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ALCOHOL & CANCER RISK: TIME FOR ACTION?

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Webinar key messages
summarised for you.

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ALCOHOL & CANCER: ASSESSING THE EVIDENCE



Analysing research on cancer prevention and survival

The World Cancer Research Fund's (WCRF) Continuous Update Project (CUP) is an ongoing programme to analyse cancer prevention and survival research related to diet, nutrition and physical activity from all over the world.

RESEARCH ON DIET, NUTRITION, PHYSICAL ACTIVITY, AND CANCER IS CONDUCTED ACROSS THE GLOBE.



HOW DOES IT WORK?

RESEARCH IS SYSTEMATICALLY COLLATED AND ANALYSED BY THE CUP TEAM AT IMPERIAL COLLEGE LONDON

DATA IS REVIEWED AND JUDGED BY AN INDEPENDENT EXPERT PANEL USING GRADING CRITERIA TO FORM CONCLUSIONS AND EVIDENCE PRESENTED IN A WCRF REPORT



GRADING CRITERIA:

STRONG, CONVINCING:

Evidence is strong enough to support a judgement of a convincing or probable causal (or protective) relationship and justify making public health recommendations. The evidence is unlikely to be modified in the foreseeable future as new evidence accumulates.

STRONG, PROBABLE:

Evidence strong enough to support a judgement of a probable causal (or protective) relationship, which generally justifies recommendations designed to reduce the risk of cancer.

LIMITED SUGGESTIVE:

Evidence that is too limited to permit a probable or convincing causal judgement but is suggestive of a direction of effect.





WHAT DOES THE EVIDENCE SAY?



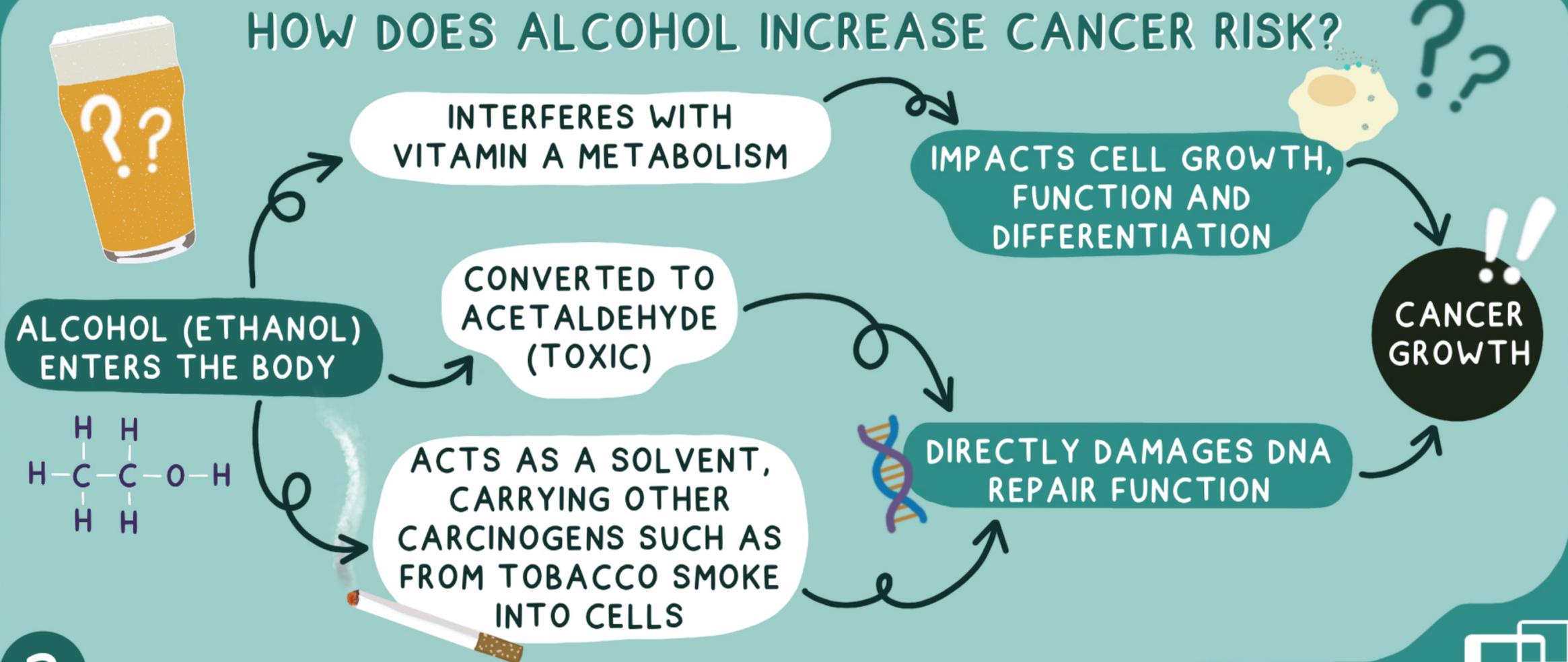
ALCOHOLIC DRINKS & CANCER RISK

WCRF GRADING		DECREASES RISK	INCREASES RISK
STRONG	CONVINCING		MOUTH, PHARYNX & LARYNX OESOPHAGUS LIVER COLORECTUM BREAST (POSTMENOPAUSE)
	PROBABLE	KIDNEY	STOMACH BREAST (PREMENOPAUSE)
LIMITED	SUGGESTIVE		LUNG PANCREAS SKIN

There is **STRONG, PROBABLE** evidence that alcoholic drinks **DECREASE THE RISK** of kidney cancer.

But the benefit is **FAR OUTWEIGHED** by strong evidence concluding that alcohol **INCREASES THE RISK** of six other cancers.

HOW DOES ALCOHOL INCREASE CANCER RISK?



WORLD CANCER RESEARCH FUND RECOMMENDATIONS



WCRF RECOMMEND LIMITING ALCOHOL CONSUMPTION, BUT FOR CANCER PREVENTION IT IS BEST NOT TO DRINK ALCOHOL AT ALL.

IF PEOPLE DO CHOOSE TO DRINK?

Follow the national guidelines. In the UK, the Chief Medical Officer has issued a guideline of no more than **14 UNITS** per week, ideally spread over 3 or more days.

WHAT DOES THIS LOOK LIKE?

AROUND 6
PINTS OF BEER



6 MEDIUM SIZED
GLASSES OF
AVERAGE
STRENGTH WINE



HOW DO YOU CALCULATE UNITS IN A DRINK?

STRENGTH (ABV) X VOLUME (ML)

$$\frac{\quad}{1000} = \text{UNITS}$$



10 TIPS TO REDUCE ALCOHOL CONSUMPTION

- 1 OPT FOR SMALLEST SERVING SIZE
- 2 DRINK WATER FIRST
- 3 DRINK SLOWLY
- 4 DON'T STOCK UP ON ALCOHOL
- 5 PLAN AHEAD AND KEEP TRACK
- 6 BUY LOW ALCOHOL/ALCOHOL FREE ALTERNATIVES
- 7 BE AWARE OF THE STRENGTH OF DRINK
- 8 DILUTE ALCOHOLIC DRINKS WITH NON-ALCOHOLIC MIXER
- 9 DRINK NON-ALCOHOLIC DRINKS IN BETWEEN ALCOHOLIC DRINKS
- 10 AVOID SALTY SNACKS – THESE CAN MAKE US DRINK MORE!

WIDER IMPACTS OF ALCOHOL IN THE UK



A BIG PROBLEM IN ENGLAND

Alcohol is the leading risk factor for death, ill health and disability amongst 15-49 year olds in England. It causes more than 70 deaths every day in the UK.

Alcohol is responsible for around 1.3 MILLION hospital admissions a year and almost 1000 ambulance callouts every day in England.

£ ALL ESTIMATED TO COST NHS ENGLAND £3.4 BILLION ANNUALLY.

WHY IS IT SUCH A PROBLEM IN ENGLAND?

We see alcohol advertised everywhere and it impacts all of us, but it especially impacts children and young people.



4 IN 5 young people have seen alcohol advertising in the past month and ONE FIFTH have participated in alcohol marketing campaigns.

Exposure to alcohol marketing encourages children to start drinking at an earlier age and more than they otherwise would.



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ALCOHOL DEPENDENCY

1.6 MILLION adults in England have some degree of alcohol dependency and around 200,000 children live with an alcohol dependent parent.



Just 1 IN 5 dependent adults are predicted to be in treatment.

There are many more that will be at risk of alcohol harm without dependency on alcohol.

THE IMPACTS OF ALCOHOL GO BEYOND HEALTH

£27BILLION COST TO THE ECONOMY

Alcohol causes more working years of life lost than the 10 most common cancers combined.



HEALTH INEQUALITIES

The most deprived groups are 60% more likely to die from alcohol. Alcohol specific mortality is 45% higher in the North East than the English average.

CRIME & POLICE TIME

39-46% of crime and 53% of police time is attributed to alcohol related issues and disturbances.



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POLICIES TO REDUCE ALCOHOL HARM

English drinkers can consume a week's worth of alcohol for the price of a high street cup of coffee.

The cheaper alcohol is, the more we drink, and the more harm is caused. The World Health Organization recommends policies across three key areas to reduce alcohol harm; affordability, marketing, availability.

INCREASE THE COST OF ALCOHOL

The alcohol duty system has allowed high strength cider to be sold at a very low price.

The UK Government recently announced a **NEW** alcohol duty system based on strength, but tax remains low and high strength cider is still set to be taxed at a lower rate than beer, wine and spirits of the same strength.

Scotland and Wales have introduced **MINIMUM UNIT PRICING**, meaning all alcohol sold is priced at least 50p per unit of alcohol.

EARLY SUCCESSES OF THE POLICY:

REDUCTION IN ALCOHOL SALES

REDUCTION IN CONSUMPTION OF CHEAP, HIGH STRENGTH DRINKS

SIGNS OF A REDUCTION IN ALCOHOL RELATED DEATHS AND HOSPITAL ADMISSIONS

INTRODUCING IT IN ENGLAND COULD:

Save **525** lives, prevent **22,000+** hospital admissions and **36,000** crimes **EVERY YEAR**

RESTRICT ALCOHOL MARKETING

Marketing for alcoholic drinks is everywhere and restrictions on promotion are limited.

ACTION IS NEEDED BECAUSE PUBLIC AWARENESS OF THE RISKS OF ALCOHOL IS LOW:

Only **1 IN 5** people are aware of the alcohol guidelines.

LESS THAN 25% of people know that alcohol can cause breast cancer.

Only **1 IN 5** know calories in a glass of wine or a pint.

THIS IS BECAUSE THERE IS NO INFORMATION ON ALCOHOL LABELS!

LESS THAN 30% of labels include the drinking guidelines.

Consumers deserve to have more transparency in alcohol labelling to be able to make informed choices, like they have with food products.

Alcohol Health Alliance are launching a **NEW** report on Alcohol Marketing on 30th November 2021



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