

The logo for RARHA (Reducing Alcohol Related Harm) features a stylized white arch above the text 'RARHA' in a bold, sans-serif font. Below this, the full name 'REDUCING ALCOHOL RELATED HARM' is written in a smaller, all-caps font.

**RARHA**  
REDUCING ALCOHOL RELATED HARM



# Policy Dialogue

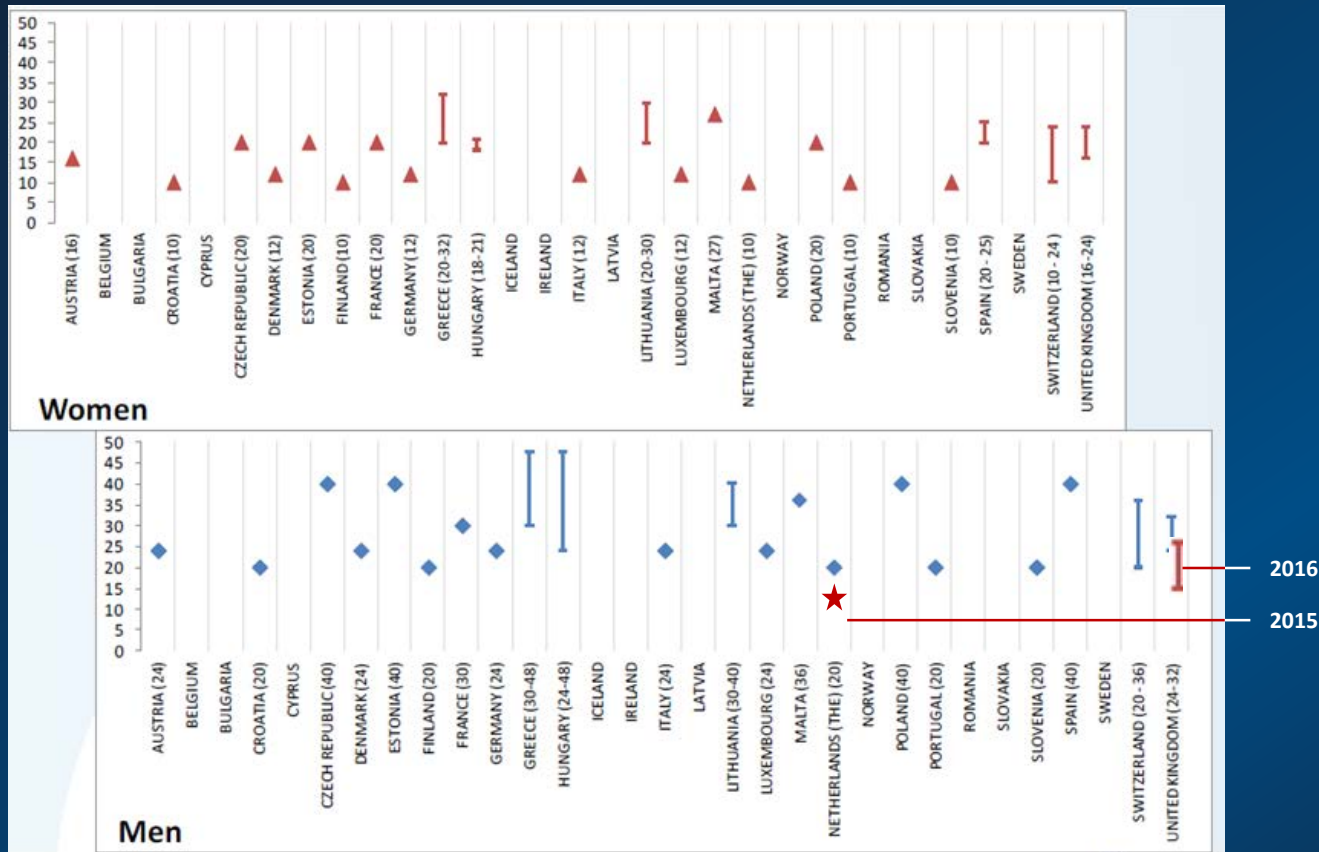
6<sup>th</sup> September 2016 - Brussels

Marjatta Montonen

Pointers towards an evidence-based approach to inform consumers about the risks of alcohol

Insights and outputs from Joint Action RARHA, an ambitious three-year project

# Low risk drinking guidelines in RARHA partner countries



Average daily alcohol intake (grams of pure alcohol) defined as "low risk" for women and men in RARHA partner countries (ISS 2014)

# Work Package focused on drinking guidelines

- ✓ National Institute for Health and Welfare /FI with Istituto Superiore di Sanità /IT
- ✓ Nearly 50 partners from 26 expert organizations based in 20 countries

Surveys to update state of play and background papers to summarize science underpinnings regarding

- low risk drinking guidelines
- brief intervention practices
- standard drink units
- guidance for young people

Seeking broader views by means of Delphi surveys with

- public health and addiction experts
- experts on young people

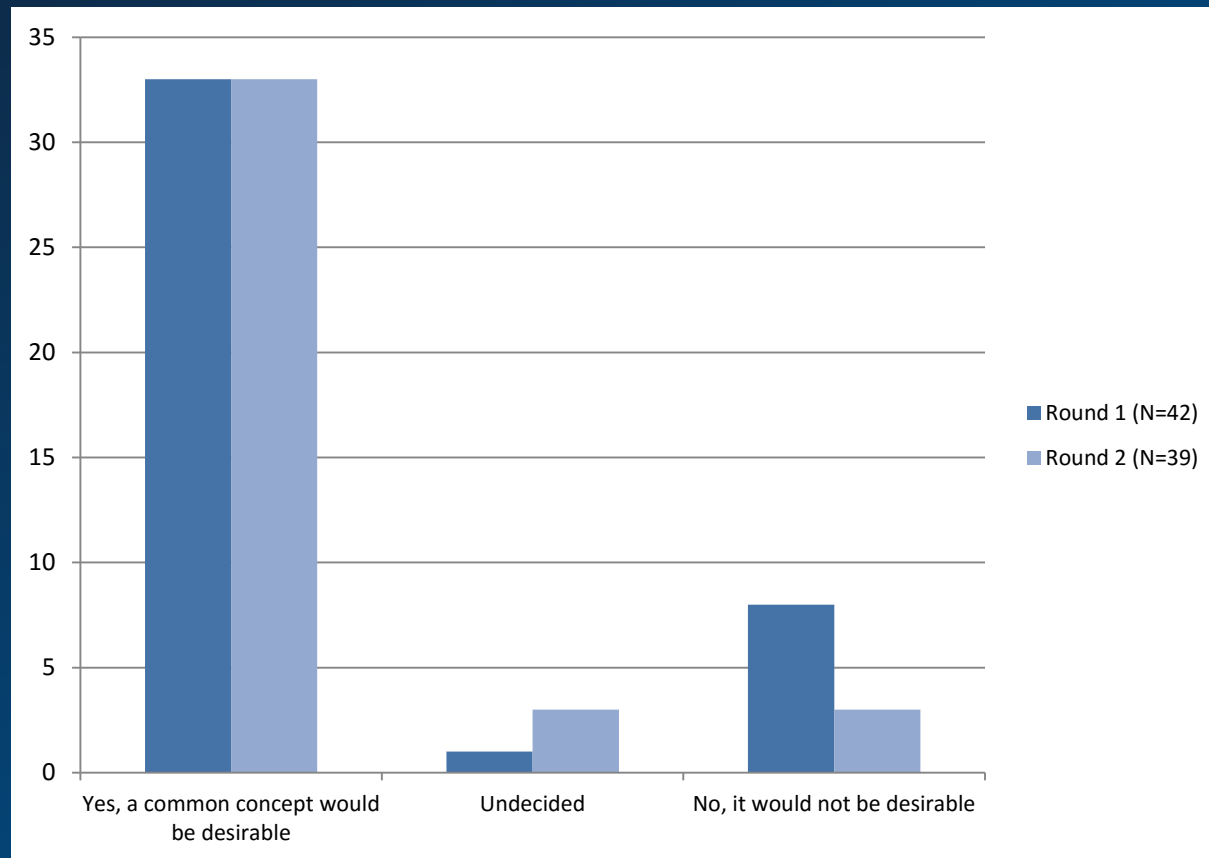
Online survey of consumer views

Expert meetings

- Rome & Brussels 2014
- Helsinki 2016
- CNAPA 2014-2016

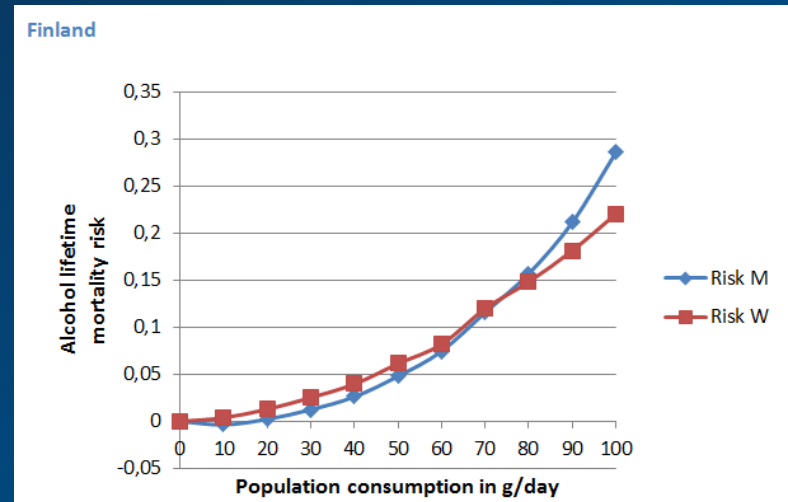
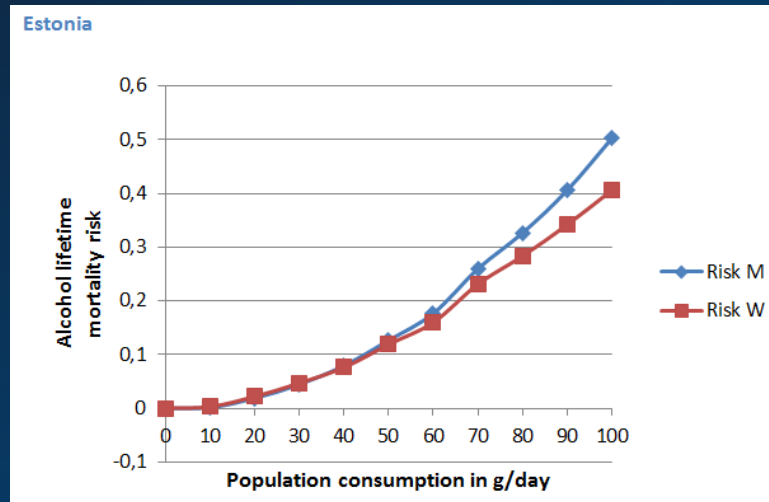
# RARHA Delphi survey around low risk drinking

Would you consider it desirable for European public health bodies to agree on a common concept of "low risk" drinking?



# Move towards a common metric of alcohol related risk ...

Absolute lifetime risk of death from alcohol-attributable causes for different levels of average daily consumption of alcohol, calculated for Finland and Estonia, using sex-specific basic mortality and sex-specific relative risks of alcohol consumption.



Rehm J & al. (2015) *Lifetime-risk of alcohol-attributable mortality based on different levels of alcohol consumption in seven European countries. Implications for low-risk drinking guidelines.* Toronto, On, Canada: Centre for Addiction and Mental Health.



## ... and a common criterion for low risk

Lifetime risk of death from alcohol-attributable causes for different levels of average daily consumption of alcohol, for men (M) and women (W) in selected countries.

Range of current low risk guidelines

Average per day	Estonia	Finland	Hungary	Poland
	M	M	M	M
10g	0.0027	-0.0015	-0.0061	-0.0068
20g	0.0138	0.0030	0.0028	-0.0004
30g	0.0296	0.0102	0.0171	0.0102
40g	0.0504	0.0197	0.0373	0.0259
50g	0.0792	0.0344	0.0635	0.0458

Average per day	Estonia	Finland	Hungary	Poland
	W	W	W	W
10g	0.0051	0.0037	-0.0022	-0.0062
20g	0.0380	0.0185	0.0274	0.0148
30g	0.0842	0.0402	0.0695	0.0466
40g	0.1371	0.0655	0.1221	0.0877
50g	0.2175	0.1054	0.1888	0.1418

Overall protective effect

Overall lifetime risk smaller than 1 in 100, but larger than 1 in 1000

Overall lifetime risk equal to or larger than 1 in 100

- ✓ The lifetime risk approach enables to develop drinking guidelines in light of a clear criterion of low risk.
- ✓ The risk level of 1 per 100 alcohol-attributable deaths could be considered a maximum for "low" risk.
- ✓ A stricter criterion of no more than 1 death per 1000 would contribute towards a healthier population.

# Good practice principles for low risk drinking guidelines

- ✓ The message is about risk, not safety.
- ✓ Daily drinking and occasional heavy drinking are both potentially harmful drinking patterns.
- ✓ Drinking guidelines should provide evidence-based information on risks at different levels of alcohol consumption, and help alcohol consumers to keep the risk of adverse outcomes low.
- ✓ Guidelines for healthy adults should be accompanied by guidance for various age groups, and advice concerning high-risk situations and at-risk groups.
- ✓ Not drinking at all should be promoted as the safest option in pregnancy, childhood and adolescence, driving, work or tasks that require concentration.
- ✓ Advice for older people should address adverse interactions with medications, co-morbidities and injuries.
- ✓ High-risk situations include taking a medication that may interact with alcohol, and at-risk groups include people with other addictions, mental health problems or family history of alcohol dependence.
- ✓ Particular harms to highlight in communication include increased risk of cancer, high blood pressure, addiction, depression, effects on the brain, overweight and adverse effects on the family.

# Policy action to support drinking guidelines

---

## *European level*

- ✓ Following the example of the European Code Against Cancer, cooperation between the WHO and EU to disseminate core messages regarding alcohol related risks and ways to reduce risk. – “European Alcohol Code”

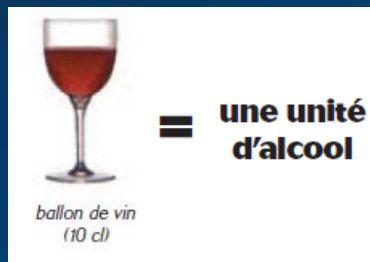
## *EU level*

- ✓ EU regulation to ensure consistent health-relevant information on alcoholic beverage labels:
  - Ingredients and nutrition values.
  - Calories/Joules and grams of pure alcohol in the package.
- ✓ Information on alcohol related risks, as appropriate to awareness-raising needs at national level.

## *Country level*

- ✓ Applying and enforcing a minimum 18 years age limit for all alcoholic beverages.
- ✓ Supporting primary health services to identify at-risk drinkers and offer brief advice to reduce high-risk drinking.







## Brand name

RESERVE

2020

*Estate bottled*

GRAPE VARIETY

*Fantasy name*

Winery/manufacturer

AREA • COUNTRY

12% vol.  
75 cl.

Contains sulphites

72 g EtOH  
555 kcal/2322 kJ





If you are pregnant or think you could become pregnant, avoid alcohol to keep risks to your baby to a minimum.



Thank You!

---

[marjatta.montonen@thl.fi](mailto:marjatta.montonen@thl.fi)