

Alcohol and Cancer in the WHO European Region

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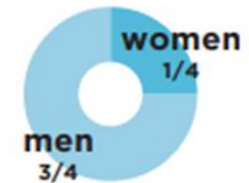
Alcohol: (ethanol/ethyl alcohol) from the public health perspective

Alcohol and health

The benefits connected with the production, sale, and use of this commodity come at an enormous cost to society

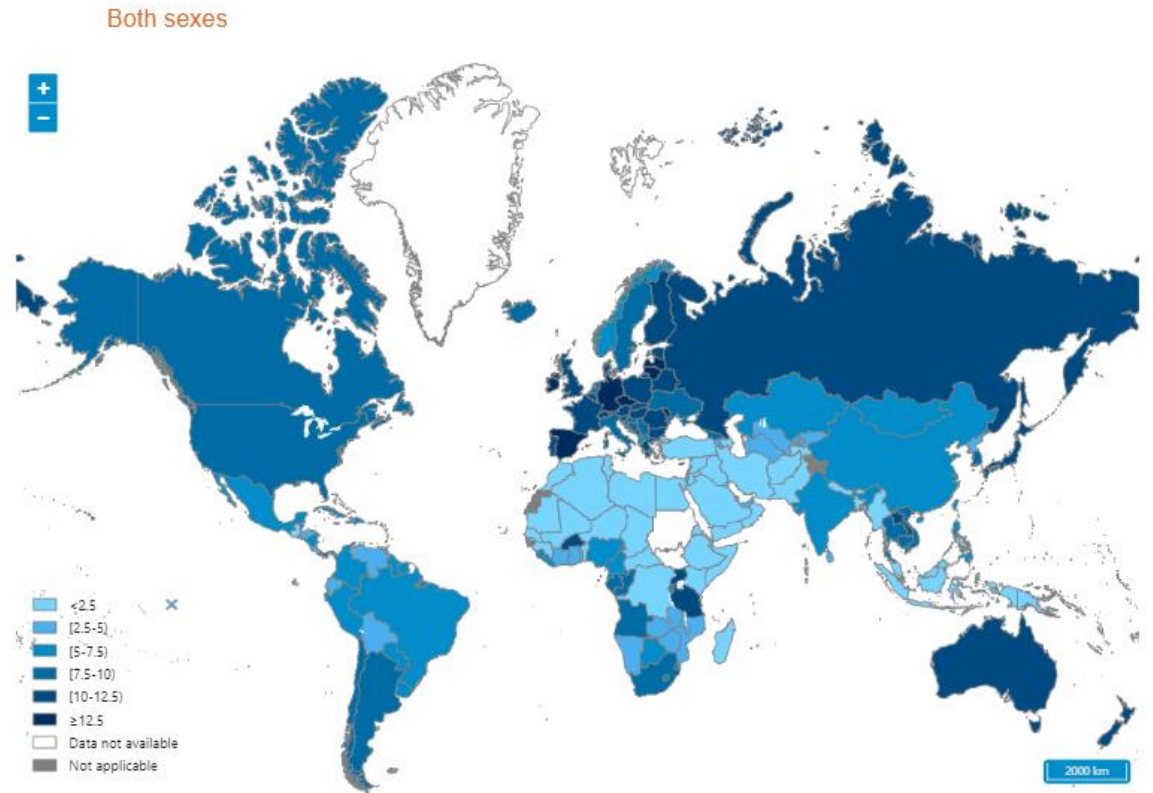
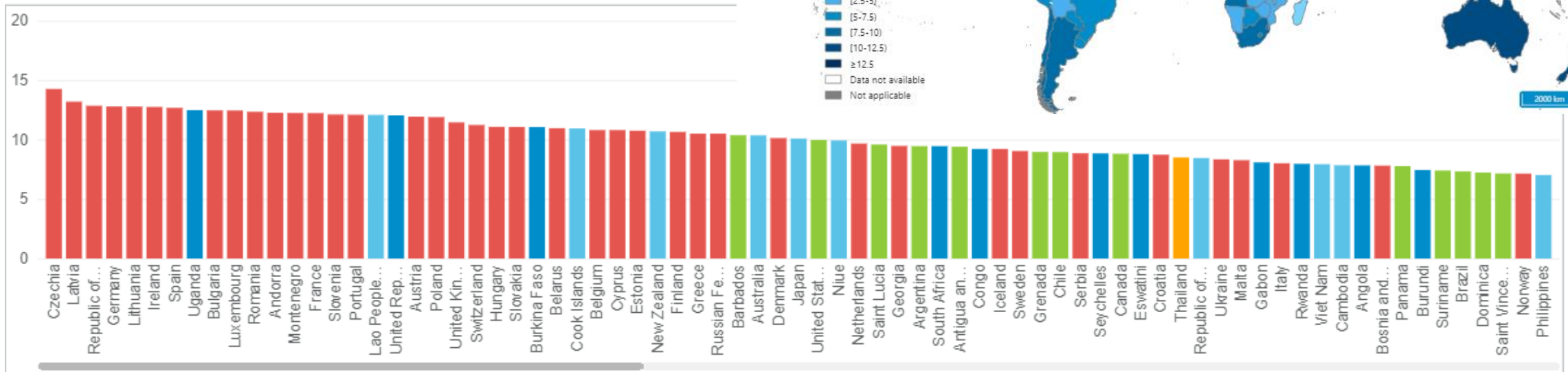


3 million **deaths**
6 deaths every minute
from harmful use of alcohol
every year



1 million deaths every year in WHO European Region

Alcohol consumption: — where does the Region stand?



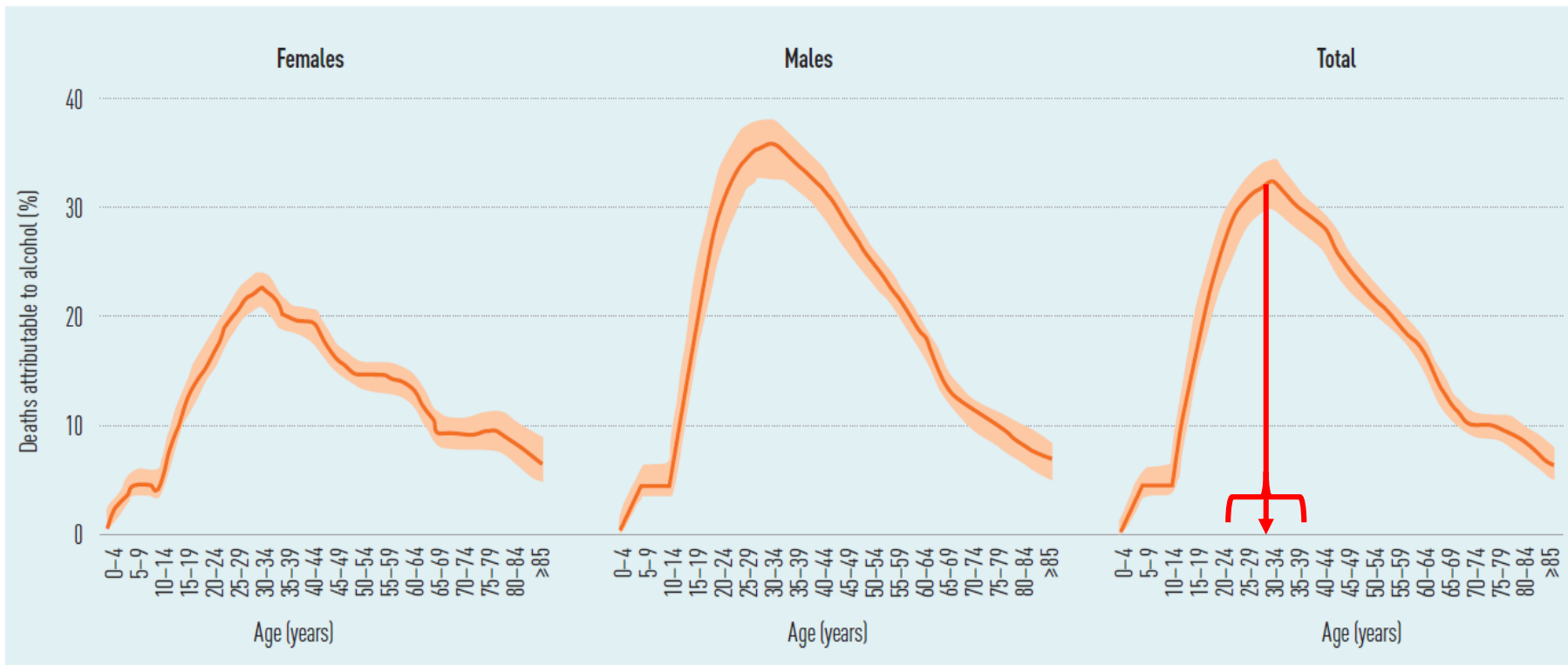
And what about the alcohol-attributable burden?

- Globally, the WHO European Region has the highest proportion all of deaths and disability-adjusted life years (DALYs) that are caused by alcohol.
- Around **2545 people died every day** from alcohol-attributable causes of deaths in 2016.
- Every 10th death within the Region was alcohol-attributable – in the age group of 20–24-year-olds this was nearly one in every fourth death

In 2016

928 841 deaths

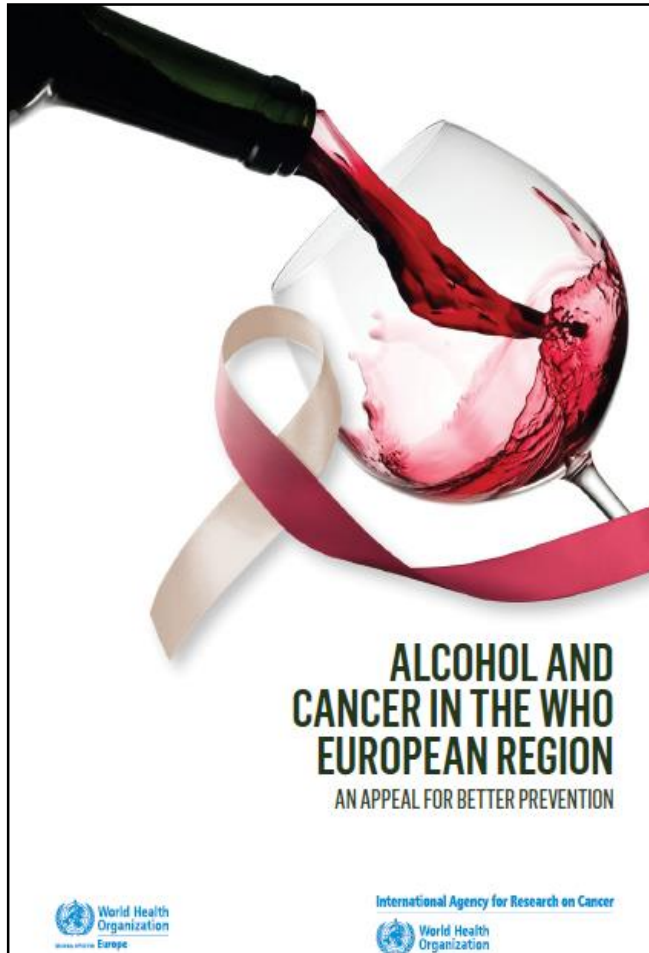
in the WHO European Region were estimated to be alcohol-attributable



Proportion of deaths caused by alcohol use in the WHO European Region, by age and sex (2016)

^a The orange area along each line represents confidence intervals.

Key messages:



- 180,000 cancer cases and 92,000 cancer deaths caused by alcohol in 2018
- No safe level of consumption
- Public health responses must be matched to this complex vision of the dangers of alcohol and respond to population-level harms



Which cancers are caused by alcohol?

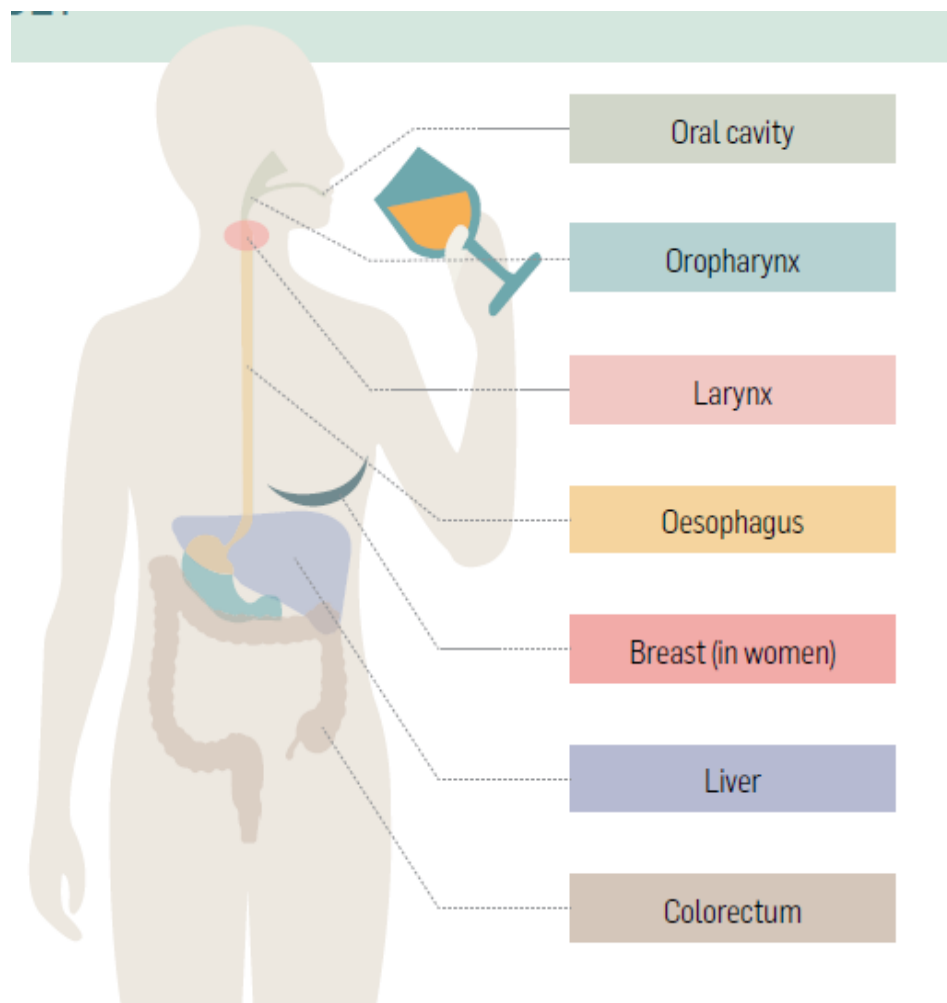
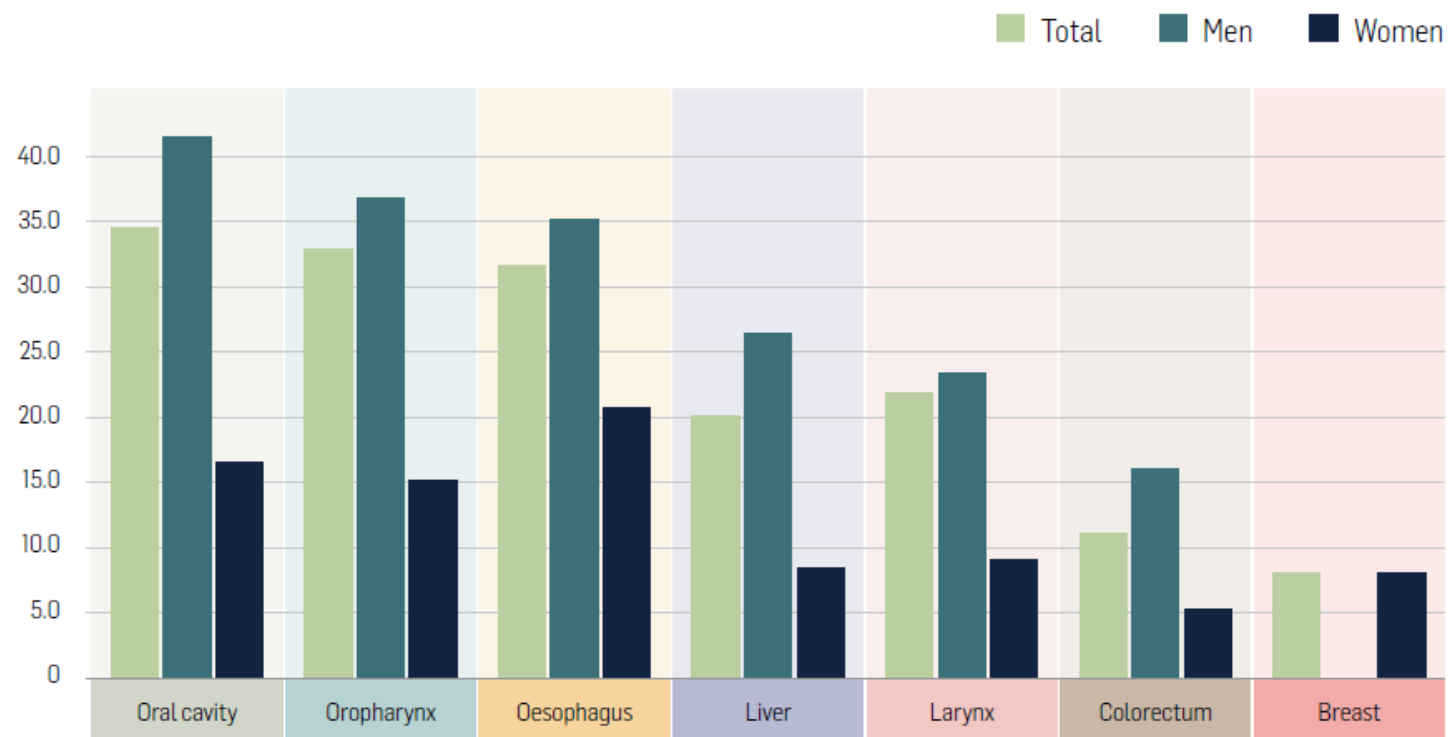
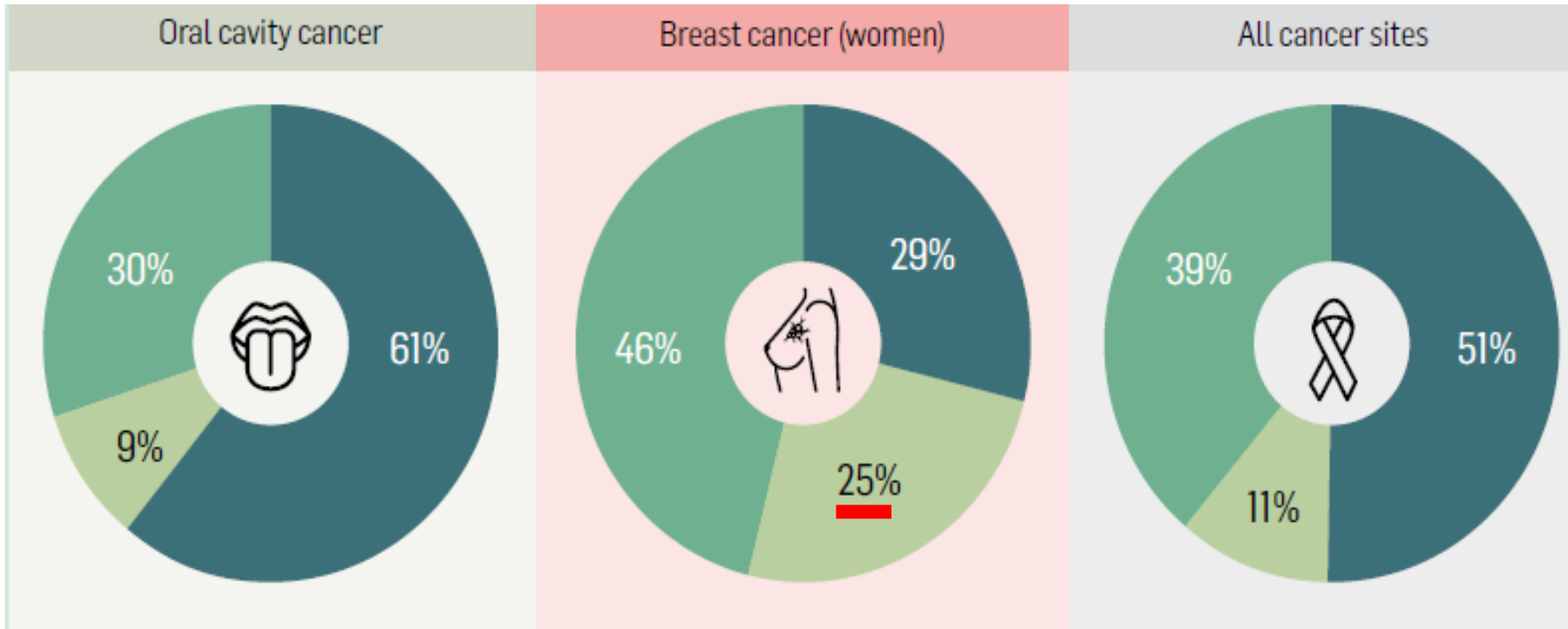


Fig.2. Proportion of cancer deaths, per cancer type, that are attributable to alcohol (alcohol-attributable fractions), by sex, 2018^a



No safe level



Half of all alcohol-attributable cancers are NOT because of heavy drinking + so is the majority of breast cancers.



Moderate drinking:
a maximum of two drinks,
or 20 g of pure alcohol, per day



Risky drinking:
3–6 drinks, or a maximum of
60 g of pure alcohol, per day



Heavy drinking :
six drinks, or 60 g of pure alcohol,
or more per day

Every fourth alcohol-attributable breast cancer is because of “moderate drinking”

New WHO Factsheet

5



FACTS ABOUT ALCOHOL & CANCER

This information sheet provides some facts about the links between alcohol consumption and a range of cancer types. This affects not only people who drink alcohol but also their families, friends and communities.



1. Alcohol causes at least 7 types of cancer

One of the ways that alcohol (as ethanol) can cause cancer is through DNA damage.

Alcohol consumption is known to increase the risk of cancer development in:

- the oral cavity (mouth)
- oropharynx (throat)
- oesophagus (gullet)
- liver
- larynx (voice box)
- colon/rectum (large intestine and rectum)
- female breast.



2. The most common types of cancer due to alcohol are different for men and women.

In 2018 in the WHO European Region the most common sites of cancers due to alcohol consumption were female breast (most common cancer site in women) and colorectal (most common cancer site in men).



In 2018 alcohol caused approximately



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FACTS ABOUT ALCOHOL & CANCER

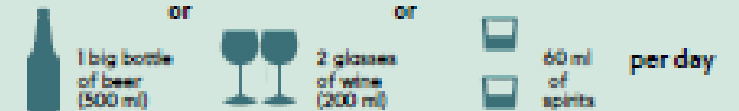


3. The risk of cancer from alcohol consumption increases from the first drink

THERE IS NO SAFE LEVEL OF ALCOHOL CONSUMPTION FOR CANCER.

All types of alcoholic beverages, including beer, wine and spirits, can cause cancer. The risk starts at low levels and increases substantially the more alcohol is consumed.

More than **1 in 10** of all cancer cases causally linked to alcohol across the WHO European Region in 2018 were due to drinking no more than



4. Using tobacco as well as alcohol multiplies cancer risks

People who use both alcohol and tobacco have a **5 times increased risk of developing cancers** of the oral cavity, oropharynx, larynx and oesophagus, compared with people who use either alcohol or tobacco alone.



For people with heavy drinking patterns, the risk is up to **30 times higher**

5. Cancers due to alcohol consumption are preventable

Reducing alcohol consumption will prevent cancers due to alcohol consumption.



- Regulations
- to make alcohol less affordable
 - to ban or restrict alcohol marketing across all types of media
 - to reduce alcohol availability
- can support the reduction of alcohol consumption and ultimately of cancers due to alcohol consumption.

WHO strongly supports regulations to place health warnings on alcoholic beverages so that the public can know about the risks of cancer from alcohol consumption. They can then make informed choices, such as reducing or stopping drinking alcohol.

Together, we can achieve a **SAFER WHO European Region free from harm due to alcohol**

For further information and references, [Alcohol and Cancer in the WHO European Region: an appeal for better prevention](#) (2020)



Policy options to reduce alcohol-attributable cancers





MAKING THE WHO EUROPEAN REGION

SAFER

DEVELOPMENTS IN ALCOHOL CONTROL POLICIES, 2010-2019

Alcohol-attributable cancers and deaths can be prevented by:

- 1) reducing alcohol consumption
- 2) using effective policies
 - increasing taxes
 - banning or restricting alcohol marketing
 - restricting availability

Launch of the #SAFEREuropeanRegion initiative

GENERAL POPULATION STRATEGIES:

highly effective, highly cost-effective, easy and inexpensive to implement (“**best buys**”)

- price increase via taxation or other means
- availability decreases
- ban on marketing

HIGH-RISK POPULATION STRATEGIES:

Effective, cost-effective

- drink-driving countermeasures
- screening and brief interventions
- treatment of alcohol use disorders

Environmental strategies

- Education
- Registration of all alcohol, including industrial alcohol
- Informal controls

Strengthen restrictions on alcohol availability;

Advance and enforce drink–driving countermeasures;

Facilitate access to screening, brief interventions and treatment;

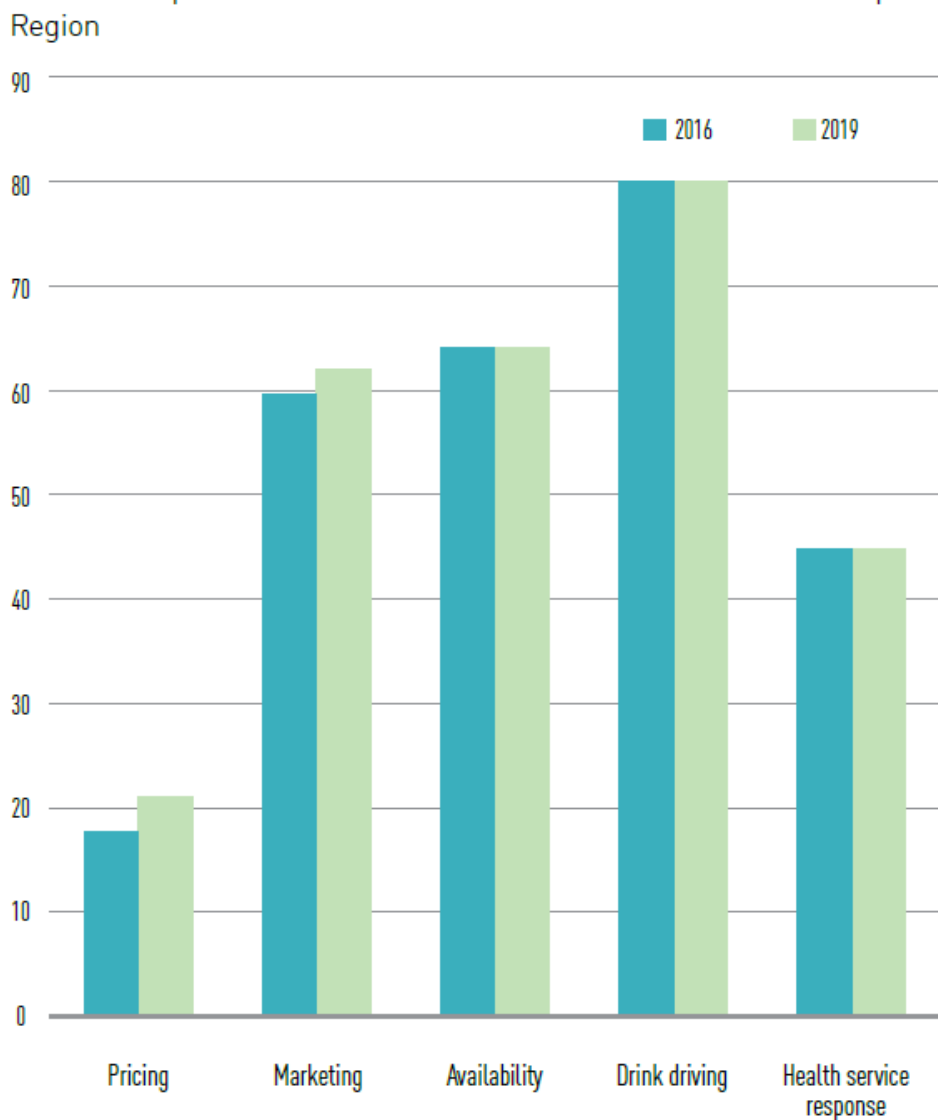
Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship and promotion;

Raise prices on alcohol through excise taxes and pricing policies.



Alcohol is too affordable in the Region

Implementation of the five SAFER areas in the WHO European Region



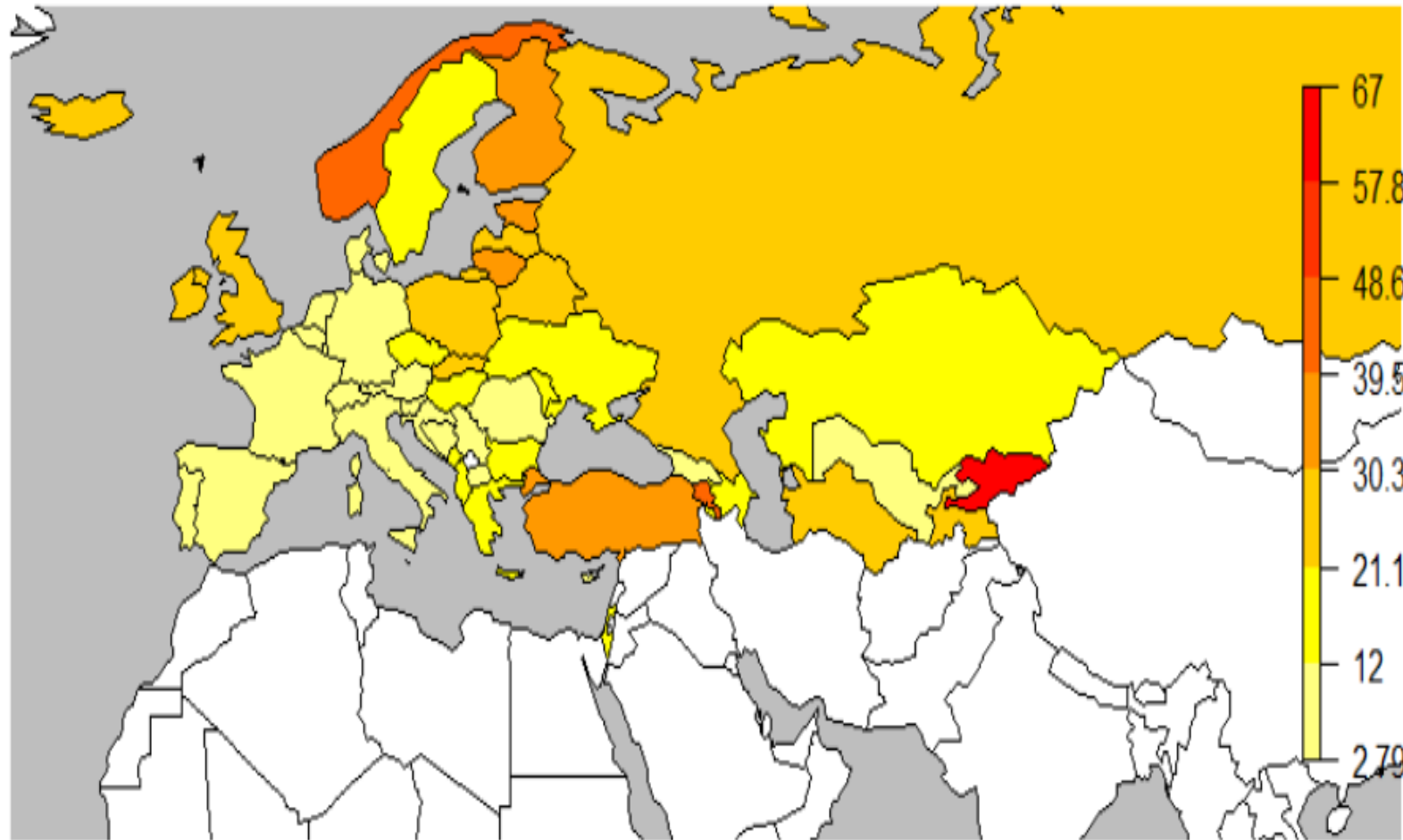
- In 2016 of the five SAFER areas, only drink–driving countermeasures were sufficiently implemented (80%)
- Pricing policies – despite being the most cost-effective type of policy, recognized as a “best buy” measure to reduce the disease burden – were the worst-performing policy area in the Region in 2016 and 2019.
- Even worse, the available data suggest that alcohol had become more affordable in the Region as a whole because of Member States’ failure to adjust alcohol taxes for inflation.

Price and tax measures	Member States (n=53) 2012	Member States (n=53) 2016
Level of excise duty adjusted for inflation	13 ^{a,b}	15 ^b
Minimum retail price for alcohol	5	8
Ban on below-cost selling	3	3
Ban on volume discounts	3	3
Additional levy on specific products	5	5
Requirement to offer non-alcoholic beverages at a lower price	4	5
Other price measures to discourage underage drinking or high-volume drinking	1	1

^a In one Member State, excise duty was adjusted for inflation only for beer and spirits; in another, it was adjusted only for wine and spirits.

^b This includes data from only 14 Member States for beer, 11 for wine, and 14 for spirits.

A paradigm shift for alcohol taxes is needed!



Proportion of tax in the final price for all alcoholic beverages

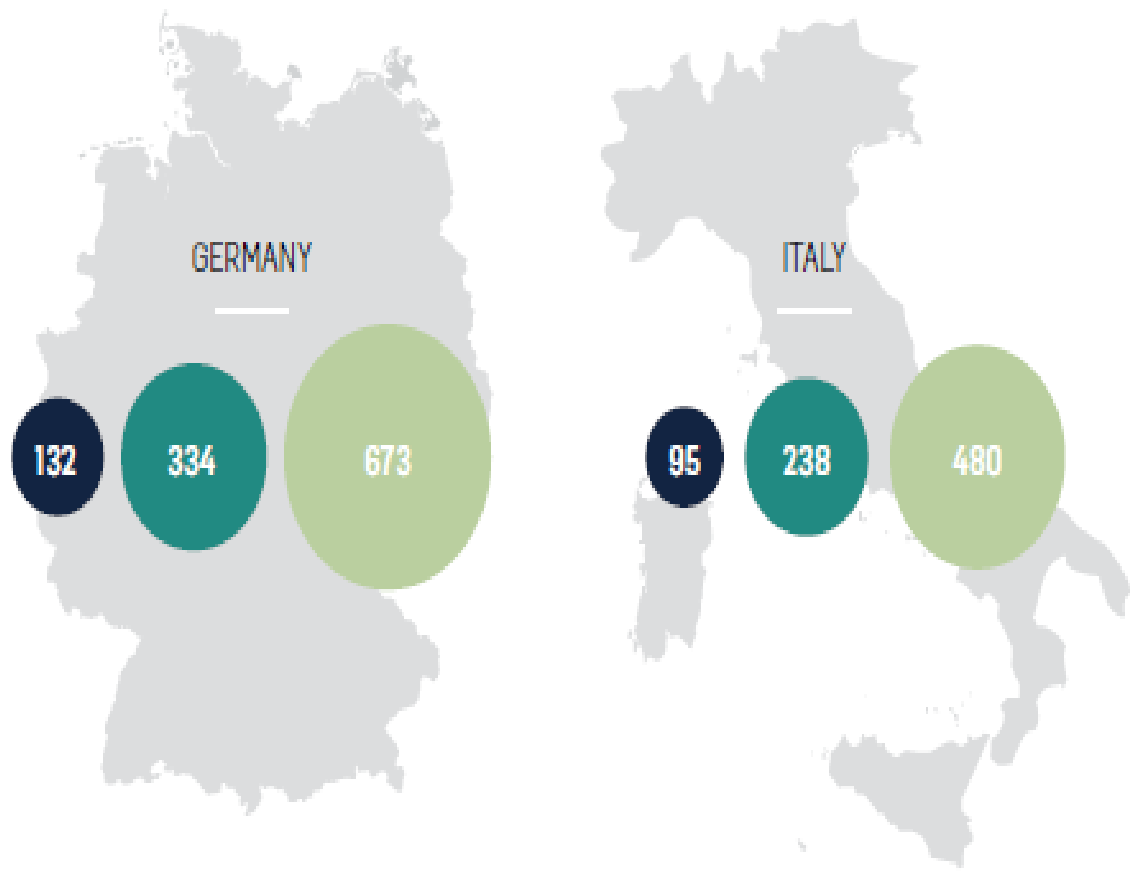
As a reference frame: for tobacco, the regional average is about 75%

A total of 22 countries (15 of them EU countries) do not have a tax on wine

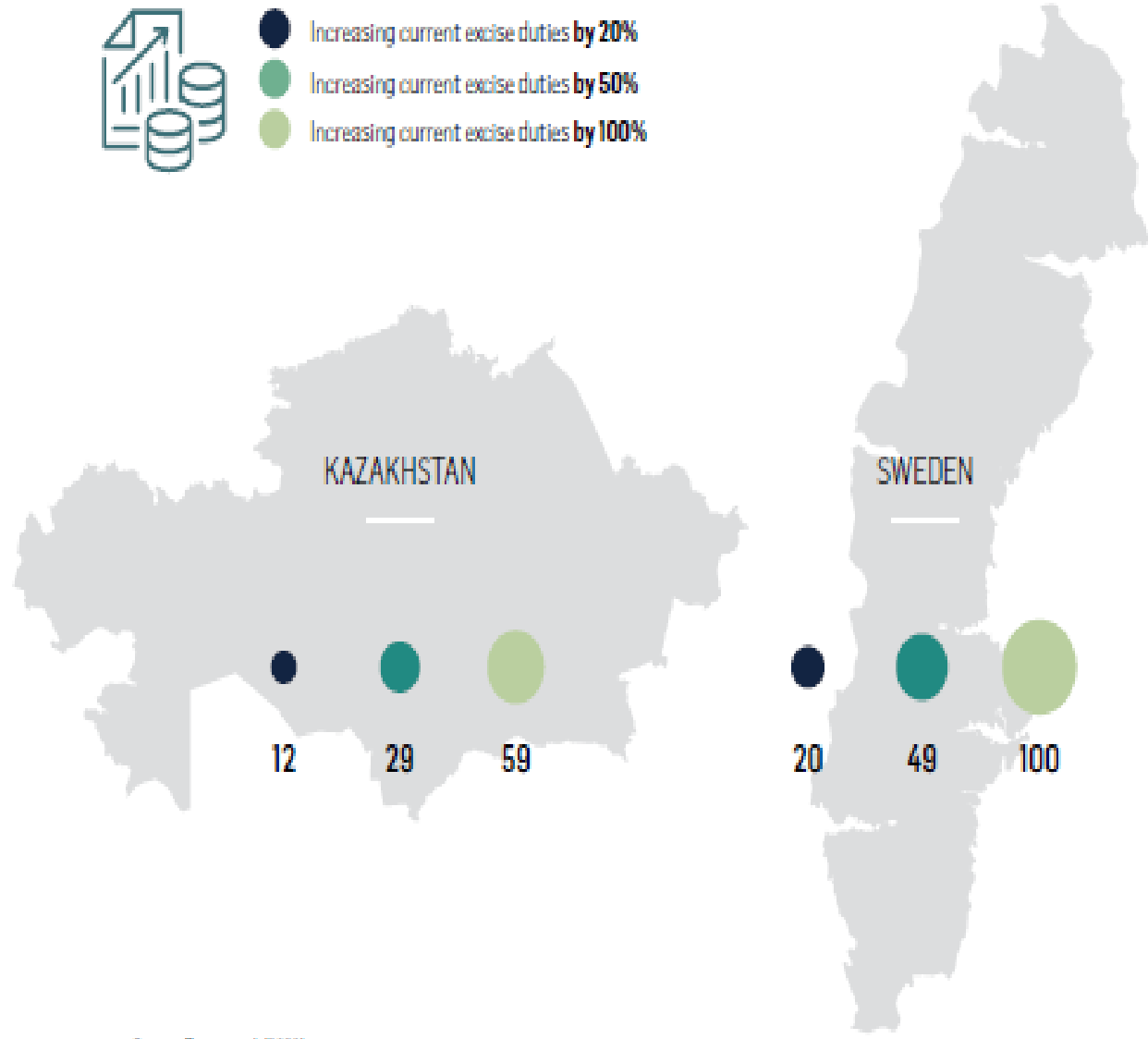
Most countries do not adjust tax for inflation

Taxation: most cost-effective and least implemented

Fig. 5. Number of new cancer cases that could have been prevented in 2018 by increasing alcohol excise tax in four European countries



- Increasing current excise duties by 20%
- Increasing current excise duties by 50%
- Increasing current excise duties by 100%



Source: Rovira et al. (2020)¹⁶

Reducing alcohol consumption is a public health imperative

The evidence of alcohol's contributory role in cancer development and cancer death has not yet been sufficiently recognized and addressed in the relevant global and European responses

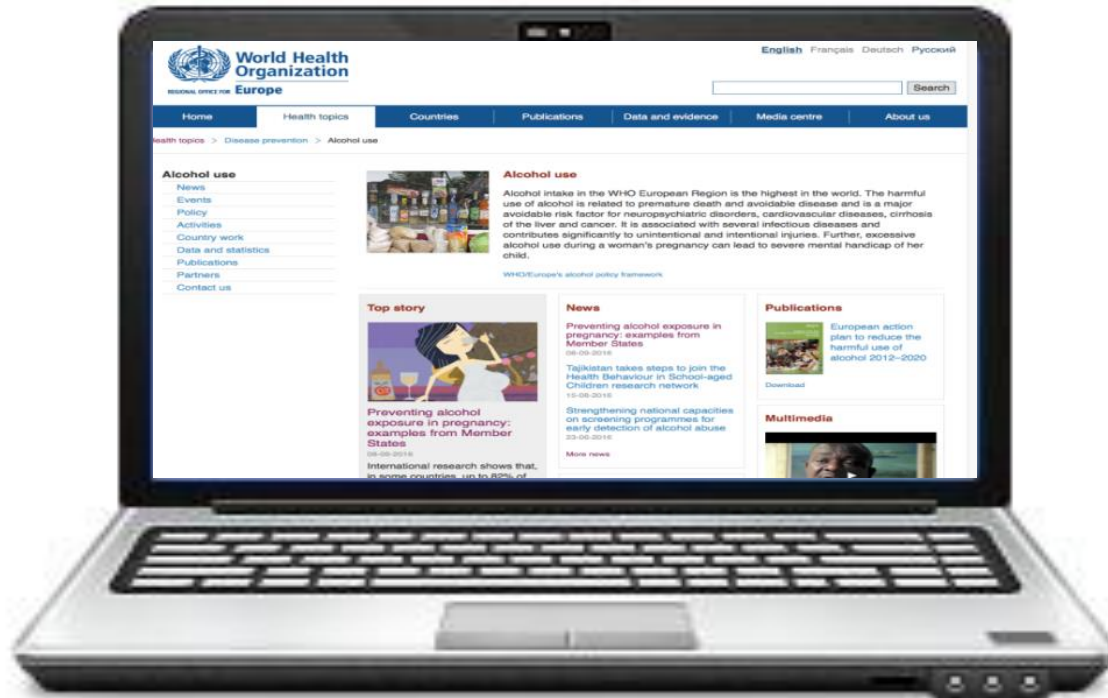
There is a need for interconnected measures:

- a clear message that there is **no safe level of drinking**;
- **concerted action** at national and international level;
- effective **coordination of multisectoral efforts** to combat the influence of vested interests opposed to alcohol control policies;
- increased levels of **political commitment** and implementation of a comprehensive policy approach, with emphasis on the **3 WHO best-buys**;
- appropriate and widespread **engagement** of public health-oriented nongovernmental organizations, professional associations and civil society groups.

More information on the WHO website



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<http://www.euro.who.int/alcohol>

Thank you! Спасибо!



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