before they go on a night out, termed 'preloading'.
- In a recent study approximately two-thirds of 17-30 year olds arrested in a city in England claimed to have 'pre-loaded' before a night out.

#### Alcohol's hidden harms—effects on health

Regularly drinking over the <u>lower risk guidelines</u> increases the chances of suffering more serious health harms such as:

- Cancer of the throat, oesophagus or larynx. Regularly drinking two large glasses of wine (ABV 13%) or two pints of strong lager (ABV 5.2%) a day could make you three times as likely to get mouth cancer.
- Breast cancer in women. Regularly drinking just above the guidelines increases the risk of getting breast cancer by around 20%.
- Stroke.
  High blood pressure.
  Pancreatitis.
  Reduced fertility.
- Heart disease or an irregular heartbeat, which can lead to a heart attack.
- Liver disease such as cirrhosis and liver cancer. If you regularly drink just above the lower-risk guidelines the risk of liver cirrhosis increases 1.7 times.

The more people drink, and the more often, the greater the risk to their health. And for people with a medical condition (such as diabetes or high blood pressure) or are suffering from depression or anxiety, alcohol often makes life worse.

# Promote sensible drinking

- The key to successfully cutting down is to make small, but important, changes in attitudes towards drinking. Lots of little changes can add up to big lifestyle changes. Here are some ideas:
- Stick to the recommended guidelines.
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- **Go diluted.** Try a more diluted alcoholic drink such as a spritzer or shandy.
- Space with soft drinks. Have a soft drink or two with each alcoholic drink to help stay hydrated.
- Remember that home measures are often much bigger. Use small wine glasses or an alcohol measure.
- Avoid buying in rounds and drink slowly.

# Five benefits to cutting down

- 1 Watch the weight. Alcohol is heavy on <u>calories</u>—682 calories in an average 13% bottle of wine.
- 2 Sleep soundly. Drinking less means more high quality sleep because alcohol interferes with the normal sleep process.
- **3 Reduce stress.** Some people say that they drink to relax, but in fact excess alcohol can actually lead to more <u>stress</u> because it's a depressant.
- 4 Avoid hangovers. Keep to the daily unit guidelines.
- **5** Stay healthy for longer. Cutting down can be great news for your long-term health.

# **North Yorkshire Alcohol Needs Assessment 2013**

North Yorkshire recently refreshed the North Yorkshire Alcohol Needs Assessment which will inform the development of a North Yorkshire Alcohol Strategy:

- Modelled estimates of alcohol consumption show between 7—8% of the North Yorkshire population who drink are classified as higher risk drinkers; 20—22% are classified as increasing risk drinkers; 71—74% are classified as lower risk drinkers.
- Nationally, hazardous drinking rates are highest in the 45—64 year old age band, followed by the 25—44, 16—24 and 65+ age bands respectively.
- Alcohol related admissions to hospital have continued to rise in line with national figures, with rates in women being about half those for men.
- Drinking alcohol is the second biggest risk factor for cancers of the mouth and throat (smoking is the first).
- The cost of ambulance attendances in North Yorkshire and York where alcohol was involved was nearly a quarter of a million pounds in just one quarter of this year.

#### **Growing Up In North Yorkshire**

Every two years the Growing Up In North Yorkshire survey of North Yorkshire primary and secondary pupils is carried out to gather information about healthy lifestyles. Data from the 2012 survey indicated the following:

- ▲ 48% of pupils responded that they do not drink alcohol.
- ▲ 46% of pupils responded that they drink alcohol and their parents 'always' know.
- ▲ 3% of pupils responded that they drink alcohol and their parents 'never' or only 'sometimes' know.

# Identification and brief advice

#### **NHS Health Check**

Everyone is at risk of developing heart disease, stroke, diabetes, kidney disease and some forms of dementia. The good news is that these conditions can often be prevented, even if there is a family history of them. The NHS Health Check (for adults in England between the ages of 40 and 74) can help by assessing an individual's risk of developing these health problems and giving personalised advice on how to reduce it.

There is a nationally commissioned Directly Enhanced Service (DES) in primary care which provides specific funding for GPs to deliver Identification and Brief Advice (IBA) to newly registered patients.

NICE advises the provision of screening and brief interventions for people at risk of an alcohol-related problem (hazardous drinkers) and those whose health is being damaged by alcohol (harmful drinkers). Where screening everyone is not feasible the following applies:

#### Local Alcohol Profiles for England 2012—York

- 7.7% of the popular are classified as higher risk drinkers
- 20.0% are classified as increasing risk drinkers;
- ♦ 71.4% are classified as lower risk drinkers <u>www.lape.org.uk/</u>



Download the drinks checker App for smartphones www.nhs.uk/change4life/pages/drinks-trackermobile-app.aspx

#### NHS professionals should focus on people:

- with relevant physical conditions (such as hypertension and gastrointestinal or liver disorders);
- with relevant mental health problems (such as anxiety, depression or other mood disorders);
- who have been assaulted;
- at risk of self-harm;
- who regularly experience accidents or minor traumas;
- who regularly attend GUM clinics or repeatedly seek emergency contraception.

#### Non-NHS professionals should focus on people:

- at risk of self-harm;
- involved in crime or other antisocial behaviour;
- who have been assaulted;
- at risk of domestic abuse;
- whose children are involved with child safeguarding agencies;
- with drug problems.

For adults who have not responded to brief structured advice on alcohol, offer an extended brief intervention (up to four sessions of 20—30 minutes each). Staff should be trained to provide alcohol screening and structured brief advice.

Referral to specialist treatment should be made if one or more of the following has occurred. They:

- show signs of moderate or severe alcohol dependence;
- have failed to benefit from structured brief advice and an extended brief intervention and wish to receive further help for an alcohol problem;
- show signs of severe alcohol-related impairment or have a related co-morbid condition.

### **North Yorkshire Alcohol Services**

North Yorkshire County Council is in the process of re-configuring all adult drug and alcohol services - there will be an integrated, recovery focussed drug and alcohol service in place across North Yorkshire from October 2014 and it will have a single point of contact. The new service will accept all sources of referrals for anyone in North Yorkshire who is assessed as a harmful or dependent drinker (as defined by NICE guidelines CG 115). Further details on how to contact the new service will be publicised once the new contracts are awarded.

In the meantime, if you're concerned about someone's alcohol consumption please contact your current local alcohol service:

Craven and District	Craven Organisation for Drugs and Alcohol 01756 794362 www.coda-craven.org
Hambleton and Richmondshire	HARCAS – 01609 780486 www.harcas.co.uk
Harrogate and District	Harrogate Community Alcohol Team 01423 553562 <u>www.tewv.nhs.uk/Our-services1/Harrogate-</u> <u>and-Craven/Adult-services/Harrogate-</u> <u>community-alcohol-team/</u>
Scarborough, Whitby and Ryedale	The Cambridge Centre 01723 367475 www.cambridgecentre.org
Selby	Selby Alcohol Service 01757 293600 www.selbydistrictavs.org.uk/index.php/alcohol- service/
York	Lifeline 01904 464680 www.lifeline.org.uk
Young People (11- 19 years and up to 25 for those with	<i>Compass Reach</i> 0800 008 7452

25 for those with special educational needs or disabilities) www.compass-uk.org/where-we-work/youngpeoples-services/north-yorkshire/

#### Order your free resources

#### **Department of Health**

www.orderline.dh.gov.uk Tel: 0300 123 1002 Don't let drink sneak up on you Leaflet (Product code C4L238) A3 Poster (Product code 2900024)

#### drinkaware

www.drinkaware.co.uk Tel: 020 7766 7900 Unit and calorie counter Drink diary, Unit measure cup Leaflets Register to receive £85 free credit

#### Contact us

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Websites/Policy Context

Change4Life www.nhs.uk/Change4Life/ Interactive site with information about alcohol and drinking.

Alcohol Concern www.alcoholconcern.org.uk

The national agency on alcohol misuse. General information about alcohol including useful factsheets,

call 020 7264 0510 Alcoholics Anonymous www.alcoholics-anonymous.org.uk A peer support organisation to help people stop drinking and information for professionals. Local groups throughout the county 0845 769 7555. SMART Recovery www.smartrecovery.org.uk A mutual aid network helping people recover from addictive behavior. Run a network of self help meetings and also partner with care professionals. NHS Evidence—Alcohol www.evidence.nhs.uk "One stop" resource bringing together high quality evidence based information. Local Alcohol Profiles for England www.lape.org.uk Profiles for each LA and PCT in England. North Yorkshire County Council—Alcohol **City of York Council—Alcohol Models of Care for Alcohol Misusers** National Treatment Agency for Substance Misuse, 2006 Alcohol Strategy for England. HM Government (2012) NICE has produced five key evidence guidelines that relate to alcohol: **Alcohol Use Disorders: Preventing** • harmful drinking (PH 24) (2010) **Alcohol Dependence and harmful** • alcohol use. CG 115 (2011) Alcohol use disorders: diagnosis and • clinical management of alcohol-related physical complications. CG 100 (2010) School-based interventions on alcohol . (PH 7) (2007) Behaviour change: individual approaches (PH 49) (2014) **NICE Alcohol Guidance Review of the Effectiveness of Treatment** for Alcohol Problems. National Treatment Agency for Substance Misuse (2006) North Yorkshire JSNA 2012—Alcohol **North Yorkshire Alcohol Needs** 

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Assessment 2013

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