Alcohol

Is alcohol really a medicine in disguise, a major social problem or an important social factor? Or is it all those and more?

Sweeping generalisations about alcohol are not appropriate. The longer term impact of alcohol on an individual is influenced by a mass of variables, including gender, current level of consumption, current medical conditions, diet and age.

To complicate matters further, to assess the value of the many reports and papers that have been compiled on this subject, we need to understand the potential for bias of the presenters. Can we differentiate between information from a researcher seeking funding for more detailed research, a government pursuing a political agenda, product suppliers or their representatives (such as hotel licensees or a regional wine promotion group) seeking preferment for their own products and services?

The body of evidence supports the beneficial effects of light to moderate alcoholic beverage consumption. Broadly speaking, for women this is about one standard drink a day and for men about two. Individuals trying to set personal limits should take account of at least the following:

- For younger people, the main impact of alcohol is behavioural, often with attendant personal risks. At middle age and beyond, there is evidence that moderate alcohol consumption (as above) can be beneficial for coronary heart disease in particular and some other health factors.

- Heavy alcohol consumption (ie, more than moderate) is potentially dangerous for individuals and those around them at all ages. There are no offsetting benefits.

Some studies claim that wine (particularly red wine) offers more benefits than other forms of alcohol and that drinking with meals (as in Mediterranean countries) is more beneficial than not. While these studies are not conclusive, individuals may want inform themselves better about this in establishing their own personal behaviour.

Sources


Lang I et al. (2007). Moderate alcohol consumption in older adults is associated with better cognition and well-being than abstinence. Age Ageing 2007 May 36(3): 256-61
