

HEALTH STATISTICS ON ALCOHOL AND ITS HARMS: A SNAPSHOT

CENTRE FOR EPIDEMIOLOGY AND EVIDENCE,
NSW MINISTRY OF HEALTH
APRIL 2014



Health



KEY FINDINGS

Drinking alcohol places a substantial burden on the health of Australians

It is linked to immediate and long term harms to self and others. **Immediate harms** include injury, poisoning, violence and self-harm. **Long term harms** include heart disease, stroke, cancer, liver disease, weight gain, mental illness, poor diabetes control, and harm to unborn babies.

Alcohol is linked to injury due to violence and a culture of violence.

The most recent data shows **4.9%** of poor health and injury in Australian males is attributable to alcohol.



Alcohol consumption at levels that pose a lifetime risk to health remains high but **decreased** in NSW between 2003 and 2012.



In NSW the **rate of hospitalisations** from injury due to violence* in **15-24 year old males** was around **four times** that of females in the same age group.



The **rate of hospitalisations** in NSW from injury due to violence* in males aged 15-24 years was **25% lower** in 2012-13 than in 2003-04.



The rate of **emergency department** presentations in NSW for **acute alcohol** problems was **33% higher** in 2012 than in 2003. Males and females aged 18-24 years were markedly over-represented in these presentations.

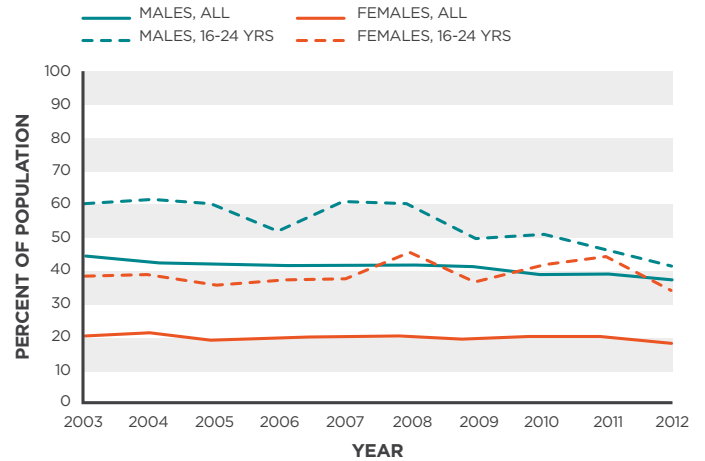
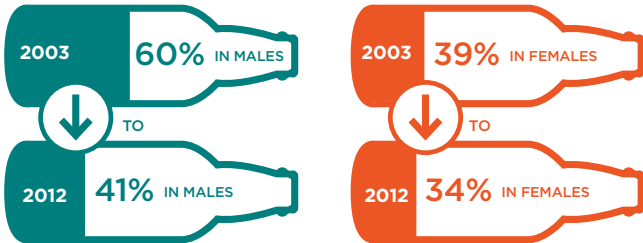


*The alcohol status of a patient or perpetrator is not available in the measures relating to violence/assault.

1. How many people in NSW drink at levels that pose a lifetime risk to their health?

Between 2003 and 2012, the percentage of people aged 16 years and over in NSW who consumed more than two standard drinks on a day when they consumed alcohol decreased from 45% to 37% in males and from 20% to 18% in females.

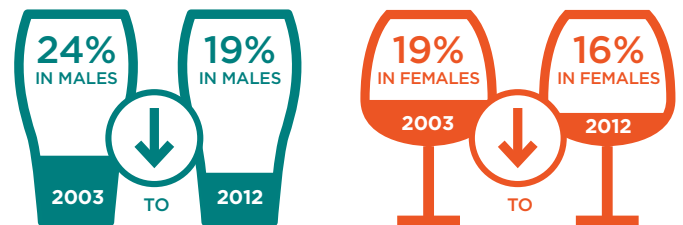
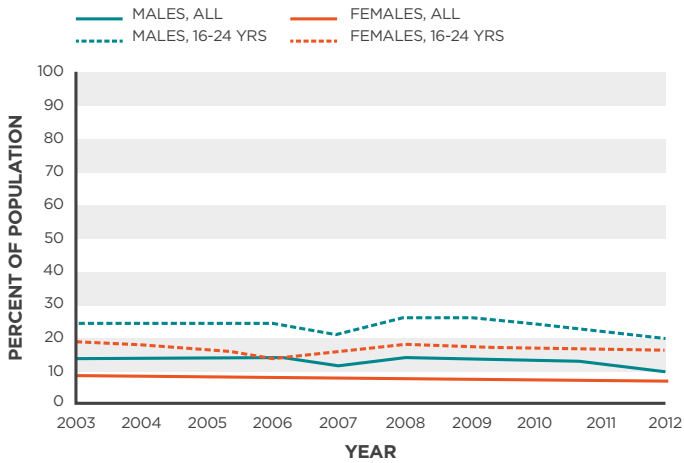
In the same period, the percentage among 16-24 year olds decreased from:



2. How many people in NSW drink at very high levels on a single occasion?

Between 2003 and 2012, the percentage of people aged 16 years and over in NSW who consumed alcohol at very high levels on a single occasion decreased from 13% to 9.5% in males and from 7.7% to 6.5% in females. Very high level consumption is defined here as 11 or more drinks on any day if male, or 7 or more if female.

In the same period, the percentage among 16-24 year olds decreased from:

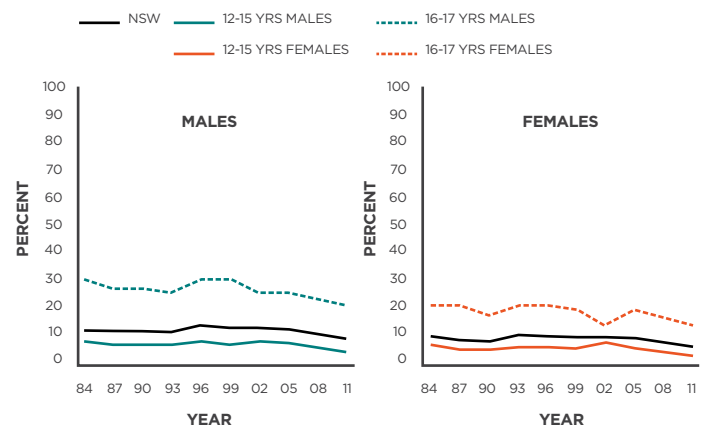
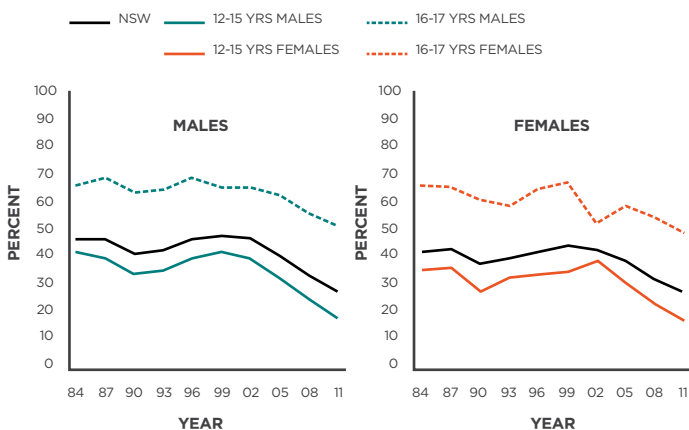


People in this age group were around twice as likely to drink at very high levels on a single occasion.

3. How many school students drink alcohol in NSW?

In 2011, 27% of students aged 12-17 years reported consuming alcohol in the four weeks prior to being interviewed. This compares with 45% in 2002, a 40% decline.

In 2011, 7.2% of students aged 12-17 years consumed four or more drinks a day in the seven days prior to being interviewed. This compares with 11% in 2002, a 35% decline.



Consumed alcohol in the last 4 weeks by year, students 12-17 years, NSW, 1984 to 2011

Consumed 4 or more drinks in a day in the last 7 days by year, students aged 12-17 years, NSW, 1984 to 2011

4. How many people present to emergency departments for acute alcohol problems in NSW?

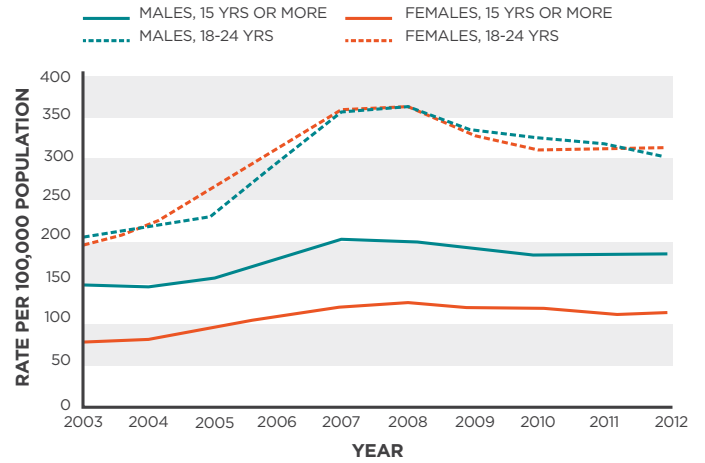
The rate of emergency department presentations in NSW for acute alcohol problems in people of **all ages** was:



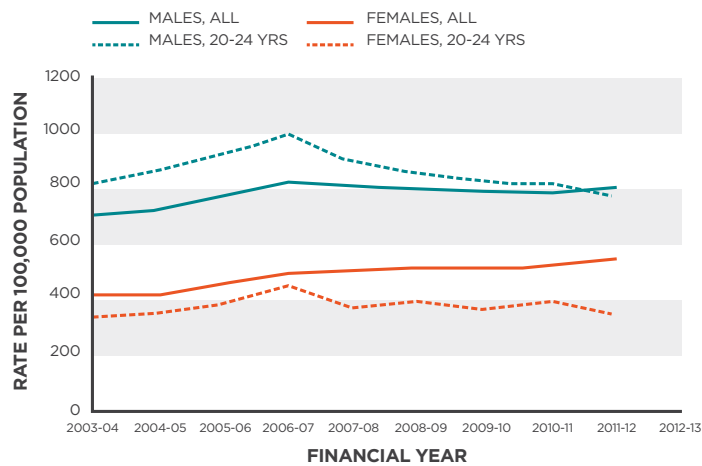
In people aged **18-24 years**, the rate was:



Rates among **18-24 year olds** showed signs of decline since 2008.



Note: Includes data from 39 public hospitals that reported complete data over the period.



5. How many hospitalisations in NSW are attributable to the short and long term harms from alcohol use?

Since 2003, the rates of hospitalisation attributable to alcohol have steadily increased for all ages, however the rates are showing signs of decline in 18-24 year olds since 2006-07.

Harmful alcohol use can lead to hospitalisation for both acute and long term conditions. Hospitalisations attributable to alcohol include cancers, heart disease, stroke, pancreatitis, alcohol-dependence, road traffic accidents, falls, drowning, self-harm and violence.

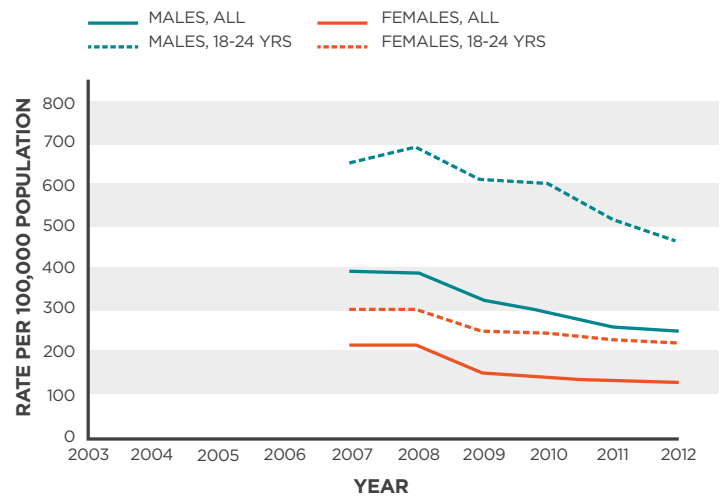


"Harmful use of alcohol is a major contributor to violence. The links between alcohol and violence are complex, yet studies across the world show that alcohol use commonly precedes aggressive behaviour, and that harmful drinking is associated with being both a perpetrator and a victim of violence." - The World Health Organisation (2009)

6. How many triple zero ambulance calls are made for incidents of assault* in metropolitan Sydney?

The rate in males was around double the rate in females. Between 2008 and 2012, the rate per 100,000 population of triple zero ambulance calls in metropolitan Sydney for assault decreased by 36% in males and 38% in females of all ages.

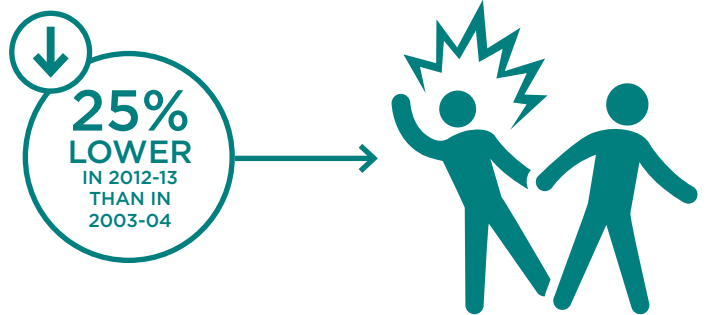
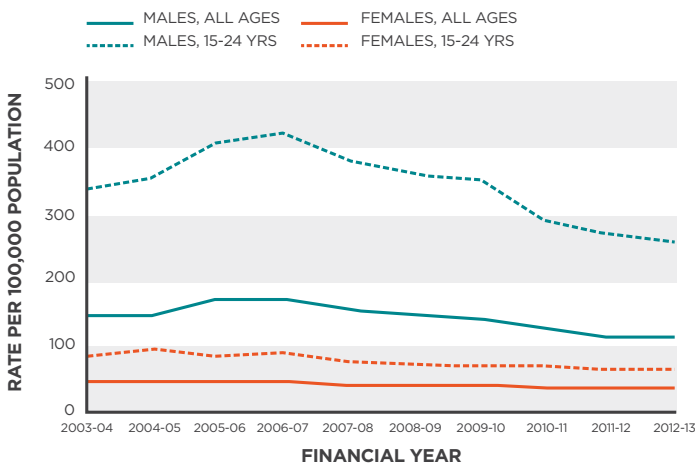
In the same period the rate in **18-24 year olds** declined by:



7. How many people require hospitalisation as a result of assault in NSW?

The rate of interpersonal violence* hospitalisations in 15-24 year old males were around four times that of females in the same age group.

The rate of hospitalisations in NSW caused by interpersonal violence in males aged **15-24 years** was:

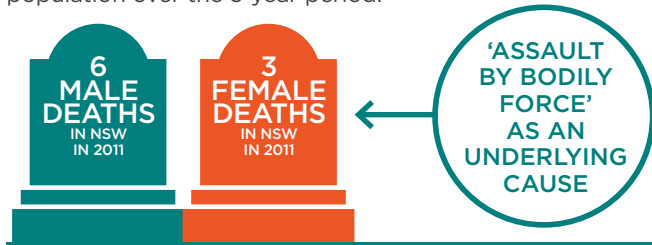


8. How many deaths are there in NSW from physical assault?

In NSW in 2011, there were 6 deaths in males and 3 in females of all ages with injury due to 'assault by bodily force' as an underlying cause. This compares to an annual average of 8 deaths in males and 1 in females between 2003 and 2010.

In males, the rate of death decreased between 2003 and 2008 from 3.0 to 1.7 per million population.

The rate of deaths in females varied from 0 to 1.5 per million population over the 9 year period.



*The alcohol status of a patient or perpetrator is not available in the measures relating to violence/assault.

Key findings:**Alcohol is linked to injury due to violence and a culture of violence.**

Source: whqlibdoc.who.int/publications/2009/9789241598408_eng.pdf

It is linked to immediate and life-time harms to self and others. Immediate harms include injury, poisoning, violence and self-harm. Life-time harms include heart disease, cancer, diabetes, liver disease, obesity, mental illness and harm to unborn babies.

Source: www.nhmrc.gov.au/guidelines/publications/ds10

The most recent data shows 4.9% of poor health in Australian males is attributable to alcohol.

Source: www.aihw.gov.au/publication-detail/?id=6442467990

1. How many people in NSW drink at levels that pose a lifetime risk to their health?

Source: www.healthstats.nsw.gov.au

Note:
The proportion of adults who consume more than two standard drinks on a day when they consumed alcohol is a measure for monitoring lifetime risk of harm from alcohol as defined by Guideline 1 of the 2009 National Health and Medical Research Council (NHMRC) Guidelines. A standard drink is equal to one middy of full-strength beer, one schooner of light beer, one small glass of wine, or one pub-sized nip of spirits.

2. How many people in NSW drink at very high levels on a single occasion?

Source: New South Wales Population Health Survey (SAPHaRI). Centre for Epidemiology and Evidence, NSW Ministry of Health.

Note:
Data for 2003, 2004 and 2010 were not available and were linearly interpolated from surrounding years.

3. How many school students drink alcohol in NSW?

Source: www.health.nsw.gov.au/surveys/student/Pages/hss_11

4. How many people present to emergency departments for acute alcohol problems in NSW?

Source: www.healthstats.nsw.gov.au

Note:
The 'acute alcohol problem' diagnosis includes alcohol intoxication, poisoning, dependence, withdrawal, elevated blood alcohol reading or medico-legal blood alcohol or drug test. These data represent presentations where an acute alcohol problem has been assigned as the primary diagnosis and does not capture presentations where alcohol may be an associated factor but not the primary diagnosis. Data includes 39 hospitals that have contributed data to the NSW Emergency Department Data collection continuously over the entire period reported.

5. How many hospitalisations in NSW are attributable to the short and long term harms from alcohol use?

Source: www.healthstats.nsw.gov.au

Note:
Data is not available for the 2012-13 financial year.

6. How many triple zero ambulance calls are made for incidents of assault* in metropolitan Sydney?

Source: New South Wales Ambulance surveillance system and ABS population estimates (SAPHaRI). Centre for Epidemiology and Evidence, NSW Ministry of Health.

Note:
The data represents calls taken by the Sydney Division of NSW Ambulance only. There may be multiple ambulance triple zero calls for a single incident. 'Overdose, poisoning or ingestion of substances' categorised calls include incidents where intentional or unintentional use or ingestion of alcohol or other drugs (including illicit drugs) is involved. Data not available prior to 2007.

7. How many people require hospitalisation as a result of assault in NSW?

Source: NSW Admitted Patient Data Collection and ABS population estimates (SAPHaRI). Centre for Epidemiology and Evidence, NSW Ministry of Health.

Note:
Figures are based on where a person resides, not where they are treated. All NSW public hospitals, public psychiatric hospitals, public multi-purpose services, private hospitals and private day procedure centres in NSW report to the NSW Admitted Patient Data Collection.

8. How many deaths are there in NSW from physical assault?

Source: www.abs.gov.au/ausstats/abs@.nsf/mf/3303.0/

Note:
The indicator includes deaths with an underlying cause of 'assault by bodily force' (ICD-10 code Y04). Crude rates are shown. It is not possible to distinguish between domestic or non-domestic assaults. Small counts may have been randomly altered by the ABS to protect confidentiality.