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COMMITTEE ON SOCIAL AND HEALTH QUESTIONS



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Abuse in the consumption of alcohol

Introductory note prepared in
the Committee's Secretariat

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Introduction

1. Alcoholism can be considered as having many features common to the problem of drug addiction, there also being, however, significant differences. On drug dependence the Committee on Social and Health Questions presented reports to the Assembly in October 1970 (Doc. 2815) and in October 1972 (Doc. 3156). In Doc. 2815 it was said that the signs and symptoms of barbiturate and alcohol intoxication are somewhat similar, while the signs and symptoms of withdrawal from these drugs are very similar indeed. The WHO Expert Committee on Alcohol and Alcoholism (1) reported that "though many of the events observed in alcoholism are parallel to many of the phenomena observed in opiate addiction, many important differences exist". Though the problems associated with alcohol are rather similar to those of drug dependence it was estimated by the Committee on Social and Health Questions in 1970 that the abuse of alcohol in our society is much more widespread than the abuse of other drugs and is a tremendous medical, social and economic problem. It therefore was considered more appropriate to deal with alcoholism in a separate report.

2. Alcoholism is in fact a phenomenon which leads to a chronic disease of which a large and increasing number of people suffer; it is also potentially fatal. By its nature alcoholism is hard to isolate, but WHO rates it the world's third killer, next to cancer and heart disease. Statistics cannot tell how many deaths from accident, suicide, respiratory and liver diseases, have not had alcoholism as a secondary cause. Once alcoholism is well established it is not long before physical symptoms appear: alcoholic gastritis, peripheral neuritis or other nutritional deficiency diseases, heart diseases, brain damage, liver cirrhosis, ultimately culminating in death. Alcoholism leads to increasing social problems, which in turn lead the alcoholic to seek more and more the relief given by alcohol.

3. Although the reasons for excessive drinking are various, two main categories of chronic alcoholism can be distinguished. One category is formed by those persons for whom alcoholism is a secondary factor to gross personality problems, neuroses or psychoses, the other category being formed by those whose personality problems and neurotic behaviour are the result of the illness rather than the cause. Alcohol is a drug that can produce dependence, it is not a stimulant, it is a sedative. At the first stage of the development alcoholism leads to psychic dependence followed later by physical dependence and tolerance (2).

(1) World Health Organisation Techn. Rep. Ser., 1955, 94, 10.

(2) Tolerance is the result of physiological adjustments to the chemical properties of the drug. An increase in tolerance will be expressed in diminished effects induced by a given dose of the drug. Thus it may lead the user to increase the dose.

4. The illness has reached vast proportions in the various Council of Europe member States. In France in 1971 a study of the medical files of 1,468 workers revealed that the risk of death before the age of fifty-five was three times higher among the alcoholics than among moderate drinkers. In the United Kingdom it has been estimated that alcoholism may be the country's third major health hazard (1). In Switzerland the number of alcoholics is estimated to be 125,000 (against 12,500 drug dependent persons), entailing the suffering of 300,000 to 400,000 members of their families. The annual number of persons dying from alcoholism as a main or secondary cause is estimated to be 4,000 (against 1,773 people killed in traffic accidents in 1971). Over the last few years alcoholism increased in particular among women and the young (2)

5. Another serious problem is of course that a substantial number of the fatal traffic accidents are caused by drivers under the influence of alcohol and the same applies to fatal industrial accidents. Such accidents can of course be caused by incidental heavy drinkers as well as by chronic alcoholics. The consequences of alcoholic intoxication are much more serious than say, fifty years ago when mechanisation was still in its infancy. In today's society a reduction of one's intellectual abilities can hardly be tolerated in professional or leisure activities. In fact the problems in connection with excessive use of alcohol are sufficiently well-known and a detailed account of such problems need not be given in the context of this report. Nevertheless, it is a surprising fact that despite a general awareness of the harmful effects on health and the disastrous social and economic implications of excessive drinking, the consumption per capita of alcoholic beverages has steadily grown in the last decades. It therefore can be assumed that the legislative and other measures designed to reduce alcohol consumption and prevent alcoholism have not been sufficient. This phenomenon can be explained mainly by the fact that an increasing number of people feel the need to escape reality by taking drugs such as alcohol. The social factors which lead to this behaviour have to be better understood in order to be able to combat excessive drinking.

6. The motivation to abstain should be stimulated, but in our present consumer society it is more and more difficult for the individual to behave in accordance solely with health criteria. In view of the enormous economic interests which represent the sales of alcoholic drinks, it is clear that comprehensive prophylactic measures against alcohol consumption would remain without much effect if at the same time no

(1) The Times, 29 April 1971.

(2) Neue Zürcher Zeitung, 24 November 1972.

measures were taken against the constant pressure by producers and merchants to which consumers are exposed. In other words, the freedom of trade and advertising in the sector of alcoholic drinks should be questioned and revised.

7. In fact, as mentioned above, the approach to the alcohol problem has similarities and differences with that of the drug problem. "While the extent and nature of the problem, i.e. type of drug dependence and patterns of use and abuse, vary widely from country to country, the relatively frequent transfer from one drug of dependence to another, the not infrequent abuse of drugs in combination, the complex and changing patterns of abuse, and the rapid development of new drugs with potentialities for abuse, make it important that dependence on alcohol and other drugs be considered as facets of one problem, psychic dependence of various kinds being the common factor. To the degree that dependence-producing drugs interfere substantially with the normal functioning of the abuser and/or become a problem for other persons or society, they give rise to health problems that are susceptible of medical identification, classification and treatment. This does not imply that the problems under discussion come exclusively within the field of health. Social, cultural, legal, economic and other factors also play a role in causation, treatment, prevention and control. It is imperative that dependence on alcohol and other drugs be recognised as creating major health problems, which have to be considered not only in terms of the agents involved but also from the point of view of the host and the environment.

A combined approach to problems of alcoholism and drug dependence does not apply equally to all aspects of the problems. Differences in local conditions, such as social structure, personal and cultural attitudes, and the incidence and prevalence of dependence on various agents have to be taken into account. In general, a combined approach will apply most usefully to research and will be less applicable to control measures, with treatment and education falling in between" (1).

8. Measures against abuse of alcohol can be taken through information and education, legislative measures and the influencing of social attitudes. Restriction of availability and punitive measures against abuses were for many years the main prophylactic measures against use and abuse of alcohol. Various forms of restrictive legislation as well as taxes on alcoholic beverages exist in all Council of Europe member

(1) World Health Organisation Techn. Rep. Ser. 1967, 363.

States. Prohibition in the United States, Finland, Norway and Sweden (in the latter country a rationing of certain alcoholic beverages), did not eliminate use and abuse of alcohol and in fact led to undesirable consequences. "Increase in taxation or other price regulation as a control measure may result in changes in type of alcoholic beverage used and may be followed, at least for a period, by reduced consumption. However, it does not necessarily act as an effective deterrent to the consumer who has become dependent, because he almost always continues to seek and abuse other agents. ... The fining and imprisonment of ... drug-dependent persons does not prevent recidivism if other measures are not taken as well. Despite the enumerated limitations, restrictive legislative measures as a whole do, however, play an important role in primary prevention" (1).

9. The most adequate way to combat abuse of alcohol would seem to be prevention, early diagnosis and treatment. Prevention is a most difficult and complicated task as it can only be effective if the factors leading to alcoholism are sufficiently known. Even if such knowledge existed, it would still be difficult to reach all the people suffering from the illness in good time, as they tend to hide or conceal the illness at its early stage and because they are reluctant to disclose their problem. However, much could be improved if people were better informed of the dangers of excessive drinking and if more was done to permit the alcoholic to identify his own illness.

10. Use of alcohol is widely accepted in society and that makes the combating of its abuse more complicated. High pressure advertising, both in the press and on radio and television has its influences, without there being a sufficient counter influence in the form of information on the possible dangers of alcohol consumption. Increase of tax on alcoholic beverages has reduced consumption, but is not a panacea. Those people suffering from the illness would just spend more money to obtain drinks which in most cases would entail even more economic hardship for their families. Nevertheless the price level of alcoholic beverages is an instrument in the prevention of the use of alcohol, in that in general, people tend to look for cheaper substitutes which are less harmful to health, if the prices of hard liquor are high. However, it should also be added that alcoholism can also - and in some countries and a great number of individual cases really does - result from excessive consumption of beer or wine. With regard to advertisement of alcoholic beverages, here it is of crucial

(1) World Health Organisation Techn. Rep. Ser. 1967, 363.

importance that the Council of Europe member States take a common approach. The effects of restrictive legislation are partly offset if advertising on television and radio and in the press is not restricted in neighbouring countries.

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11. In view of the above, the Committee on Social and Health Questions could usefully consider the following measures:

- prevention of alcoholism through enlightening public opinion, improved socio-medico services for persons suffering from the illness in order to detect the illness at an early stage and to advise and treat patients;
- restrictive legislation which may be directed at controlling the manufacture, distribution, price, time of sale or consumption (in public houses) of alcoholic beverages;
- harsher punishments of persons responsible for accidents, involving other people, caused by use or abuse of alcohol;
- restriction or suppression of advertisement of alcoholic beverages. This measure can be selective in that different policies can be adopted with regard to different kinds of beverages according to their degree of harmfulness;
- increased financial support for organisations fighting against abuse of alcohol and/or providing help to persons suffering from alcoholism;
- social research into the causes of alcoholism with a view to improving prevention and aiding early diagnosis of the illness;
- international harmonisation of restrictive measures so as to reach optimal effects.