Health Select Committee Inquiry into the Government’s Alcohol Strategy

Consultation Response by Cancer Research UK

Cancer Research UK is the world’s largest independent organisation dedicated to cancer research. In 2010/11 we spent £332 million on research. Our vision is that ‘Together we will beat cancer’. We carry out world-class research to improve our understanding of cancer and to find out how to prevent, diagnose and treat different types of the disease. Around 300,000 people are diagnosed with cancer in the UK every year. And every year more than 150,000 people die from the disease.

Summary

- Cancer Research UK recognises the Government’s Alcohol Strategy as a step towards reducing alcohol harm.

- Government policy should focus on the health concerns rather than the social consequences of alcohol consumption. In particular there should be more recognition of the impact of alcohol on cancer risk.

- A minimum price is an effective measure to reduce alcohol consumption.

- A new approach is needed to tackle advertising, marketing and promotion of alcohol particularly where it is accessible to children.

- Improved awareness and increased information is also a necessary part of changing the culture towards alcohol.

Overview

1. Cancer Research UK welcomed the Government’s Alcohol Strategy as an attempt to reduce alcohol consumption and harm. However the focus on binge drinking and the social consequences of alcohol consumption can lead to a misplaced emphasis. An effective strategy should prioritise the long term health implications of alcohol consumption and have at its heart a goal of reducing the number of units consumed per drinker.

2. The Government’s strategy introduces a number of measures which could reduce alcohol related problems. However, we believe that it lacks a strategic approach to reduce demand for alcohol. An effective strategy should include measures to reduce affordability, reduce the promotion of alcohol and increase awareness of the harms of alcohol.

Alcohol and Cancer Risk

3. Government notes that current levels of alcohol consumption are unprecedented. 28% of men and 19% of women reported drinking above recommended guidelines. Therefore Government should focus its efforts on reducing the level of consumption at the national level. A sustained reduction in alcohol consumption can provide significant benefits to individuals’ health and can help reduce the incidence of cancer.
4. Awareness about the impact alcohol has on cancer risk is limited. But alcohol is one of the most important modifiable risks for cancer after smoking and obesity. Alcohol can cause seven cancers - mouth, pharyngeal, laryngeal, oesophageal, breast, bowel and liver. In 2010, 12,500 cases of cancer in the UK (4%) were attributable to alcohol.2 Alcohol is also estimated to account for around 6% of all cancer deaths in the UK, about 9000 deaths per year.3

5. Cancer risk is associated with total alcohol consumed over time. The current balance of evidence does not demonstrate an increased cancer risk from binge drinking, versus the equivalent consumption of alcohol over the course of a week. However, the more alcohol individuals consume the greater their risk of cancer.4

6. Breast cancer risk is also particularly affected by alcohol intake. Alcohol is the second biggest lifestyle-related cause of UK breast cancers after excessive weight. Alcohol accounts for around 6% of breast cancer cases in the UK, over 3000 cases each year.2 Having one small alcoholic drink a day is linked with a modest increase in a woman’s risk of developing breast cancer.5 And because a lot of women in the UK drink at these levels, that could translate into many additional cases of breast cancer overall.

7. Alcohol was also associated with almost 4,600 cases of bowel cancer in 2010. In addition, 30% of oral cancers and 20% of oesophageal cancers are also attributable to alcohol.6 As little as three units a day can increase the risk of these cancers.6 This is equivalent to a large glass of wine or a pint of premium lager.

8. The Government acknowledged that lifestyle choices can affect cancer risk in their cancer strategy Improving Outcomes: A Strategy for Cancer.7 A strategy aimed at reducing alcohol consumption should be assessed within the wider context of cancer prevention.

Pricing

9. The real price of alcohol has fallen as incomes have risen. The rise in affordability has been associated with increased consumption and increased alcohol harm.8 Therefore we support actions to reduce the affordability of alcohol. The introduction of a minimum unit price will help to reduce the harm caused by rising affordability of alcohol and in the particular limit the impact of low cost alcohol. Such products have a disproportionate impact as they tend to be drunk by harmful drinkers (those drinking above the recommended weekly guidance), binge drinkers and young drinkers.6

10. The research by Sheffield University demonstrates that a minimum unit price of 50p could lead to a 6.7% reduction in alcohol consumption. It also shows that at this price it could save over 3,000 lives after 10 years.9 It is important to acknowledge that the link between a minimum price and harm reduction is non-linear. The impact of 50p minimum price is more than double that of a 40p minimum price.7 A minimum price should be set at a level where it can best reduce harm. The current evidence suggests that a minimum price would be effective if set at 50 pence per unit.

11. A minimum unit price should include an up-rating mechanism so that it remains effective over time. An automatic mechanism that adjusts the price annually taking into account growth in earnings should be included. But there should also be a regular review of the price to ensure that other factors do not require a substantial change in the minimum price.
12. We also support the ban on multi buy discounts. Evidence suggests that a well-designed ban could reduce consumption by 2.8%.7

Marketing and Promotion

13. The Government acknowledges that there is a link between the marketing of alcohol products and their consumption. However we are disappointed by their plans to limit the impact of alcohol marketing. A new approach to the regulating the promotion of alcohol is needed in order to reduce consumption and protect children and young people.

14. A focus on price alone will not be sufficient to change consumption patterns across the UK. The Government should acknowledge that the ubiquity of alcohol marketing influences the drinking culture in Britain. Alcohol marketing not only influences drinkers on which brand to choose but also influences drinkers to increase the quantity they drink.10 11 Alcohol promotion also normalises drinking and allows people to dismiss the long term health consequences.

15. Current controls are also ineffective at protecting young people. A number of studies have shown that alcohol marketing increases the likelihood that young people will start to use alcohol and will drink more if they are already consume alcohol.9 Recent evidence shows that primary school children’s exposure to alcohol brands is also high despite the current protections.12 Such influence could be a by-product of alcohol sponsorship of music and sporting events which have high appeal to children and young people.

16. The evidence from banning tobacco advertising does show that a comprehensive approach to marketing can reduce demand for a product.13 Therefore Government should restrict the content of alcohol advertisements and reduce the mediums in which they can be broadcast. Such an approach has been taken in France with the introduction of the ‘Loi Evin’.14 We recommend following this model and introducing comprehensive regulations to restrict the marketing and promotion of alcohol products.

Awareness and Health Campaigns

17. Raising awareness of the risk of alcohol consumption is also important for developing a culture change. Awareness of the long term health harms of regular alcohol consumption is low. 55% of people questioned in a YouGov poll believed alcohol is only harmful if a person regularly gets drunk or binge drinks.15 Moreover only 24% of respondents to Cancer Research UK’s perception of risk survey mentioned alcohol when asked about how to reduce their risk of developing some types of cancer.16 Therefore we believe that cancer should be consistently identified as a potential consequence of excessive alcohol consumption.

18. We support the inclusion of alcohol within the successful Change4Life brand. In particular the recent adverts launched in February 2012 highlighted the potential long term risks of regular consumption of alcohol at home. It is important that Government continue to support health campaigns such as Change4Life in order to increase awareness of the harms of excessive drinking at home. However we must acknowledge that Government spending in this field is miniscule compared to the spending by the alcohol industry on marketing.

19. We are also pleased that the Government wants to ensure that the majority of alcohol products have health warnings and health guidance. However they should ensure that this is applied to all alcohol products sold in the UK.

For further information please contact Cancer Research UK at publicaffairs@cancer.org.uk.
8 Jackson, R. Johnson, M., Campbell, F., Messina, L., Guillaume, L., Meier, P., Goyder, E., Chilcott, J. and Payne, N. (2010) Interventions on Control of Alcohol Price, Promotion and Availability for Prevention of Alcohol Use Disorders in Adults and Young People. School of Health and Related Research (ScHARR) University of Sheffield
12 Alcohol Concern Cymru, (2012) Making an Impression
14 LOI no 91-32 du 10 janvier 1991 relative à la lutte contre le tabagisme et l'alcoolisme
http://www.legifrance.gouv.fr/affichTexte.do?cidTexte=JORFTEXT000000344577&dateTexte=&categorieLien=id
15 Research commissioned by the Department of Health to coincide with the launch of the 2010 NHS campaign
http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/MediaCentre/Pressreleasesarchive/DH_111622