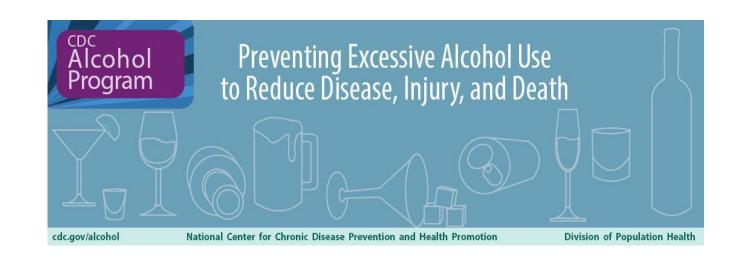
Centers for Disease Control and PreventionNational Center for Chronic Disease Prevention and Health Promotion



Excessive Drinking, Other Substance Use, and the Role of Effective Alcohol Policies for Prevention

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Alcohol Policy Conference 19 September 14-16, 2022 Arlington, VA



As required by the Alcohol Policy 19 Conference,

I/we have signed a disclosure statement and note the

following conflict(s) of interest:

None



Overview

- Background on excessive alcohol use
- Associations between excessive alcohol use and other substance use
- Changes in alcohol-related emergency department visits
- Tools and resources on preventing excessive alcohol use

Background on Excessive Alcohol Use



Public Health Approach to Reduce Excessive Alcohol Use

CDC Alcohol Program Goals:





Translate research into public health practice and communication



Expand state and local public health capacity in alcohol epidemiology and prevention



Partnerships and collaborations to promote effective population-level prevention strategies



What is excessive alcohol use?

Excessive alcohol use includes:



Binge Drinking

For women, 4 or more drinks consumed on an occasion





consumed on an occasion



Heavy Drinking

For women, 8 or more drinks per week





Any alcohol use by pregnant women





Any alcohol use by those under the age of 21 years



Standard Drink Sizes Vary by Beverage Type and Alcohol Concentration

What is considered a "drink"?

U.S. Standard Drink Sizes







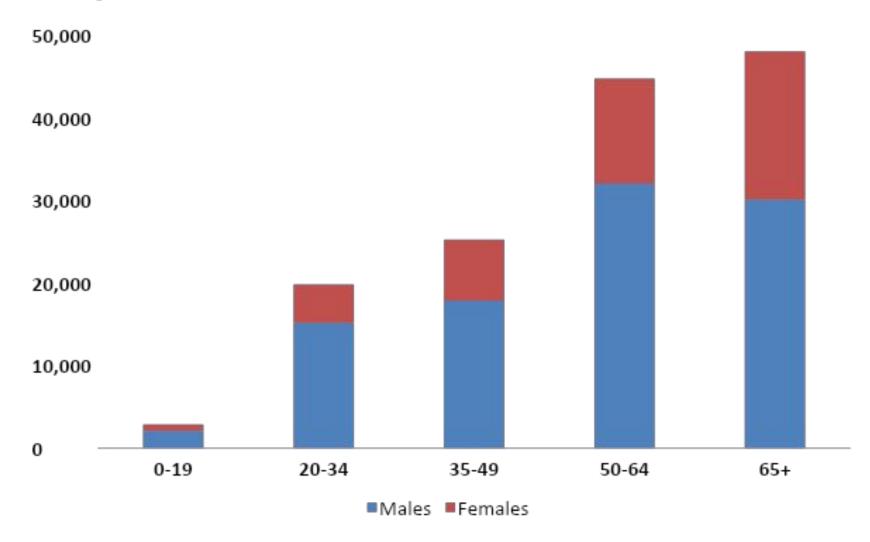


A U.S. standard drink contains 14 grams (0.6 oz) of pure alcohol

Deaths from Excessive Alcohol Use are a Leading Preventable Cause of Death



Most of the Deaths From Excessive Drinking are Among Adults Ages 35 and Older



Binge Drinking is the Most Deadly, Costly & Common Pattern of Excessive Drinking in the U.S.

42% of the deaths from excessive drinking

90% of excessive drinkers binge drink

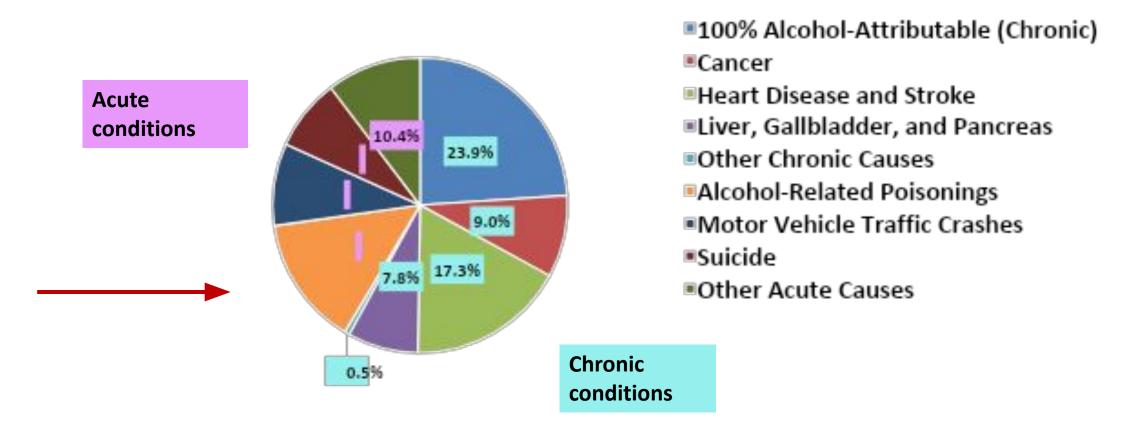


55% of the years of potential life lost

77% of the economic costs

Excessive Alcohol Use and Other Substance Use

1 in 7 Alcohol-Attributable Deaths Are From Alcohol-Related Poisonings*



^{*}Alcohol-related poisonings include alcohol poisonings and poisonings from other substances that involve a high blood alcohol concentration level

Prevalence of Past 30-day Prescription Opioid Misuse

- In the general population: 1.6%, or 4.2 million people
- Among binge drinkers: 3.5%, or 2.2 million people



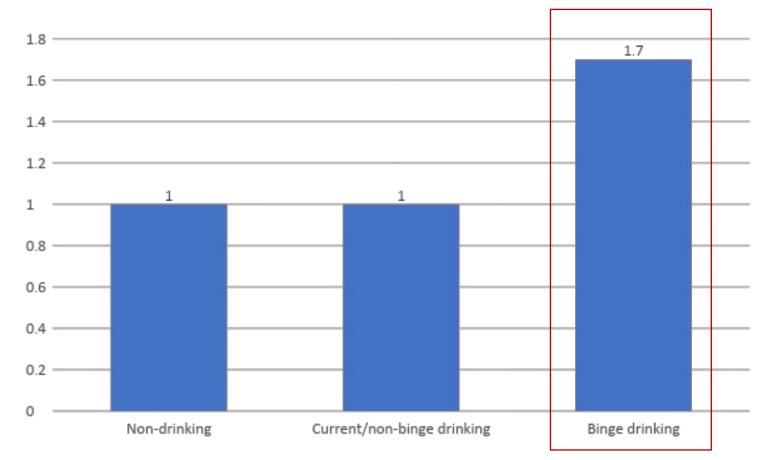
More than half of the 4.2 million people who misuse prescription opioids in the U.S. also binge drink.

www.cdc.gov/alcohol



Binge Drinkers Were More Likely to Misuse Prescription Opioids Than Non-Drinkers

Adjusted odds ratio*



Prevalence of opioid misuse: 1.0%

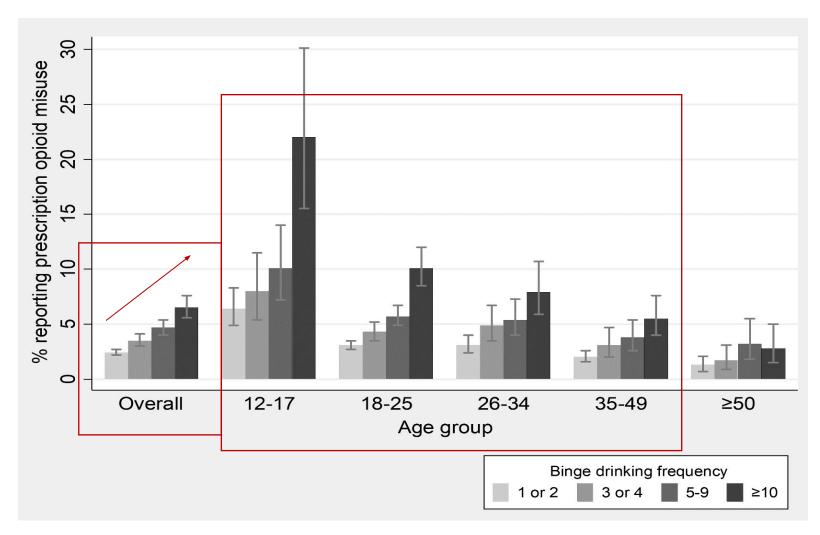
1.0%

3.5%

Prescription Opioid Misuse Varied by Binge Drinkers' Characteristics

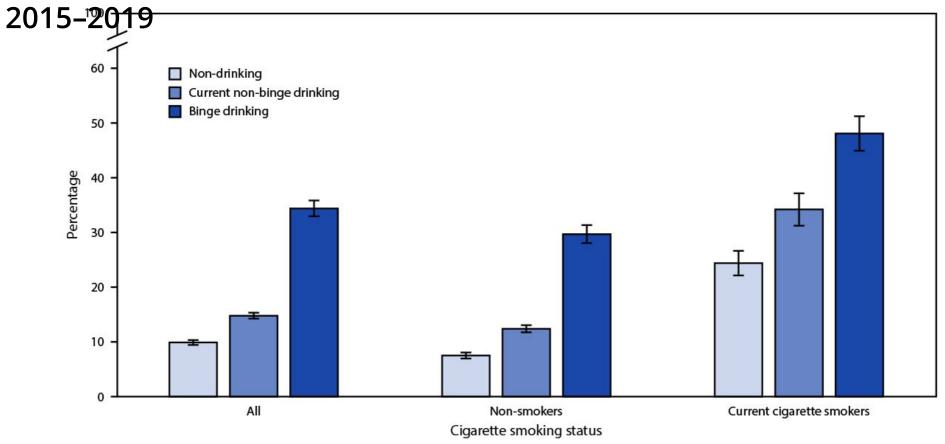
- Binge drinkers aged 12 to 17 years had the highest prevalence (8.1%)
- Prescription opioid misuse was more common among binge drinkers with lower educational and income levels
- Prevalence similar by sex (men: 3.6%; women: 3.4%)

Prescription Opioid Misuse Increased with Binge Drinking Frequency



Adults in Colorado Who Binge Drink are More Likely to Use Marijuana

Past 30-day marijuana use, Colorado Behavioral Risk Factor Surveillance System,

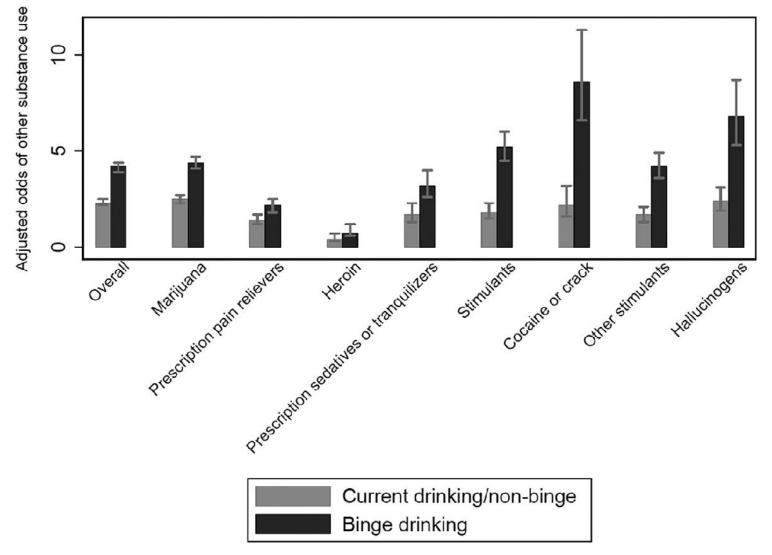


Crawford et al. Current Marijuana Use and Alcohol Consumption Among Adults Following the Legalization of Nonmedical Retail Marijuana Sales — Colorado, 2015–2019. MMWR Morb Mortal Wkly Rep 2021;70:1505–1508.

Binge Drinking Is Associated With Increased Odds of Other Substance Use



Binge Drinking and Increased Odds of Using Specific Substances



Many People Who Binge Drink Use Other Substances



Changes in Alcohol-Related ED Visits

Alcohol Policies and Drinking Environments Changed During the First Phase of the Pandemic – And Many Became Permanent

- Closures or operating restrictions at bars and restaurants
- Options for delivery and takeaway of alcoholic beverages from bars, restaurants, or both
- Expansion of policies allowing home delivery of alcohol from online sales

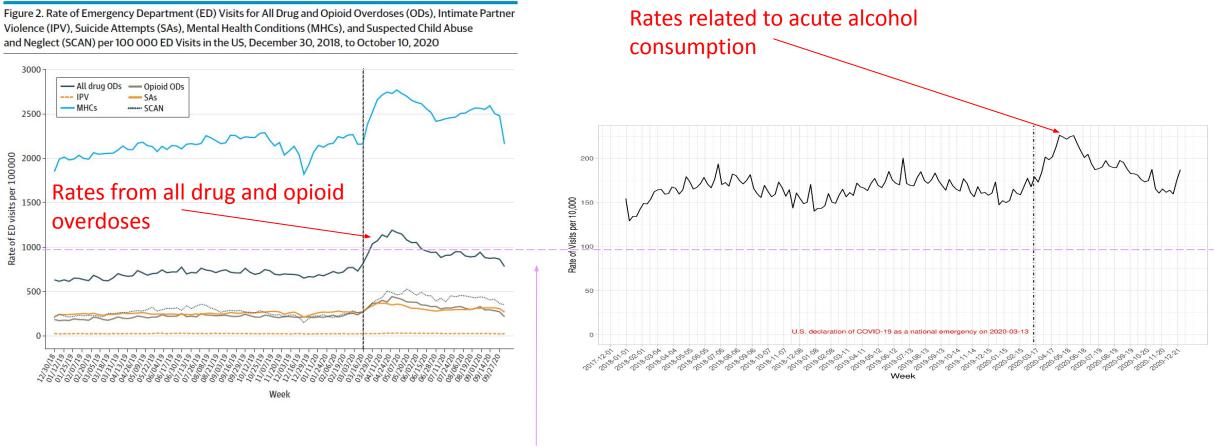


Changes in Alcohol Sales During the Pandemic

- Reduced alcohol sales at bars and restaurants (on-premises outlets)
- Increased alcohol sales for consumption off-premises and per capita
- Increased sales online for home delivery
- Apparent stocking up on alcohol during early pandemic



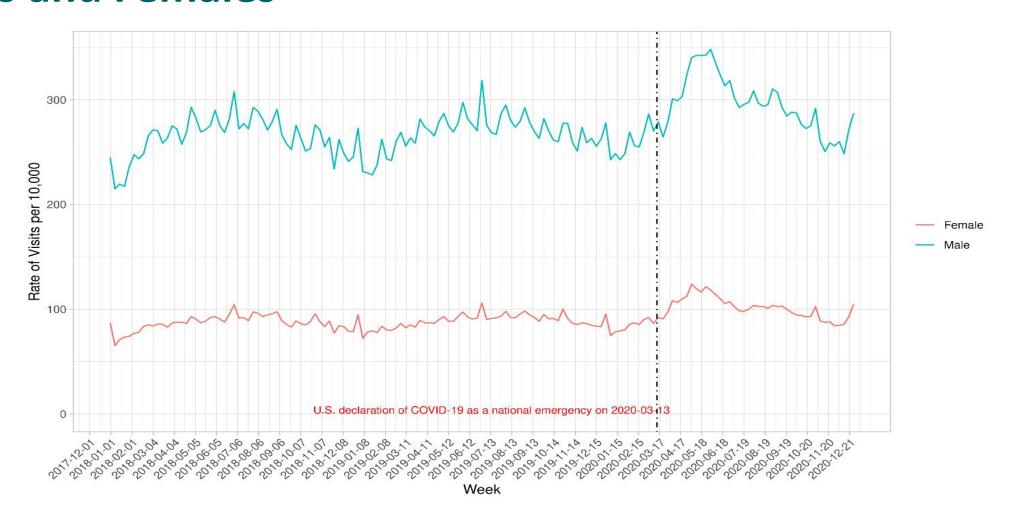
Emergency Department Visit Rates Involving Acute Alcohol Consumption Exceed Rates From Drug



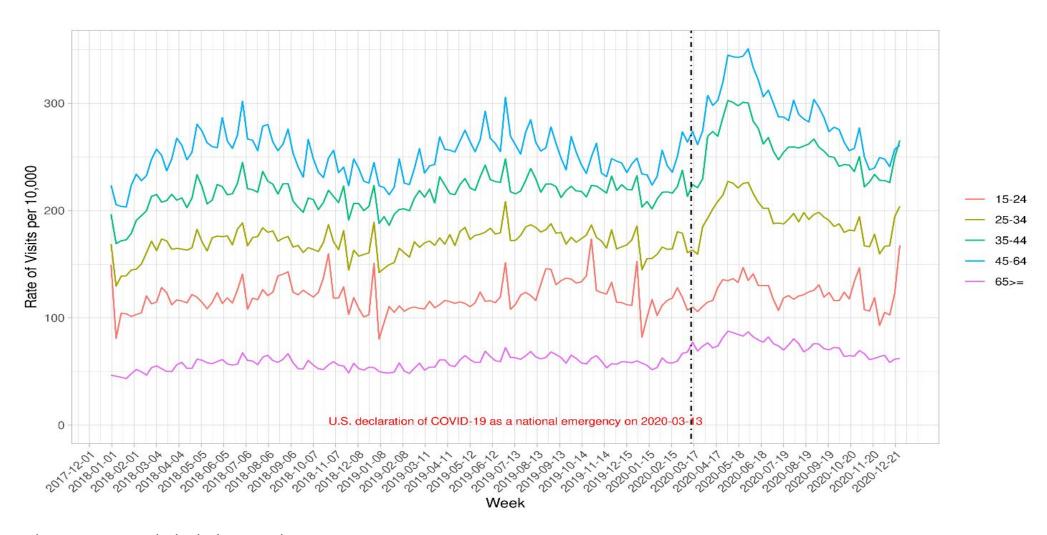
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Holland et al. 2021 JAMA Psychiatry; Esser et al. 2022 Drug and Alcohol Dependence Reports

Alcohol-Related ED Visit Rates Were Elevated in 2020 for Males and Females

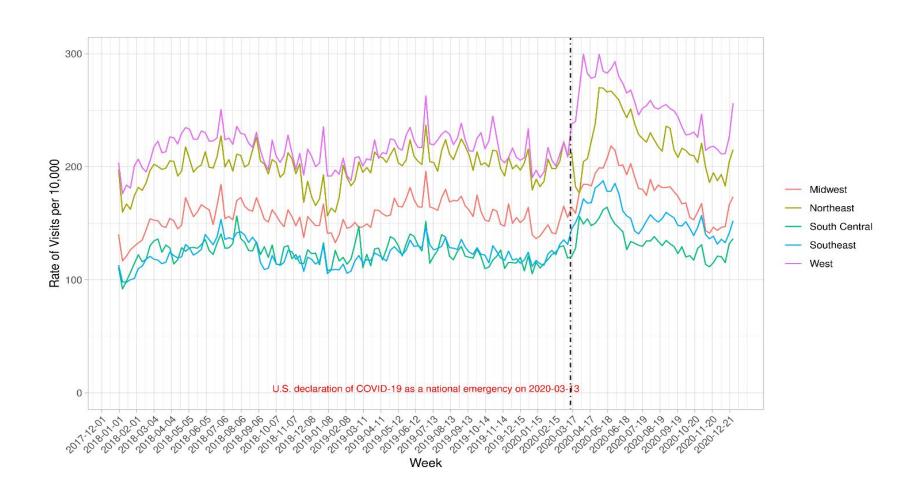


Alcohol-Related ED Visit Rates by Age Group



Esser et al. 2022 Drug and Alcohol Dependence Reports

Alcohol-Related ED Visit Rates Higher in 2020 in All Regions





New CDC Fact Sheet

Alcohol and Other Substance Use

Polysubstance use is when two or more substances are used together or within a short time period, either intentionally or unintentionally. Polysubstance use involving alcohol includes drinking and using other substances such as marijuana, opioids, heroin or other illicit drugs or medications not as prescribed. Whether intentional or not, using alcohol and other substances is unsafe because the effects may be stronger and more unpredictable than one drug alone, and even deadly.

Polysubstance use involving alcohol can increase the chance of health risks including:

- Overdose
- Injury
- Violence
- Risky sexual behavior
- Chronic disease
- Alcohol or other substance use disorders.



Drinking alcohol while using opioids increases the risk of overdose and death.

www.cdc.gov/alcohol



Alcohol can increase overdose risk.

Using alcohol and certain other substances, including other depressants like opioids or benzodiazepines, together or within a couple of hours of drinking can result in:

- · Difficulty or stopping breathing
- . Damage to the brain, heart, and other organs
- Death.

Drinking alcohol with medications can also cause health problems or death. Always check with your healthcare provider before drinking while taking prescription medication.

How common are overdoses involving alcohol in the United States?

- About 1 in 5 emergency department visits associated with substance use also involved alcohol in 2016.²
- About 1 in 7 opioid-related deaths involved drinking alcohol within a few hours of using an opioid in 2017. The proportion
 of opioid overdose deaths involving alcohol varied by state, ranging from 7% to 29%.³
- Opioid overdose deaths where alcohol contributed to the death increased 41% from 2019 to 2020.⁴

Harms involving the use of alcohol and other substances can be prevented.

You can

- Avoid using alcohol when using other substances.
- Choose not to drink or limit alcohol use. If you are an adult of legal drinking age and choose to drink alcohol, adhere to the *Dietary Guidelines for Americans* on moderate alcohol use (up to one drink in a day for women and up to 2 drinks in a day for men).⁶
- Talk with your healthcare provider about your drinking and discuss the medicines that you are taking to prevent adverse reactions with prescribed medications.
- Take a quick assessment to check your drinking.
- Support effective community strategies to prevent excessive alcohol use, such as increasing alcohol taxes, regulating the number of places that sell alcohol in your community, or others recommended by the Community Preventive Services
 Task Force

States and communities can

- Use comprehensive and effective approaches to reduce the availability and affordability of alcohol such as by regulating the density of alcohol outlets through zoning and licensing, increasing alcohol taxes, or other strategies recommended by the Community Preventive Services Task Force These strategies can be used with other strategies to reduce overdoses, such as strengthening prescription drug monitoring programs.
- Enforce existing laws and regulations about alcohol sales and service.
- Develop and strengthen community coalitions that build partnerships between schools, faith-based organizations, law
 enforcement, healthcare providers, public health agencies, and local, tribal, and state leaders to reduce alcohol and other
 substance use and its impacts.
- Routinely monitor and report the prevalence, frequency, and intensity of binge drinking (whether people binge drink, how often they do so, and the number of drinks they consume) and other substance use.
- Routinely assess alcohol in toxicology testing in acute care settings and among decedents.

www.cdc.gov/alcohol/fact-sheets/alcohol-and-other-substance-use

Evidence-Based Strategies to Reduce Excessive Drinking

Strategies recommended by the Community Preventive Services Task Force:

- Increase alcohol taxes
- Regulate alcohol outlet density
- Commercial host liability laws: Hold retailers accountable for harms incurred by illegal service to intoxicated or underage patrons
- Avoid further privatization of alcohol sales
- Maintain limits on days of sales
- Maintain limits on hours of sales
- Enhanced enforcement of laws prohibiting alcohol sales to minors
- Electronic screening and brief intervention (e-SBI)



Increasing Alcohol Prices: Taxes

- Strong and consistent evidence of intervention effectiveness
- Impact is proportional to the size of the tax increase



Increasing Alcohol Prices: Minimum Pricing Policies

- Sets a floor price beneath which alcohol cannot be sold and affects alcohol retail prices
- Recommended by World Health Organization
- Cost effective and higher public acceptability than taxes

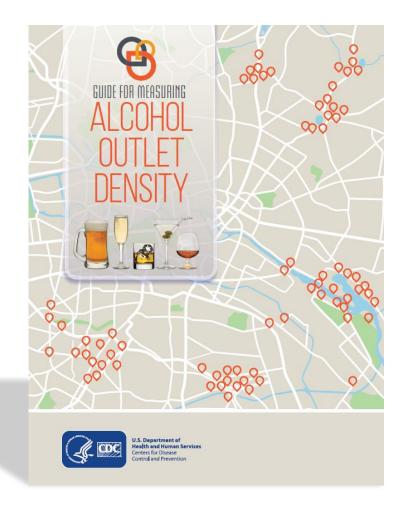


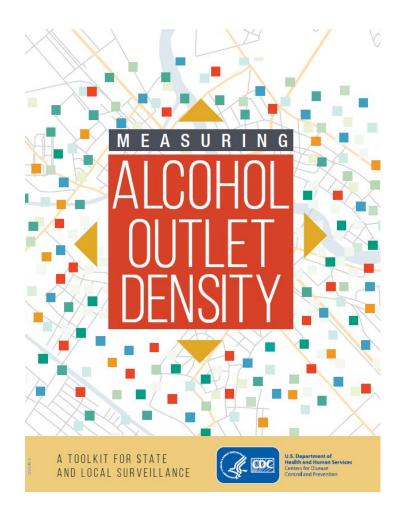
Regulating Alcohol Outlet Density

- Refers to the concentration of retail alcohol outlets within an area
- Higher alcohol outlet density is associated with increased alcohol consumption and related harms (e.g., violent crime)
- States may limit the extent to which local governments can implement zoning or licensing controls over the number of alcohol retailers (state preemption)



CDC Resources for Measuring Alcohol Outlet Density





www.cdc.gov/alcohol/fact-sheets/outlet-density-measurement.htm

User's Guides to Understanding Alcohol Taxes,
Commercial Host Liability, Regulating Alcohol Outlet
Density



http://alcohol-psr.changelabsolutions.org/

Alcohol-Related Disease Impact Application

- Free online tool (<u>www.cdc.gov/ardi</u>)
- Assess contribution of alcohol consumption to deaths and years of potential life lost from 58 alcohol-related chronic and acute conditions
- National and state estimates, annual average from 5 years (2015–2019)
- Risk estimates and alcohol-attributable fractions (AAF) based on published studies, particularly meta-analyses
- Mortality data from the National Vital Statistics System, based on ICD-10 codes for <u>underlying</u> causes of death
- Custom Data User portal available



Drink Less, Be Your Best

You keep making excuses progress.



Choosing to drink less alcohol can help you be your best. Being your best could mean enjoying your golden years in good health, feeling refreshed and rested each morning, or having more money in the bank. Drink less and be your best.









 Mass communications campaign focused on adults (18 and older) who drink excessively

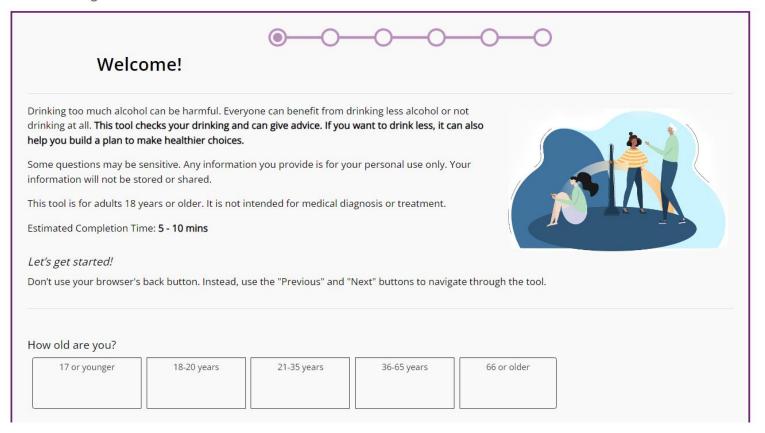


www.cdc.gov/drinklessbeyourbest

CDC's New Electronic Screening and Brief Intervention

Check Your Drinking. Make a Plan to Drink Less.

Alcohol Screening Tool



Want to check your alcohol use?

This quick assessment can help you check.

Visit https://bit.ly/3PdwBjj



www.cdc.gov/alcohol/checkyourdrinking

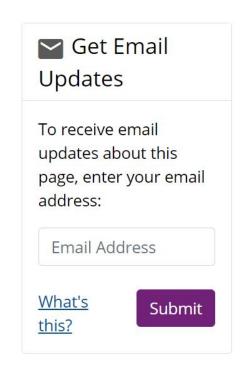
2020-2025 Dietary Guidelines for Americans

- Current drinkers (≥21 years) do so in moderation
- Up to 1 drink in a day for women
- Up to 2 drinks in a day for men
- Drinking less is better for health than drinking more
- People who have medical conditions or are taking medications that can interact with alcohol should not drink at all



Stay Connected

- Join our listserv by entering your email in the "Get Email Updates" box on any of the Alcohol Program web pages
- Receive the latest resources and training opportunities such as from the Center for Advancing Alcohol Science to Practice



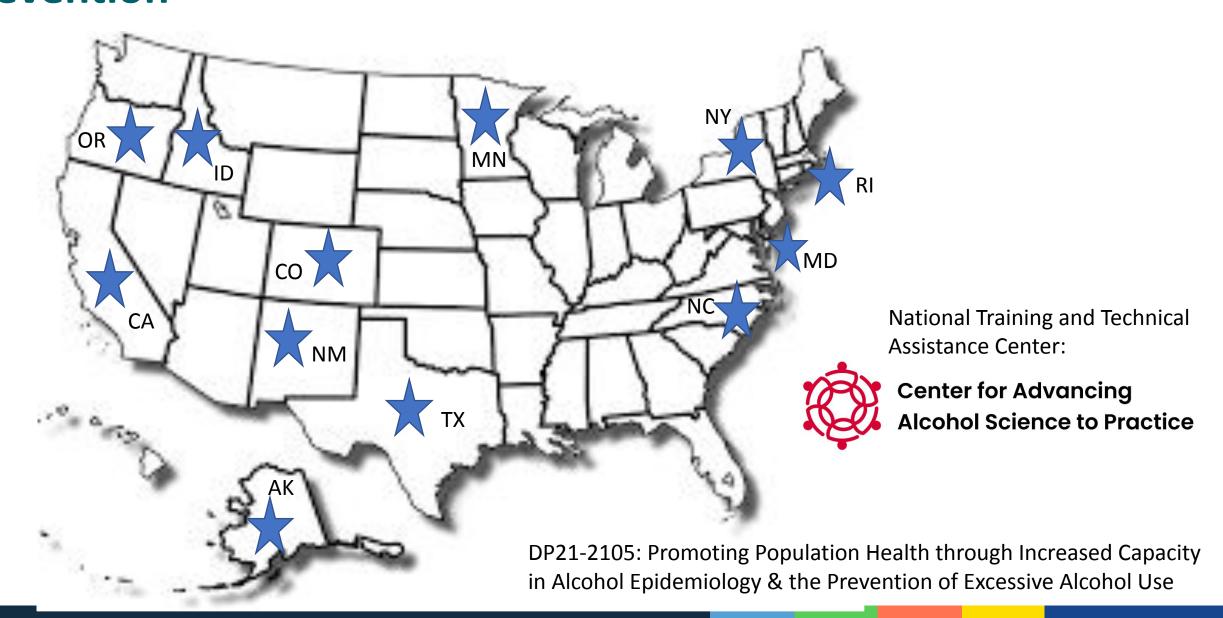


Center for Advancing Alcohol Science to Practice

alcoholsciencetopractice.org

www.cdc.gov/alcohol

CDC-funded State Capacity in Alcohol Epidemiology and Prevention



Conclusion

To support development and implementation of effective prevention strategies:

- Use high-quality data
 - Monitor patterns of excessive alcohol use and associations with other substance use
 - Routinely assess alcohol in toxicology testing (acute care settings, death investigations)
- Multi-sectoral collaborations
- Widespread use of proven and effective population-level alcohol policies, in addition to strategies focused on overdose prevention

There are more than 380 deaths each day in the U.S. due to excessive alcohol use.

cdc.gov/alcohol

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

