

The Extra Mile

Advocating for evidence-based policies and practices
to prevent and reduce alcohol-related harms

GOING THE DISTANCE: Alcohol industry-funded "healthy drinking" study discontinued

Multiple conflicts of interest doomed the study

A highly controversial, alcohol industry backed study has been [discontinued by the National Institutes of Health \(NIH\)](#).

The so-called *Moderate Alcohol and Cardiovascular Health (MACH15)* study - "a worldwide clinical study ... designed to determine whether drinking one alcoholic beverage per day will decrease the chance of developing heart disease" - was [being mostly funded by large, transnational alcohol corporations](#), including Anheuser-Busch InBev, Heineken, Diageo, Pernod Ricard and Carlsberg.

The study was [intensely criticized by a wide range of researchers, public health advocates, and good government groups](#) for conflicts of interest and poor study design - even before the extent of alcohol industry involvement in the study's design was revealed.

Freedom of information requests and other digging uncovered that the [principal investigator and NIH/NIAAA staff had actively solicited alcohol industry funding for the study](#). Other alcohol industry connections were woven throughout the study development process.

In fact, in a telling anecdote - the *New York Times* reported that the study was originally to have been entitled "['Cheers' - short for 'Cardiovascular Health Effects of Ethanol Research Study.'](#)"

Unfortunately, it is highly unlikely that another study of this kind will ever be funded because of the enormous cost involved. That amount of funding would require private, alcohol industry contributions - thereby undermining the credibility of the study, as we saw in this case.

Research that so-called "moderate" drinking is beneficial for health is a lot weaker than many Americans realize. Many studies which have found positive health effects like longer life-span and lower rates of heart disease for light-to-moderate alcohol use are [poorly designed and don't fully take into account other factors](#). In addition, the risk of some cancers increases with just one drink a day. For female breast cancer, a research review by the American Institute for Cancer Research found [increased risk with less than one standard drink a day](#). That risk points to another serious flaw with the MACH15 study: alcohol-related cancers can take several years - even decades - of exposure to alcohol to develop, yet this study

planned to examine only about six years of alcohol use.

What's more, the American Heart Association (and other expert medical and health groups) ["cautions people NOT to start drinking ... if they do not already drink alcohol"](#) because of the risk of alcohol-related harms.

The scrapping of this highly-flawed study is a victory - not only for evidence-based alcohol policy and public health, but also for U.S. democracy and good government.



MILES TO GO: The Under-Emphasized Role of Alcohol in Suicide

Shining light on a difficult topic

The issue of suicide has been getting a lot of attention in the news media recently, because of high-profile deaths of celebrities. Some of the public discussion in the wake of these losses has been constructive, encouraging Americans to take the issue seriously and be aware of the warning signs. On the other hand, highly publicized suicides can have a [contagion effect](#), increasing the risk for more suicide attempts.

One risk factor has been under-reported relative to its importance: excessive alcohol consumption. Nationally, alcohol use has been found to be a factor in about one-third of all completed suicides and 40% of suicide attempts. Alcohol use - especially use to intoxication - can act as an ["acute trigger"](#) (i.e., following a binge episode, regardless of any underlying alcohol use disorder) for suicide attempts. The [presence of an alcohol problem has also been found to be a precipitating factor](#) for suicide. For example, [one study](#) found that individuals with an alcohol use disorder were nearly 10 times more likely to die from suicide, even when taking into account the presence of other psychiatric disorders.

In a [recently-published letter to the Omaha World Herald](#), Project Extra Mile Executive Director Chris Wagner addresses the alcohol-suicide link by pointing out the value of implementing evidence-based alcohol policies - including raising the price of alcohol (through higher taxes) and restricting alcohol availability and advertising - to prevent and reduce alcohol-related suicides. Indeed, [the CDC's suicide prevention experts identified these policies as having promise](#) to limit this tragic problem.

Community-based policies to reduce excessive alcohol use. Research studies in the United States have found that greater alcohol availability is positively associated with alcohol-involved suicides.¹⁰³⁻¹⁰⁵ Policies to reduce excessive alcohol use broadly include zoning to limit the location and density of alcohol outlets, taxes on alcohol, and bans on the sale of alcohol for individuals under the legal drinking age.¹⁰⁵ These policies are important because acute alcohol use has been found to be associated with more than one-third of suicides and approximately 40% of suicide attempts.¹⁰⁶



A view from outside the Nebraska Legislature from the CDC's *Preventing Suicide: A Technical Package of Policy, Programs, and Practices*, p. 24

Another evidence-based strategy which can address the intersections among excessive alcohol use, other drug use, depression, and suicidal behavior is Screening, Brief Intervention, and Referral to Treatment (SBIRT). [SBIRT is an evidence-based practice](#) used to identify, reduce, and prevent problematic use of, and dependence on, alcohol and illicit drugs.

Project Extra Mile is currently building community support for evidence-based, behavioral health screenings. By conducting these screenings system-wide to identify problems and intervene early on, health systems can help prevent further individual and community harms, including suicides.

To offer your organization's support, or for more information about this screening initiative, please contact Lex Ann Roach at lexann@projectextramile.org or **(402) 898-7373**.

If you are in crisis, please call the National Suicide Prevention Lifeline at **1-800-273-TALK (8255)** or contact the Crisis Text Line by texting **TALK** to **741741**.

(Mostly) Good News on Underage Drinking in Nebraska

Nebraska underage binge drinking rates are lower than the national average

While our state continues to struggle with [high rates of adult binge drinking and driving after drinking](#), recently released national survey data offer good news with regard to underage drinking. According to [Youth Risk Behavior Surveillance System \(YRBSS\) data](#), our rates of underage alcohol use and binge drinking are lower than the national average.

Alcohol use by Youth in Nebraska

	1991	2005	2011	2015	2017
NE	53%	43%	27%	23%	24%
US	51%	43%	39%	33%	30%

Source: 2011, 2014/2015 & 2016/2017 Nebraska Youth Risk Behavioral Surveys (NYRBS); 2017 CDC YRBS

Binge Drinking by Youth in Nebraska

	1991	2005	2011	2015	2017
NE	37%	30%	16%	14%	11%
US	31%	26%	22%	18%	14%

Source: 2014/2015 & 2016/2017 Nebraska Youth Risk Behavioral Survey (NYRBS); 2017 CDC YRBS

As the chart above shows, not only are the rates lower, but they have decreased more than the U.S. as a whole since 1991. Nebraska also fares better than the nation-at-large for: **Ever drank alcohol** (NE: 54.0%; U.S.: 60.4%); and **Reported 10 or more as the largest number of drinks they had in a row** (NE: 2.7%; U.S.: 4.4%).

However, there remain areas of concern. While underage binge use has continued to decline, overall underage drinking has stalled following the dramatic declines of 1991-2011.

There was one area where Nebraska (22.1%) fared worse than the U.S. (16.5%): **Rode with a driver who had been drinking alcohol.**

Why the reduction in underage drinking over the past two decades, both in Nebraska and the U.S.? Researchers don't have exact answers, but the long-term effects of robust alcohol policies - including the [21 minimum legal drinking age \(MLDA\)](#) and the [0.08 BAC driving limit](#) - almost certainly have contributed to the trend.

Research findings would also suggest that the [sustained and well-publicized underage drinking compliance checks](#) in our state have contributed to our relative success. Thank you to our law enforcement officers and community partners for their vital role in this work!

It is now up to our policymakers, public health practitioners, and community partners to keep advocating for positive policy change until the harms associated with underage drinking are a thing of the past.

The same policies that prevent and reduce underage drinking also reduce other excessive alcohol consumption behaviors - like binge drinking and alcohol-impaired driving. The problems are deeply intertwined, and require coordinated efforts.



NEWS BRIEFS



Alcohol taxes: One part of the answer

Several Nebraska state Senators, including [Sen. Tom Brewer](#), have been clear about our state's property tax crisis, including the need to dispense with ideology and opt for clear-headed compromise.

Increasing our state's historically low alcohol taxes is just the kind of pragmatic policy that can be one important part of the solution.



In fact, raising alcohol taxes has been deemed [a public policy "trifecta"](#) because it can:

- Reduce the consequences of excessive drinking (including suicide and alcohol-related cancers, as noted in other places in this newsletter)
- Slow the demand for expensive health care services (including chronic disease care - which absorbs the lion's share of the Nebraska health care budget)
- Raise revenues for state governments (in a straightforward, relatively predictable manner)

The primary purpose of increasing alcohol taxes, of course, is for the public health and safety benefits, as well as balancing the costs that Nebraska taxpayers (most of whom do not drink excessively) foot for excessive drinkers.

Project Extra Mile has put together a fact sheet - available [here](#) - which provides useful data and statistics about the benefits of this policy.

The bottom line? An alcohol excise tax increase (depending on its size) could bring in an additional **\$45 to \$225 million** in revenue for our state, in addition to saving many lives.



LAW ENFORCEMENT TRAINING

SAVE THE DATE

Registration is available online at www.projectextramile.org or by calling 402-963-9047



Join Project Extra Mile, in conjunction with the Nebraska Highway Safety Office, for a training on **Source Investigations** as they pertain to underage drinking enforcement. Trainings will be held as follows:

<u>Eastern Nebraska</u>	<u>Central/Western Nebraska</u>
<p>Tuesday, September 18, 2018 National Safety Council, Nebraska 11620 M Circle, Room 101 Omaha, NE 68137</p> <p style="text-align: center;"><i>Training 9:00am - Noon</i></p>	<p>Wednesday, September 19, 2018 Broken Bow Public Library 626 S D Street Broken Bow, NE 68822</p> <p style="text-align: center;"><i>Training 1:00pm - 4:00pm</i> <i>Hosted by the Broken Bow Police Dept.</i></p>

PEM at the 2018 Nebraska Cancer Summit

Project Extra Mile staff attended the 2018 Nebraska Cancer Summit on May 30th at the Nebraska Innovation Campus in Lincoln, where they spread the word that alcohol use is one of the leading preventable causes of cancer. Cancers for which alcohol is a recognized risk factor include those of the head and neck, female breast, stomach, liver, and colorectum. Additionally, there is limited but accumulating evidence that alcohol use may contribute to cancers of the pancreas, skin, and lung.

Fortunately, there has been increased attention from the cancer advocacy community, not only on alcohol use as a cancer risk factor, but on the value of evidence-based alcohol policies to reduce alcohol-related cancers.



This is reflected in the recent AICR/WCRF report [*Diet, Nutrition, Physical Activity and Cancer: A Global Perspective: The Third Expert Report*](#), which recommends several public policies - such as increasing alcohol taxes - as effective cancer prevention and reduction strategies. The American Society of Clinical Oncology (ASCO) also included an [educational session](#) on the topic at its 2018 Annual Meeting in May, following the November 2017 release of its groundbreaking report [*Alcohol and Cancer: A Statement of the American Society of Clinical Oncology*](#).

The truth regarding alcohol's link to cancer is unquestionable. As with tobacco in previous decades, this knowledge can lead to increased public support for stronger alcohol policies, which are already gaining favor in our state. For example, 43% of

Nebraskans supported an alcohol tax increase in 2014 whereas 52% supported the increase in 2017.



Omaha Metro Coalition Meeting

OUR
MEETING
NEXT

Wednesday
August 8, 2018
9:00 a.m.

For more information:
(402) 963-9047
www.projectextramile.org
info@projectextramile.org



Project Extra Mile, 11620 M Circle, Omaha, NE, 68137 · 402.963.9047