Re: Ireland’s Public Health (Alcohol) Bill (TRIS Notification 2018/22/IRL)

Introduction

Alcohol Action Ireland is a non-governmental agency who act as an expert independent voice for policy change on alcohol-related issues, advocating to reduce levels of alcohol harm in Ireland and improve public health, safety and wellbeing.

We campaign for the burden of alcohol harm to be lifted from the individual, community and State, and have a strong track record in advocacy, campaigning and policy research.

Our work involves providing information on alcohol-related issues, creating awareness of alcohol-related harm and offering public policy solutions with the potential to reduce that harm.

Our founding objective was to ensure that the misuse of alcohol in Ireland be addressed as a public health issue and that a comprehensive policy framework be established to encourage a ‘whole-of-population’ reduction in alcohol consumption and so lessen the impact of alcohol related harms.

Alcohol in Ireland

Alcohol consumption in Ireland almost trebled between 1960 and 2001, rising from 4.9 litres of pure alcohol per person aged 15 and over to 14.3 litres. It decreased the years that followed as an increase in excise duty, followed by the recession, impacted on alcohol’s affordability.

However, alcohol consumption remains at very high levels (11 litres in 2017) and, as the economy recovers, and alcohol retail costs remain low, the underlying trend is upward.
Heavy Episodic Drinking is also a significant concern, as ‘binge drinking’, which is a major driver of alcohol harm, is commonplace in Ireland. Binge drinking is defined by health experts, including the World Health Organisation (WHO), as consuming six or more standard drinks in one sitting, which is the equivalent of three or more pints of beer or six or more pub measures of spirits. In 2017, 39% of those aged 15 and older binge drink on a regular basis. This was the highest rate in the EU and more than double the EU average.

High levels of alcohol consumption have major public health implications in Ireland, including three deaths every day from alcohol harm. Beyond the serious health consequences, the harmful use of alcohol brings significant social and economic losses to individuals and society in Ireland:

A brief overview of the economic and social impact of high risk alcohol consumption and related harms in Ireland -

- The annual cost of alcohol related illness and harm costs the Irish exchequer €2.35bn.
- Today, 10% of public beds in our hospitals are occupied by alcohol related patients.
- 1.4 million people in Ireland have a harmful relationship with alcohol.
- The cost of excessive alcohol consumption is a major drain on current public expenditure: Health, Justice, Social Protection; it is estimated that for every €100m of public monies spent, €4.6m will be deployed to mitigate the harmful outcomes of alcohol consumption.
- 283,866 work days were lost to alcohol related absenteeism in 2016.
- An estimated 60,000 teenagers each year will begin, all too early, their drinking careers.
- One third of 15 years old children in Ireland have been drunk in their lifetime.
- Alcohol is a factor in half of all suicides in Ireland.
- The life of one in every eleven children is negatively impacted by parental drinking.
- The total estimated cost of Alcohol Harm to Others (2018) is €863m:
  - Cost of caring for the known drinker
  - Out-of-Pocket Expense - cost burden of specific harms from other drinkers
  - Cost of seeking help services
  - Cost of drinking by others in the workplace.

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2 http://www.hrb.ie/fileadmin/publications_files/Alcohol_in_Ireland_consumption_harm_cost_and_policy_response.pdf
3 http://www.hrb.ie/fileadmin/publications_files/Alcohol_in_Ireland_consumption_harm_cost_and_policy_response.pdf
4 European School Survey Project on Alcohol and Other Drugs (ESPAD) 2015
Ireland’s Public Health (Alcohol) Bill, 2015 – Oireachtas/Parliamentary progress and EU Institutional procedure to date.

The Bill was approved by the Irish Government in October 2013 and introduced to the Irish Parliament (Oireachtas) in December 2015. The proposed legislation was initially notified to the EU Commission, in accordance to Directive (EU) 2015/1535 in January 2016.

The Bill completed all stages in the Upper House (Seanad Éireann) in December 2017. The amended Bill, as passed was re-notified to the EU Commission in January 2018, to highlight the legislators’ amendments namely three additional specifications to labelling, advertising and broadcast watershed.

The Lower House (Dáil Éireann) began its parliamentary debate and scrutiny of the Bill in February 2018 and completed Committee Stage in June 2018. During Committee Stage scrutiny, Section 12 (10) (a) of the Bill was amended to delete a determination that an area (one third) of the printed material (for alcohol product labels) be given over to evidence-based health warnings. The absence of this precise provision will likely be noted by the EU Commission who had expressed some concern about the proportionality of such a provision.

The Bill now awaits commencement of Report and Final Stage, which is expected to be early in parliament’s Autumn Session, 2018.

The necessity to inform the public of the direct link between alcohol and fatal cancers.

Alcohol is a Group 1 carcinogen, classified by the International Agency for Research on Cancer (IARC) since 1988. Group 1 is when there is convincing evidence that a substance causes cancer in human and is the highest level of certainty that a substance causes cancer. Alcohol breaks down in the body into a toxic chemical called acetaldehyde. It impairs the body’s ability to absorb important nutrients and also raises levels of oestrogen in the body which can in turn increase the risk of breast cancer.

The importance of informing the public of the link between alcohol and fatal cancer has been recognised in the updated European Code against Cancer, co-developed by the IARC and the European Commission:

*If you drink alcohol of any type, limit your intake. Not drinking alcohol is better for cancer prevention.*

‘The European Code Against Cancer focuses on actions that individual citizens can take to help prevent cancer.

Successful cancer prevention requires these individual actions to be supported by governmental policies and actions.’ European Code against Cancer

Ireland’s experience with alcohol related cancer incidence

Between 2001 and 2010, there were 21,371 invasive cancers diagnosed in men in sites where alcohol is known to play a causative role; 4,585 were attributed to alcohol i.e. 21.5% of all cancers in those sites and 4.7% of all invasive male cancers.

Of the 4,585 alcohol-attributable cancers diagnosed in men, 64.5% were in the upper aero-digestive tract (lip, oral cavity, pharynx, larynx, oesophagus). Alcohol was considered responsible for 52.9% of male upper aero-digestive tract cancers, in contrast with 6% of colon cancers, 11.4% of rectal cancers and 7% of pancreatic. Alcohol played a causative role in 44.5% of male liver cancers.

Between 2001 and 2010, 39,555 invasive cancers were diagnosed in women in sites where alcohol is known to play a causative role; 4,593 were considered attributable to alcohol i.e. 11.6% of all the cancers in these specific sites and 4.2% of all female invasive cancers.

Among females, upper aero-digestive tract cancers were also most impacted, with 866 (35.2%) of the 2,460 cancers of the upper aero-digestive tract attributable to alcohol. Only 3.6% of colon, 7% of rectal and 3% of pancreatic cancers were attributed to alcohol.

However, 12.2% of breast cancers, 305 cases annually, were attributed to alcohol. This accounted for two-thirds of all cancer diagnoses attributable to alcohol in females. 6

In Ireland every year 900 people are diagnosed with alcohol-related cancers, while 500 people die for these alcohol related cancers. 7

There are approximately 9,000 cancer deaths annually in Ireland. 8

Conclusion

In recognition of the significant difficulties Ireland has, and continues to experience, with alcohol misuse and the impact of alcohol related harms, plus the continued absence of an EU Alcohol Strategy and EU Health Commissioner, Vytenis Andriukaitis’ strong support for action on public health at Member-State level, we strongly encourage the European Commission to facilitate the initiative proposed by Ireland that in principle seeks to protect public health.

The lives and wellbeing of future generations rely on these progressive measures being adopted to reduce our alcohol consumption now and that, as a nation, we can begin what will be a generational opportunity to de-normalise our harmful relationship with alcohol.

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6 Laffoy M., Mc Carthy T., Mullen L., Byrne D., Martin J., Cancer Incidence and Mortality due to Alcohol: An Analysis of 10-Year Data; Ir Med J. 2013; 106 (10) 294-297.
7 Health Service Executive’s ‘AskaboutAlcohol’ www.askaboutalcohol.ie