

The impact of alcohol addiction on communities

[Health & Medicine](#), [Alcoholism](#)



To truly understand the impact of alcohol dependence on communities, we need to first look at the alcohol-attributable burden of disability and disease. The WHO states in the Global status report on alcohol and health 2014 that: “ Harmful use of alcohol is one of the world’s leading risk factors for morbidity, disability and mortality.”

Alcohol is a known component cause of more than 200 different types of diseases and injury conditions, including gastrointestinal conditions, cancers, cardiovascular diseases, prenatal harm and mental and behavioral disorders. As a result of these diseases, the risk of dying is higher. Alcohol consumption results globally in approximately 3.3 million deaths per year. In the EU, more than twice the amount of alcohol per capita is consumed compared to global levels; the global average in 2004 was 6.1 liters per adult capita compared to 12.5 litres of pure alcohol consumed in the EU per adult capita. This results in a larger proportion of alcohol-attributable deaths relative to all deaths, in fact this proportion is the highest in the WHO European Region compared to other regions in the world.

The absolute risk of dying annually from an alcohol related disease increases from the consumption of 10 g alcohol a day in the population in WHO European Region aged above 15 years. In 2004, men had an approximately 9% annual risk of dying from an alcohol-related disease and women an 8% risk at a consumption of 60 g/day. Since the risk of disease is increasing by the amount of alcohol consumed, people who drink a greater amount of alcohol due to Alcohol Dependence have a greater risk of dying. At any given level of alcohol consumption, men are at greater risk than women. Rehm et al. estimates that 13.9% of all deaths in men in the age category from 15-64

years in the EU are of alcohol attributable causes and 7.7% in woman of the same age category. This corresponds with 94,451 deaths in men and 25,284 in woman in 2004. Even in the least affected region of Europe, Southern Europe, still about 9.2% of all deaths in men and 6.4% in women are due to alcohol.

For the alcohol dependent population, the risk of mortality is also bigger. A study from Laramée et. al in 2015 shows that a relative risk of all-cause mortality in alcohol dependent individuals compared with the general population is 3.45 (RR = 3.45; 95% CI [2.96, 4.02]; $p < 0.0001$) (18). / 147

Taking into account the evidence, harmful use of alcohol results in an enormous amount of Potential Years of Life Lost (PYLL). The Potential Years of Life Lost is a measure of premature mortality that attempts to estimate the length of time a person would have lived if the person had not died prematurely. This gives more weight to death that occur among younger people. This is especially important for the mortality caused by alcohol consumption because alcohol contributes more to mortality as the age group gets younger. Alcohol has been identified as the most important cause of death in young adulthood. An estimation of Rehm et al. shows that a total of more than 2 million PYLL in the EU were due to alcohol consumption; 1,684,000 PYLL in men and 408,000 in women. This is 16.0% of all PYLL in men and 8.0% of all PYLL in women. Figure 3 indicates the proportion of alcohol-attributable PYLL for the major disease categories, for people aged 15-64 living in the EU in 2004. Liver cirrhosis, caused by heavy long term drinking, contributes the most to PYLL.

Another measure of health is Years of Life Lost Due to Disability (YLD), which measures time lost due to disability. Specific disabilities have a disabling weight, measured in percentages. When measured in Years of Life Lost Due to Disability (YLD) overall in the EU in 2004, 14.5% of all YLD in men and 2.2% of all in YLD in women were lost to alcohol-attributable causes. Alcohol dependence and alcohol-use disorders thus contribute in terms of disability-causing diseases proportionally more to disability (as measured by YLD) than to mortality. This means that this category of disease is more disabling than it is lethal.

The total burden of disease is measured in Disability-Adjusted Life Years (DALYs), it adds together PYLL and YLD to create a measure of all years of life lost due to either premature mortality, or to living with a disability. DALYs are the most-used indicator for comparing health across different jurisdictions. The burden of disease related to alcohol in the EU is as expected big. Rehm et al. estimated that in 2004 in the EU, 3,359,000 in men, and 684,000 DALYs in women, were lost due to alcohol-attributable causes. A total of 4,043,000 years and 15.2% of all DALY's in men and 3.9% in women. In 2012 the total DALY's caused by Alcohol Attributable fractions (AAFs) were 12.8% for Europe, compared to 5.1% in the world.