

At A Glance 2016

Excessive Alcohol Use

Preventing a Leading Risk for Death, Disease, and Injury



Excessive alcohol use is responsible for 88,000 deaths in the United States each year. It also accounts for 1 of 10 deaths among working-age adults and shortens the lives of those who die by an average of 30 years. Excessive drinking includes binge drinking, heavy drinking, and any alcohol use by pregnant women or anyone younger than 21.

In 2010, excessive alcohol use cost the US economy \$249 billion, or \$2.05 a drink, and \$2 of every \$5 of these costs were paid by the public. Binge drinking is responsible for over half the deaths and three-quarters of the costs due to excessive alcohol use. Ninety percent of adults who are excessive drinkers binge drink, and 90% of the alcohol consumed by youth is consumed while binge drinking.

The Centers for Disease Control and Prevention (CDC) is at the forefront of the nation's efforts to prevent excessive alcohol use and related harms in states and communities.

Binge drinking is defined as consuming 4 or more drinks on an occasion for a woman or 5 or more drinks on an occasion for a man.

Heavy drinking is defined as consuming 8 or more drinks per week for a woman or 15 or more drinks per week for a man.

Public Health Problem

Binge Drinking: The Most Common Form of Excessive Alcohol Use

Binge drinking is the most common pattern of excessive alcohol use in the United States. More than 1 of 6 US adults, or 38 million people, are binge drinkers, and they binge an average of four times a month. In addition,

- ◆ Binge drinkers consume an average of 8 drinks when they binge, which far exceeds the threshold that defines this health risk behavior.
- ◆ Nine of 10 adults who binge drink are not alcohol dependent (alcoholics).

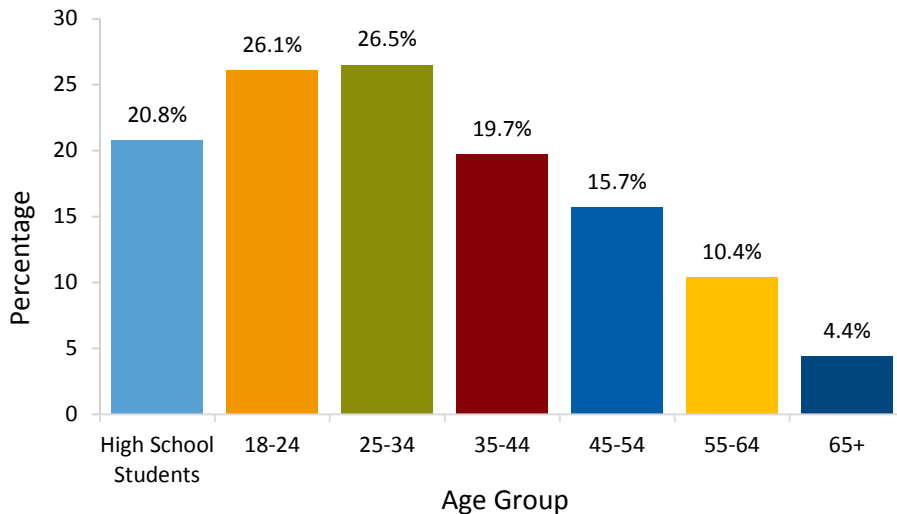
Fast Facts

- ◆ Excessive alcohol use accounts for 1 of 10 deaths among working-age adults in the United States.
- ◆ 90% of adults who are excessive drinkers binge drink, and 90% of the alcohol consumed by youth is consumed while binge drinking.
- ◆ 9 of 10 adults who binge drink are not alcohol dependent.
- ◆ Effective strategies for preventing excessive drinking are available but underused.
- ◆ CDC contributes to the prevention of excessive alcohol use by improving public health surveillance, building state and local capacity in alcohol epidemiology, and supporting evidence-based prevention strategies.



- ◆ Binge drinking is more common among men, people aged 18 to 34 years, whites, and those with annual household incomes of \$75,000 or more.

Percentage of People Who Reported Binge Drinking in the Past 30 Days, by Age Group, United States, 2013



Note: High school students are defined as those in grades 9-12.

Sources: CDC. Youth Risk Behavior Surveillance System and Behavioral Risk Factor Surveillance System, 2013.

The Dangers of Drinking Too Much

Excessive alcohol use places drinkers, their families, and their communities at risk for many harmful health effects, including

- ◆ **Chronic conditions.** Over time, excessive drinking can lead to high blood pressure, various cancers, heart disease, stroke, and liver disease.
- ◆ **Sexual risk behaviors.** Excessive drinking increases sexual risk behaviors, which can result in unintended pregnancy, HIV infection, and other sexually transmitted diseases.
- ◆ **Motor vehicle crashes.** Excessive drinking can lead to motor vehicle crashes, resulting in injuries and deaths. Binge drinkers are responsible for most of the alcohol-impaired driving episodes involving US adults.
- ◆ **Violence and injuries.** Excessive alcohol use can lead to falls, drowning, homicide, suicide, intimate partner violence, and sexual assault.
- ◆ **Fetal alcohol spectrum disorders.** Any alcohol use by a pregnant woman can harm a developing fetus, resulting in physical, behavioral, and learning problems later in life.

“Excessive alcohol use kills many people in the prime of their lives and is a huge drain on the US economy. We need to work together to implement scientifically proven public health strategies to reduce this tragic loss of life and the social and economic costs that are related to it.”

— Ursula Bauer, PhD, MPH
Director of CDC’s National Center for Chronic Disease Prevention and Health Promotion



CDC's Response

The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) works in four key areas or domains: epidemiology and surveillance, environmental approaches, health care system interventions, and community programs linked to clinical services. This comprehensive approach supports healthy choices and behaviors, makes healthier options more available, and helps Americans better manage their health.

CDC works with partners—such as public health agencies, other federal agencies, academia, and community organizations—to prevent excessive alcohol use and related harms. With \$3 million in FY 2016 funding, CDC's Excessive Alcohol Use Prevention Team supports these efforts by focusing its activities in two of NCCDPHP's domains: epidemiology and surveillance and environmental approaches.

Epidemiology and Surveillance

Improving Surveillance

CDC uses surveys such as the Behavioral Risk Factor Surveillance System (BRFSS) and the Youth Risk Behavior Surveillance System (YRBSS) to collect data on excessive alcohol use, including binge and underage drinking. In particular, CDC measures how often binge drinking occurs, the number of drinks consumed per binge drinking episode, and which populations report this behavior. By collecting these data, CDC can provide states and communities with the evidence to support the implementation of population-level public health strategies to reduce excessive drinking.

CDC developed and is using the Alcohol-Related Disease Impact (ARDI) application to provide state and national estimates of deaths and years of potential life lost from excessive alcohol use. This information helps states and communities plan, implement, and evaluate evidence-based strategies to prevent excessive drinking.

Reducing the Number of Bars in Atlanta's Buckhead Neighborhood Cut Violent Crime

Reducing the number and concentration of bars, restaurants, and other on-premises alcohol retailers in the Buckhead neighborhood of Atlanta significantly reduced violent crime. Researchers compared changes in exposure to alcohol outlets and violent crime, by census block in the Buckhead area of Atlanta, with those in the Midtown and Downtown neighborhoods from 1997-2002 and 2003-2007. They found that a 3% reduction in Buckhead bars between these two time periods was associated with a 2-fold greater reduction in exposure to violent crime than was experienced in the other Atlanta neighborhoods, even after taking into account other differences between these communities.

Community Guide Strategies to Prevent Excessive Alcohol Use

On the basis of strong scientific evidence, the Community Preventive Services Task Force recommends the following strategies to prevent excessive alcohol use and related harms:

- ◆ Increase alcohol excise taxes.
- ◆ Regulate alcohol outlet density, which is the number of places that sell alcohol in a defined geographic area.
- ◆ Hold retailers accountable for harms resulting from illegally serving or selling alcohol (commercial host or "dram shop" liability).
- ◆ Maintain existing government controls over alcohol sales (avoiding privatization).
- ◆ Maintain limits on the days and hours when alcohol can be sold.
- ◆ Use electronic devices (e.g., computers, telephones, mobile devices) to deliver screening and brief interventions for excessive alcohol use.
- ◆ Enforce laws that prohibit alcohol sales to minors.



CDC is also developing guidelines for measuring alcohol outlet density (i.e., the number and concentration of retail alcohol outlets in a defined geographic area), which is a risk factor for excessive alcohol consumption and related harms (e.g., violence). These guidelines will help state and local health agencies assess this environmental risk factor and guide their efforts to regulate it.

In addition, CDC works to monitor and reduce youth exposure to alcohol advertising. Reports have shown that alcohol advertising has increased on television and the Internet and that compliance with the industry's voluntary standards on the placement of alcohol advertising could be improved.

Supporting State and Local Health Agencies

CDC supports alcohol epidemiology capacity in four states to conduct public health surveillance on excessive alcohol use and guide state and community efforts to prevent this behavior. In addition, CDC provides technical assistance to state and local epidemiologists and other public health officials and works with Council of State and Territorial Epidemiologists (CSTE) subcommittees to prevent excessive drinking. CDC also has helped states and cities add binge drinking questions to their BRFSS surveys.

Environmental Approaches

Advancing the Science

CDC provides subject matter expertise to assess public health interventions and policies designed to prevent excessive alcohol use and related harms.

Translating Recommendations into Public Health Practice

CDC's Prevention Status Reports (PSRs) highlight the status of evidence-based policies and practices for preventing or reducing key public health problems, including excessive alcohol use, in all 50 states and the District of Columbia.

Providing Public Health Leadership

CDC collaborates with other federal agencies to support national public health activities to prevent excessive alcohol use. For example, CDC works with the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the Substance Abuse and Mental Health Services Administration (SAMHSA), as well as other federal agencies on the Interagency Coordinating Committee for the Prevention of Underage Drinking (ICCPUD), which was established by Congress.

CDC also collaborates with many national groups to prevent excessive drinking, including the Community Anti-Drug Coalitions of America (CADCA). CDC has worked with CADCA to help community coalitions implement Community Guide strategies to prevent excessive drinking.

Future Directions

CDC will continue to support the implementation of recommended strategies to prevent excessive alcohol use by

- ◆ Improving public health surveillance on excessive alcohol use, particularly binge and underage drinking, and related harms.
- ◆ Building state and local public health capacity in alcohol epidemiology.
- ◆ Developing translation tools that guide public health practice.
- ◆ Monitoring and promoting reduction of youth exposure to alcohol marketing, a key risk factor for underage drinking.

Vital signs™
January 2015

Alcohol Poisoning Deaths

A deadly consequence of binge drinking

6 a day
An average of 6 people die of alcohol poisoning each day in the US.

3 in 4
76% of alcohol poisoning deaths are among adults ages 35 to 64.

76%
About 76% of those who die from alcohol poisoning are men.

On average, 6 people died every day from alcohol poisoning in the US from 2010 to 2012. Alcohol poisoning is caused by drinking large quantities of alcohol in a short period of time. Very high levels of alcohol in the body can shut down critical areas of the brain that control breathing, heart rate, and body temperature, resulting in death. Alcohol poisoning deaths affect people of all ages but are most common among middle-aged adults and men.

States and communities can take steps to reduce alcohol poisoning deaths by preventing binge drinking, including:

- Partnering with police, community groups, health departments, and doctors, nurses, and other health care providers to reduce binge drinking and related harms.
- Tracking the role of alcohol in injuries and deaths.
- Supporting proven programs and policies that decrease binge drinking. States with stronger alcohol policies have less binge drinking.

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Want to learn more? Visit www.cdc.gov/vitalsigns

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For more information, contact

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