

National Alcohol Strategy Advisory Committee

**At long last...
Canada's Low-Risk Alcohol Drinking Guidelines are here!**

**Prepared for Alcohol Policy Network
January 24, 2012**

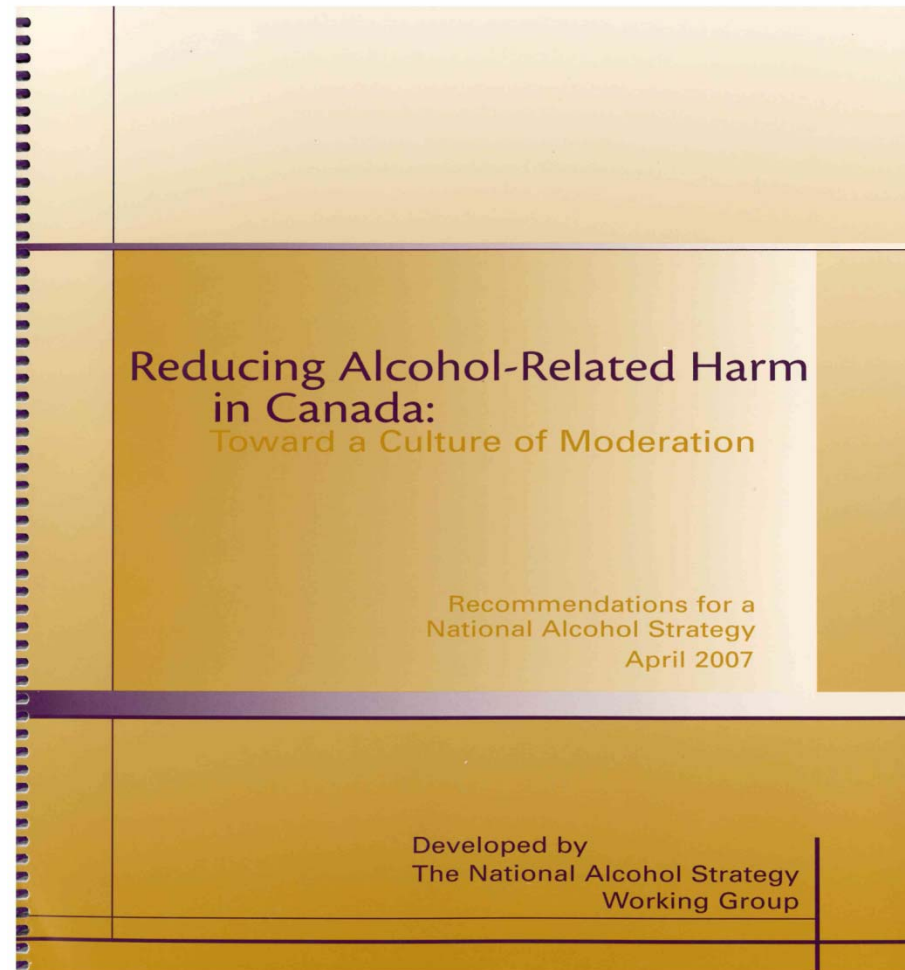
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**Canadian Centre on Substance Abuse
on behalf of
National Alcohol Strategy Advisory Committee**

In the beginning...



National Alcohol Strategy Advisory Committee

- ❖ Alberta Health and Wellness
- ❖ BC Ministry of Health
- ❖ Brewers Association of Canada
- ❖ Canadian Centre on Substance Abuse*
- ❖ Canadian Association of Chiefs of Police
- ❖ Canadian Association of Liquor Jurisdictions
- ❖ Canadian Distillers Association
- ❖ Canadian Vintners Association
- ❖ **Canadian Public Health Association**
- ❖ Centre for Addiction and Mental Health
- ❖ Centre for Addictions Research of BC
- ❖ College of Family Physicians of Canada
- ❖ **Council of Chief Medical Officers of Health**
- ❖ Dr. Louise Nadeau
- ❖ Éduc'alcool
- ❖ **F/P/T Liaison Committee on Problematic Substance Use***
- ❖ Health Canada
- ❖ Inuit Tapiriit Kanatami
- ❖ Mothers Against Drunk Driving*
- ❖ National Native Addictions Partnership Foundation
- ❖ Nova Scotia Ministry of Health & Wellness
- ❖ **Public Health Agency of Canada**
- ❖ The Student Life Education Company

* Co-Chairs

Previous Canadian drinking guidelines

Source	Limits for Men	Limits for Women
aLPHa, CAMH, OPHA (1997)	2 per day 14 per week	2 per day 9 per week
CARBC (2007)	4 on single day 20 per week	3 on single day 10 per week
CFPC (1994)	4 per day 12 per week	3 per day 12 per week
Educ'alcool (2007)	5 on single occasion 14 per week	4 on single occasion 9 per week
Canada's Low-Risk Alcohol Drinking Guidelines (2011)	3 per day 15 per week	2 per day 10 per week

Methodology

Expert Advisory Panel

❖ Expert Advisory Panel

- Chaired by Dr. Peter Butt (CFPC)
- Researchers from
 - each Canadian agency that previously issued LRDG
 - CCSA
 - No members from alcohol industry
- June 2009 – 1st meeting

❖ Terms of Reference

- to develop drinking guidelines to support a culture of moderation in Canada that will be based on domestic and international evidence along with relevant cultural practices

Methodology

Expert Panel

❖ **Develop guidelines to inform Canadians about how to reduce alcohol-related risks (to self & others)**

- Provide simple, concise summaries of the best available evidence - impact of various drinking levels on health & safety
- evaluate the extent of alcohol-related risk at different levels of consumption
- provide specific recommendations for low-risk drinking guidelines for the population in general

Methodology

Search, appraisal, expert review

- ❖ **Search conducted on multiple bibliographic databases for**
 - Systematic reviews and meta-analysis on impact of alcohol on disease and injury (17)
 - Emergency Department research examined for short-term or 'acute' risk of injury after drinking in 6-hour period
- ❖ **Critical appraisal of reviews & single studies**
- ❖ **Relative risk preferred to Absolute risk**
- ❖ **All-cause mortality studies used to find balance point between risks & benefits**
- ❖ **Peer review – external & NASAC**
- ❖ **Plain language version**

Methodology

Criteria for “low-risk” drinking

- ❖ The complexity of risk and presence of health benefits complicate the analysis of risk.
- ❖ The new national LRDGs identify daily limits based on the point where the overall net risk of premature death (mortality) is equal to that of lifetime abstainers.
- ❖ This is the point where potential health risks and health benefits exactly cancel each other out.

Results

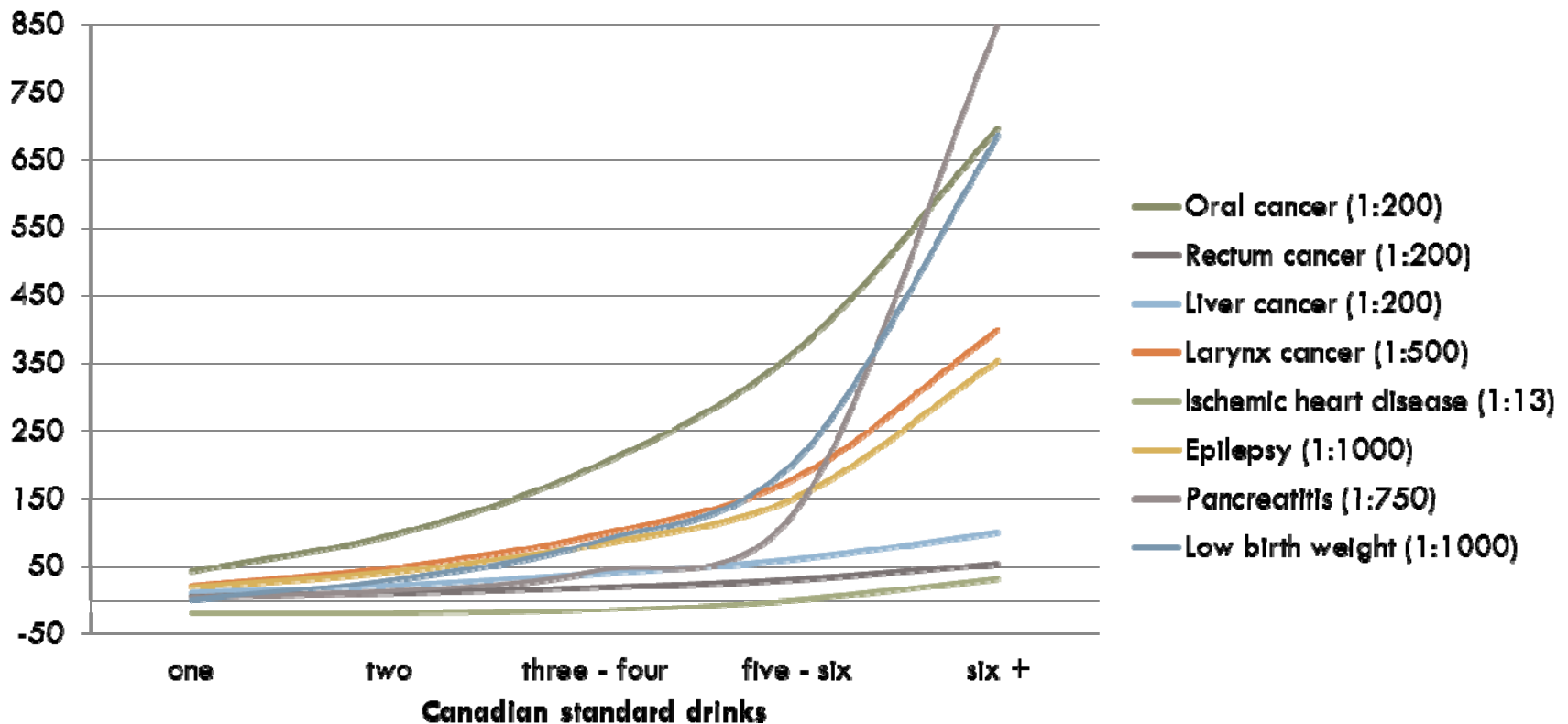
% Δ risk of premature death (males & females)

Disease	Abs.Risk	1 drink	2 drinks	3-4 drinks	5-6 drinks	7+ drinks
Tuberculosis	1 in 2,500	0	0	+194	+194	+194
Oral Cavity & Pharynx Cancer	1 in 200	+42	+96	+197	+368	+697
Oral Oesophagus Cancer	1 in 150	+20	+43	+87	+164	+367
Colon Cancer	1 in 40	+3	+5	+9	+15	+26
Rectum Cancer	1 in 200	+5	+10	+18	+30	+53
Liver Cancer	1 in 200	+10	+21	+38	+60	+99
Larynx Cancer	1 in 500	+21	+47	+95	+181	+399
Ischemic Heart Disease	1 in 13	-19	-19	-14	0	+31
Epilepsy	1 in 1,000	+19	+41	+81	+152	+353
Dysrhythmias	1 in 250	+8	+17	+32	+54	+102
Pancreatitis	1 in 750	+3	+12	+41	+133	+851
Low birth weight	1 in 1000	0	+29	+84	+207	+685

Rehm, Kehoe, Taylor, & Patra (2009). Evidence base for the development of Canadian Drinking Guidelines. Rehm et al. 2003; Rehm et al. 2006; Rehm et al. 2010

Results

Percentage change in long-term relative risk by average standard drinks per day, males and females less than 70 years of age



Di Castelnuovo, Costanzo, Bagnardi, Donati, Iacoviello, & de Gaetano (2006) Archives of Internal Medicine, 166, 2437-2445.

Results

% Δ risk of premature death (males) by alcohol intake

Type of Illness or Disease	Proportion of All Deaths, 2002–2005	Percentage Increase/Decrease in Risk				
		Zero or Decreased Risk		Increased Risk		
		0%	-1 to -24%	-25% to -50%		
		Up to +49%	+50 to 99%	+100 to 199%	Over +200%	
		1 Drink	2 Drinks	3–4 Drinks	5–6 Drinks	+ 6 Drinks
Hemorrhagic stroke (morbidity)	-	+11	+23	+44	+78	+156
Hemorrhagic stroke (mortality)	1 in 30	+10	+21	+39	+68	+133
Ischemic stroke (morbidity)	-	-13	0	0	+25	+63
Ischemic stroke (mortality)	1 in 80	-13	0	+8	+29	+70
Diabetes mellitus	1 in 30	-12	0	0	0	+72
Hypertension	1 in 150	+13	+28	+54	+97	+203
Liver cirrhosis (morbidity)*	-	0*	0*	+33	+109	+242
Liver cirrhosis (mortality)	1 in 90	+26	+59	+124	+254	+691

Rehm, Kehoe, Taylor, & Patra (2009). Evidence base for the development of Canadian Drinking Guidelines.

Rehm et al. 2003

Rehm et al. 2006

Rehm et al. 2010

Results

% Δ risk of premature death (females) by alcohol intake

Type of Illness or Disease	Proportion of All Deaths, 2002–2005*	Percentage Increase/Decrease in Risk				
		1 Drink	2 Drinks	3–4 Drinks	5–6 Drinks	+ 6 Drinks
Breast cancer	1 in 45	+13	+27	+52	+93	+193
Hemorrhagic stroke (morbidity)	-	-29	0	0	+78	+249
Hemorrhagic stroke (mortality)	1 in 20	+22	+49	+101	+199	+502
Ischemic stroke (morbidity)	-	-18	-13	0	+31	+121
Ischemic stroke (mortality)	1 in 65	-34	-25	0	+86	+497
Diabetes mellitus	1 in 30	-36	-40	0	+739	+1560
Hypertension	1 in 85	0	+48	+161	+417	+1414
Liver cirrhosis (morbidity)	-	+21	+70	+125	+182	+260
Liver cirrhosis (mortality)	1 in 160	+139	+242	+408	+666	+1251

Rehm, Kehoe, Taylor, & Patra (2009). Evidence base for the development of Canadian Drinking Guidelines.

Rehm et al. 2003

Rehm et al. 2006

Rehm et al. 2010

Limitations of Research Evidence

❖ **Methodological issues with primary studies that create uncertainty at both ends of limits**

- Under-reporting of alcohol consumption
- Failure to account for binge drinking
- Failure to account for risk-taking
- Poor definition of “abstainers”
- Failure to account for ‘moderate’ style & other exaggeration of benefits
- Lack of evidence on alcohol-related social issues

Ta da!

Canada's Low-Risk Alcohol Drinking Guidelines

Canada's Low-Risk Alcohol Drinking Guidelines

Drinking is a personal choice. If you choose to drink, these guidelines can help you decide when, where, why and how.

Guideline 1

Reduce your long-term health risks by drinking no more than:

- 10 drinks a week for women, with no more than 2 drinks a day most days
- 15 drinks a week for men, with no more than 3 drinks a day most days

Plan non-drinking days every week to avoid developing a habit.

Guideline 2

Reduce your risk of injury and harm by drinking no more than 3 drinks (for women) and 4 drinks (for men) on any single occasion.

Plan to drink in a safe environment. Stay within the weekly limits outlined in Guideline 1.

Guideline 3

Do not drink when you are:

- driving a vehicle or using machinery and tools
- taking medicine or other drugs that interact with alcohol
- doing any kind of dangerous physical activity
- living with mental or physical health problems
- living with alcohol dependence
- pregnant or planning to be pregnant
- responsible for the safety of others
- making important decisions

Guideline 4

If you are pregnant, planning to become pregnant, or before breastfeeding, the safest choice is to drink no alcohol at all.

Guideline 5

If you are a child or youth, you should delay drinking until your late teens. Talk with your parents about drinking. Alcohol can harm the way your brain and body develop.

If you are drinking, plan ahead, follow local alcohol laws and stay within the limits outlined in Guideline 1.

Reference: Butt, P., Beirness, D., Cesa, F., Gliksman, L., Paradis, C., & Stockwell, T. (2011). *Alcohol and health in Canada: A summary of evidence and guidelines for low-risk drinking*. Ottawa, ON: Canadian Centre on Substance Abuse.

Have feedback? Email: info@ccsa.ca

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Developed by the National Alcohol Strategy Advisory Committee.

For these guidelines, "a drink" means:

- 341 ml (12 oz.) bottle of 5% alcohol beer, cider or cooler
- 142 ml (5 oz.) glass of 12% alcohol wine
- 43 ml (1.5 oz.) serving of 40% distilled

Low-risk drinking helps to promote a culture of moderation.

Low-risk drinking supports healthy lifestyles.

Tips

- Set limits for yourself and abide by them.
- Drink slowly. Have no more than 2 drinks in any 3 hours.
- For every drink of alcohol, have one non-alcoholic drink.
- Eat before and while you are drinking.
- Always consider your age, body weight and health problems that might suggest lower limits.
- While drinking may provide health benefits for certain groups of people, do not start to drink, or increase your drinking, for health benefits.

Guideline 1

Reducing long-term risks

❖ Reduce your long-term health risks by drinking **no more than:**

- Women
 - **10** drinks a week
 - **2** drinks a day most days
- Men
 - **15** drinks a week
 - **3** drinks a day most days
- Plan non-drinking days every week to avoid developing a habit.

These are limits NOT targets!!

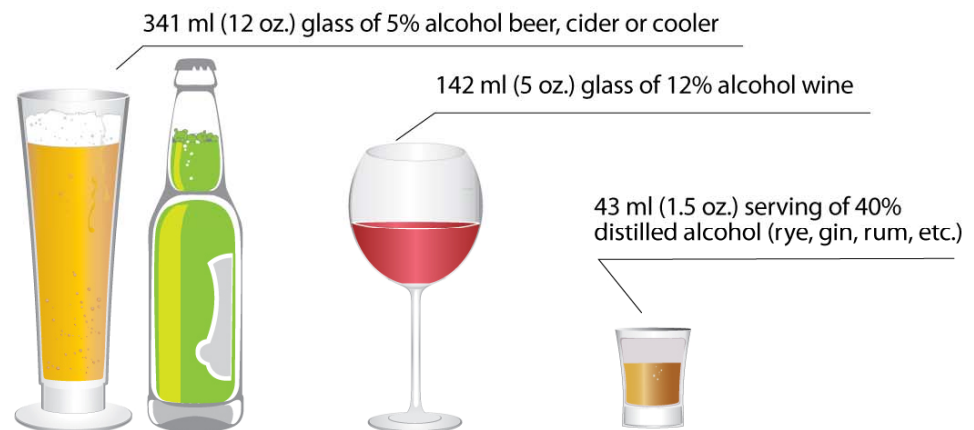
If you're not drinking this much now, don't increase.

Health benefits are maximized at 1 drink/day or less.

Reduce intake if you have reduced tolerance (e.g., due to age, health, weight).

A drink is...

For these guidelines, **“a drink”** means:



Guideline 2

Reducing short-term risks

❖ **Reduce your risk of injury and harm by drinking, on any single occasion, no more than**

- Women - **3** drinks
- Men – **4** drinks

❖ **Plan to drink in a safe environment. Stay within the weekly limits outlined in Guideline 1.**

These are limits NOT targets!!

If you're not drinking this much now, don't increase.

Drink with food, 2 drinks max in 3 hours, alternate with non-alcoholic drinks, avoid risky situations/activities.

Guideline 3

When zero's the limit

❖ Do not drink when you are

- driving a vehicle or using machinery and tools
- taking medicine or other drugs that interact with alcohol
- doing any kind of dangerous physical activity
- living with mental or physical health problems
- living with alcohol dependence
- pregnant or planning to be pregnant
- responsible for the safety of others
- making important decisions

Guideline 4

Pregnancy and breastfeeding

❖ Pregnant? Zero is safest

- If you are pregnant, planning to become pregnant, or before breastfeeding, the **safest choice is to drink no alcohol at all.**

Guideline 5

Don't start young

- ❖ If you are a child or youth, you should delay drinking until your late teens. Talk with your parents about drinking. Alcohol can harm the way your brain and body develop.
- ❖ If you are drinking, plan ahead, follow local alcohol laws and stay within the limits outlined in Guideline 1.

**Many youth choose not to drink.
Delay starting to drink as long as possible.**

Limits up to age 24

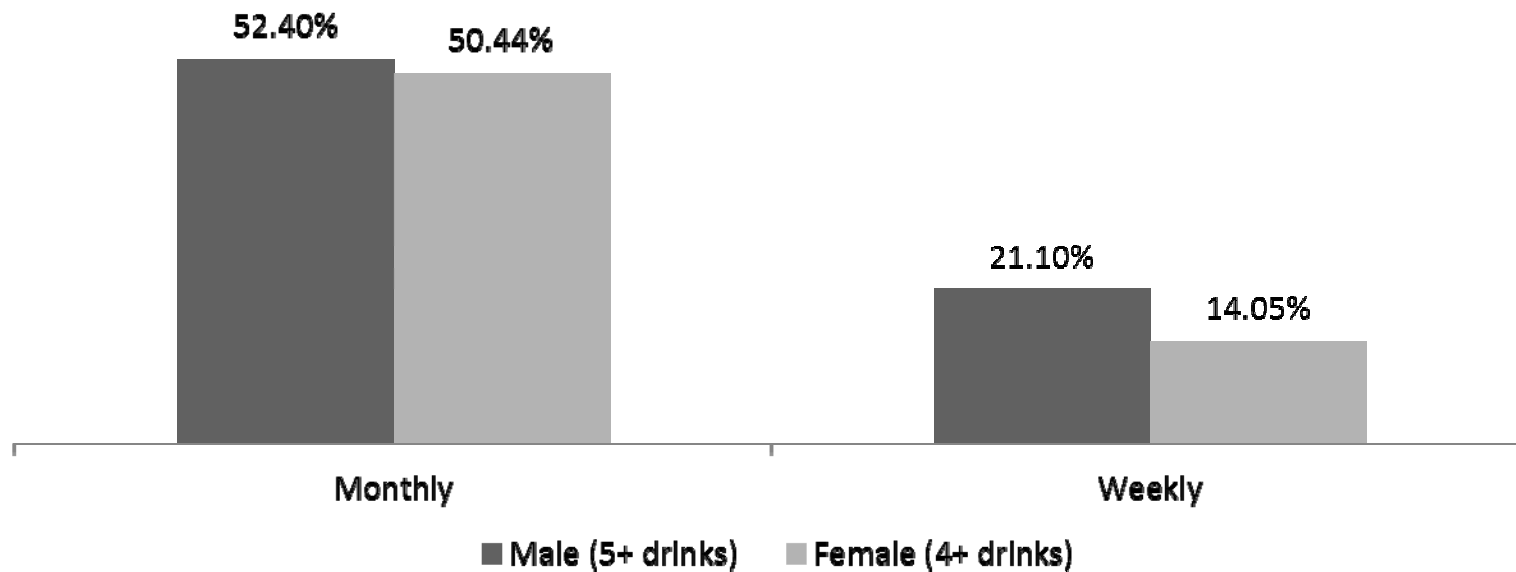
WOMEN - 2 drinks/day

MEN - 3 drinks/day

Keep within weekly limits

Guideline 5

Proportion of general population ages 18/19-24 reporting monthly or more and weekly or more risky drinking, Canada, 2009/10



Statistics Canada, Canadian Community Health Survey, 2009/10.

Limits up to age 24

WOMEN - 2 drinks/day

MEN - 3 drinks/day

Keep within weekly limits

Safer drinking tips

- ❖ Set limits for yourself - abide by them
- ❖ Drink slowly - no more than 2 drinks in any 3 hours.
- ❖ For every drink of alcohol, have one non-alcoholic drink.
- ❖ Eat before & while you are drinking.
- ❖ Always consider your age, body weight & health problems that might suggest lower limits.
- ❖ Do not start to drink, or increase your drinking, for health benefits.

Comparison of national & previous ON guidelines

Guideline		Canada's LRDGs (2011)		ON LRDGs (1997)	
		Women	Men	Women	Men
1 – long-term risks	Daily (most days)	2	3	1-2	1-2
	Weekly	10	15	9	14
2 – short-term risks	Special occasion	3	4		
Drink size	No change				

Comparison of national & previous ON guidelines

Guideline	Canada's LRDGs (2011)	ON LRDGs (1997)
3 – do not drink if you are	Driving a vehicle or using machinery and tools	Will be operating vehicles such as cars, trucks, motorcycles, boats, snowmobiles, all-terrain vehicles, or bicycles Need to be alert; for example, if you will be operating machinery or working with farm implements or dangerous equipment
	Taking medicine or other drugs that interact with alcohol	Are taking medications, such as sedatives, painkillers, or sleeping pills
	Doing any kind of dangerous physical activity	Will be doing sports or other physical activities where you need to be in control
	Living with mental or physical health problems	Have health problems, such as liver disease or mental illness have a family history of cancer or other risk factors for cancer Are told not to drink for legal, medical, or other reasons
	Living with alcohol dependence	Have a personal or family history of drinking problems
	Pregnant or planning to be pregnant	Are pregnant, trying to get pregnant, or breastfeeding
	Responsible for the safety of others	Are responsible for the safety of others at work or at home
	Making important decisions	Are told not to drink for legal, medical, or other reasons

Comparison of national & previous ON guidelines

Guideline	Canada's LRDGs (2011)	ON LRDGs (1997)
4	If you are pregnant, planning to become pregnant or before breastfeeding, the safest choice is to drink no alcohol at all.	
5	If you are a child or youth, you should delay drinking until your late teen. Talk with your parents about drinking. Alcohol can harm the way your brain and body develop.	
	If you are drinking, plan ahead, follow local alcohol laws and stay within the limits outlined in Guideline #1	
Tips	Set limits for yourself and abide by them.	If you do drink, avoid getting drunk or intoxicated.
	Drink slowly. Have no more than 2 drinks in any 3 hours.	Wait at least one hour between drinks.
	For every drink of alcohol, have one non-alcoholic drink.	Drink non-alcoholic beverages, such as water, soft drinks, or fruit juice
	Eat before and while you are drinking.	Have something to eat.
	Always consider your age, body weight, and health problems that might suggest lower limits	
	While drinking may provide health benefits for certain groups of people, do not start to drink, or increase your drinking, for health benefits.	If you don't already drink, don't start for "health reasons".

Official Supporters

- ❖ Association of Canadian Distillers
- ❖ Brewers Association of Canada
- ❖ Canadian Association of Chiefs of Police
- ❖ Canadian Centre on Substance Abuse
- ❖ Canadian Medical Association
- ❖ Canadian Paediatric Society
- ❖ Canadian Public Health Association
- ❖ Canadian Vintners Association
- ❖ Centre for Addiction Research of British Columbia
- ❖ Centre for Addiction and Mental Health
- ❖ College of Family Physicians of Canada
- ❖ Council of Chief Medical Officers of Health
- ❖ Educ'alcool
- ❖ MADD Canada
- ❖ Nova Scotia Department of Health and Wellness
- ❖ Society of Obstetricians and Gynaecologists of Canada

Common questions

- ❖ Why are the drinking limits different for men and women?
- ❖ The scientific report states that the guidelines apply to adults from 25-65. Are there different guidelines for seniors and young adults?
- ❖ Why are cancer prevention guidelines related to alcohol different from these guidelines?
- ❖ What impact, if any, did industry involvement have on guideline development?
- ❖ Why do these guidelines suggest higher limits than the previous Ontario ones?

If everyone followed the guidelines...

- ❖ Alcohol consumption would ↓ by at least 50%
- ❖ Alcohol-related deaths would ↓ by at least 4,600 per year

Promoting the guidelines

- ❖ **Launched Nov 25, 2011**
- ❖ **Supported by Ministers of Health & national/regional orgs**
- ❖ **Website updates**
- ❖ **Knowledge Exchange Working Group (KEWG) developing**
 - Brochure
 - FAQs
 - Physician- & other health care provider-focused set of guidelines
 - Risk communication resource
- ❖ **Screening, Brief Intervention, & Referral (SBIR)**
- ❖ **Evaluation**

Evaluation

- ❖ **Monthly status reports**
- ❖ **Endorsements/Official Support**
- ❖ **Requests to reproduce, adapt, translate**
- ❖ **Media**
- ❖ **Social Media**
- ❖ **Google analytics**
- ❖ **Survey**
 - Post-launch
 - 1-year
- ❖ **KEWG planning Phase 2**
- ❖ **CADUMS & CCHS** – not including LRDG questions

Your KE activities/plans

- ❖ Who is planning activities/resource development?
- ❖ What resources could CCSA provide to assist in promoting the LRDGs?
- ❖ Who has already taken action?
- ❖ What resources can you share?
- ❖ Who is evaluating their efforts?

References

- ❖ Butt, P., Beirness, D., Cesa, F., Gliksman, L., Paradis, C., & Stockwell, T. (2011). [*Alcohol and health in Canada: A summary of evidence and guidelines for low-risk drinking*](#). Ottawa, ON: Canadian Centre on Substance Abuse.

Your questions?

