



ASAM

STATE OF THE ART

Course in Addiction Medicine

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Emerging Concerns and Priority Areas for NIAAA

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Abuse and Alcoholism



Alcohol – Unique From a Public Health Perspective

- Patterns of use vary considerably
- Health effects vary by patterns of use, gender, age, environment, and lifestyle factors

More than half of the population 18+ consumes alcohol each month (54.9% overall -- 59.1% of men and 51.0% of women)

Alcohol Use in the United States



85.6 percent
of people ages 18 and
older reported that they
drank alcohol at some
point in their lifetime.

Source: 2019 NSDUH

Learn more at
[RethinkingDrinking.niaaa.nih.gov](https://www.rethinkingdrinking.niaaa.nih.gov)



Binge Drinking in the United States



In 2019,
25.8 percent
of people ages 18 and
older reported that they
engaged in binge drinking
in the past month.

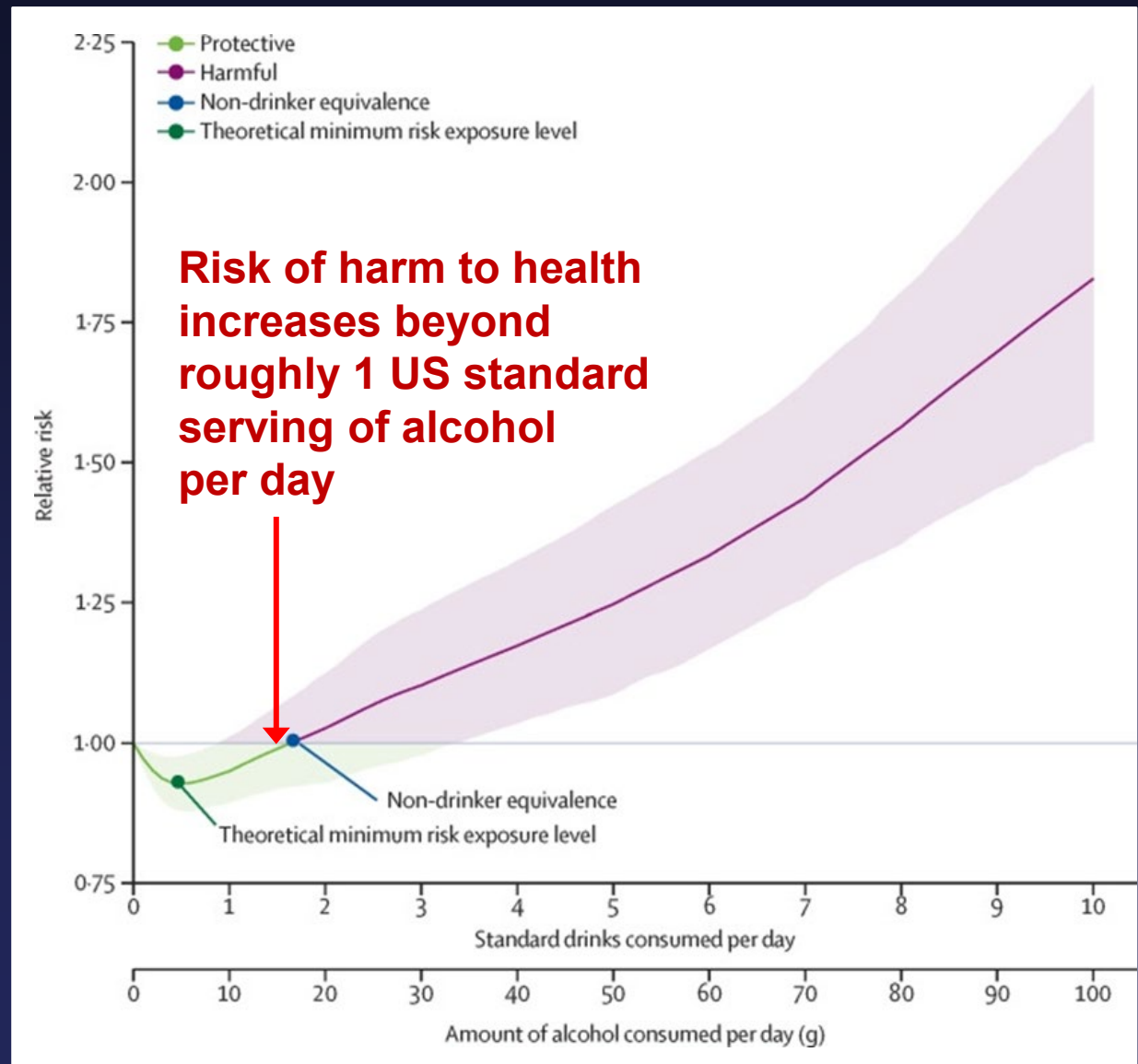
Source: 2019 NSDUH

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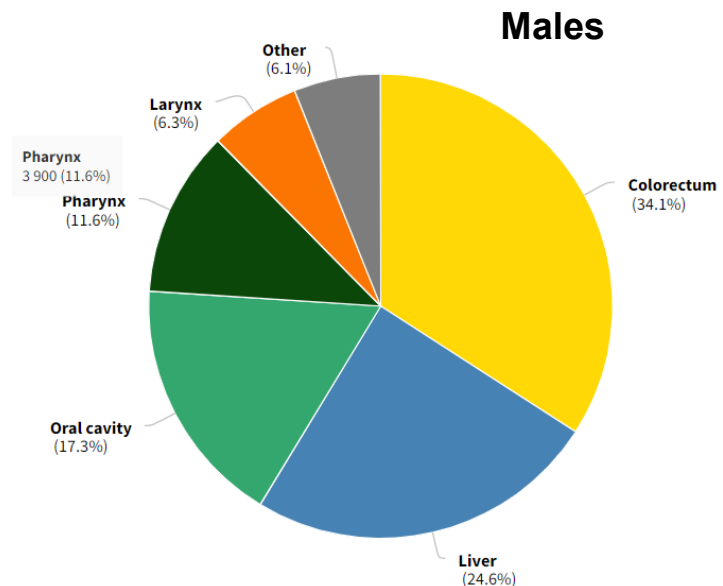
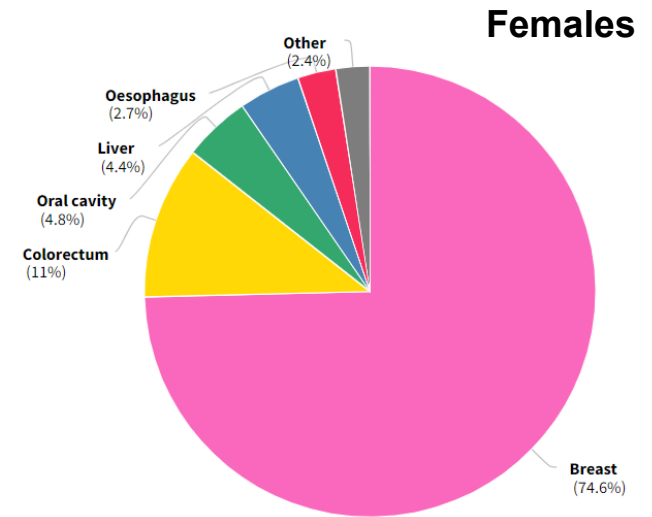
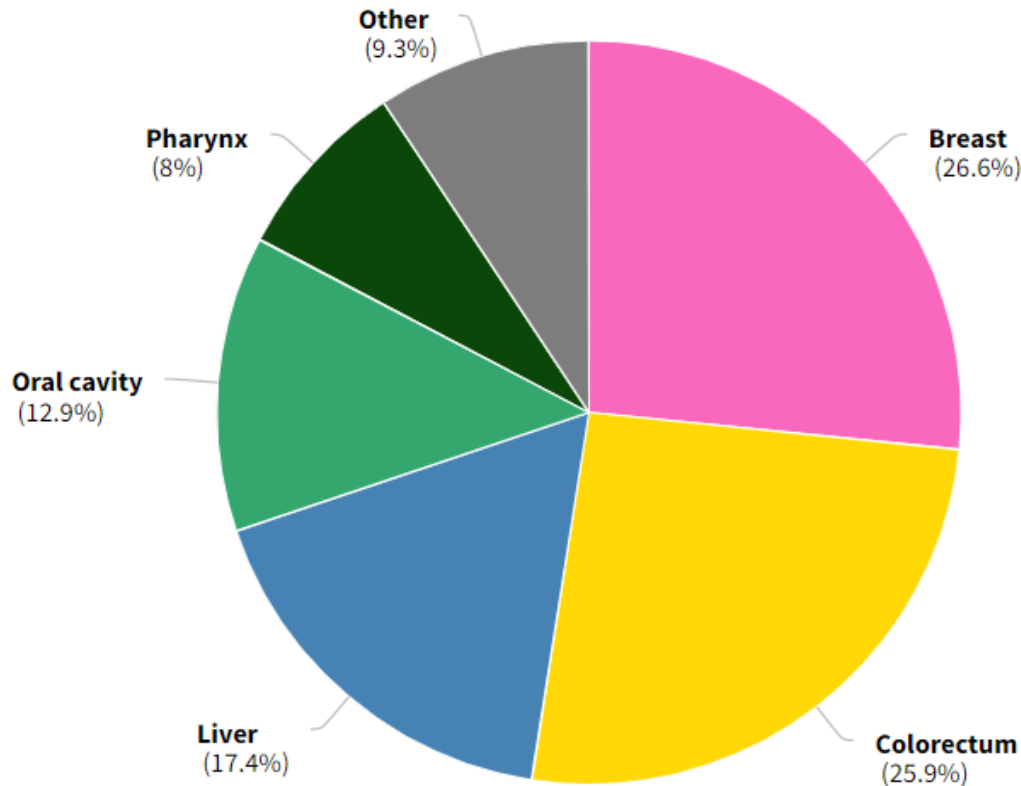


Recent Studies Suggest the Negative Health Effects of Alcohol Begin at Roughly 1 Drink Per Day

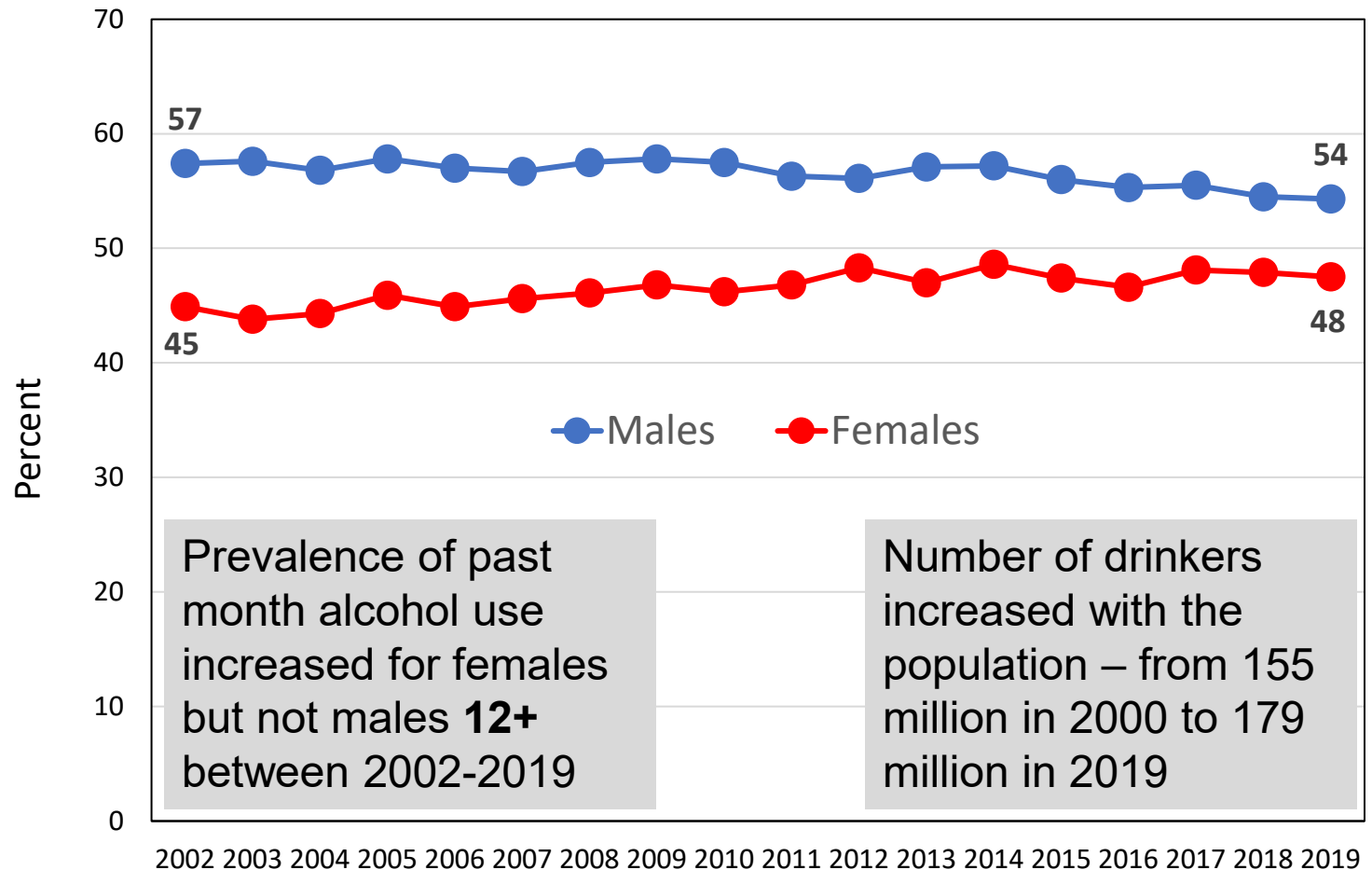
- Average daily alcohol consumption and health burden from 287 causes of death, 370 diseases and injuries, and 88 risk factors in 204 countries
- Overall risk of harm increases beyond 1 US drink per day
- It is possible small amounts lower the risk of certain health conditions (e.g., heart attack) but the net effect of alcohol on health appears to be negative after roughly 1 drink per day



53,000 new alcohol-related cancer cases in the US in 2020



Alcohol and Women



Studies Continue to Find Unique Health Risks for Women Who Drink

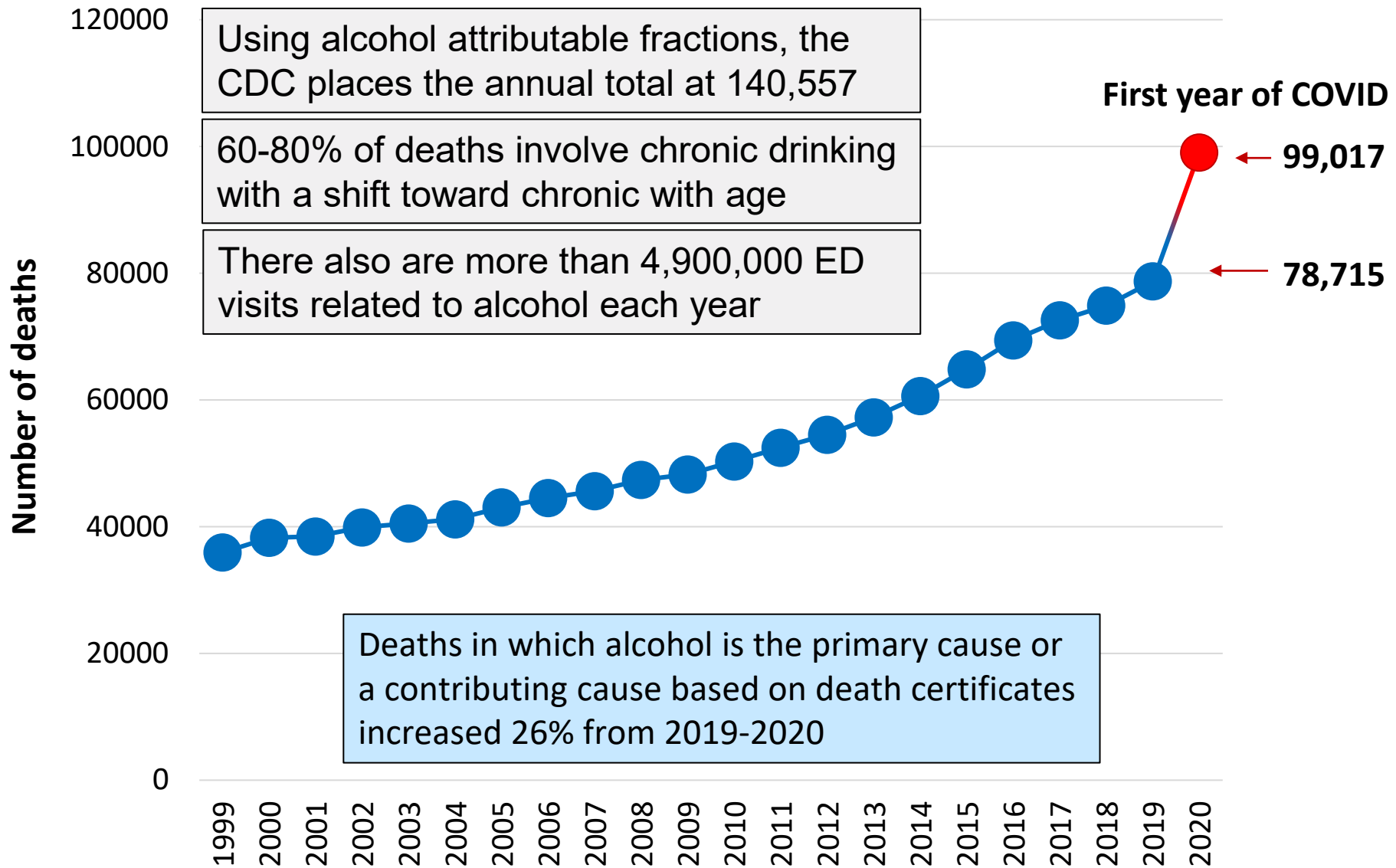
Studies suggest that women are more likely than men to experience a variety of alcohol-related harms at comparable doses, including:

- Hangovers (Vatsalya et al. 2018)
- Blackouts (Hingson et al., 2016)
- Liver disease (Guy and Peters, 2013)
- Brain atrophy (Ceylan-Isik et al., 2010)
- Cognitive deficits (Flannery et al., 2007)
- Cardiomyopathy (Fernández-Solà and Nicolás-Arfelis, 2002)
- Faster progression of AUD (Diehl et al., 2007)
- Certain cancers (Liu et al, 2015)
- Larger increases in alcohol-related ED visits, hospitalizations and death for women than men over past 20 years (White et al. 2020)

Women are less likely than men to receive treatment for AUD
(Gilbert et al., 2019)

Liu Y et al (2015) Womens Health (Lond) 11(1):65-77; Guy and Peters (2013). Gastroenterology & hepatology, 9(10), 633-9. Gilbert PA et al (2019) ACER; Vatsalya et al (2018) Addict Biol, 23(1):493-502. Ceylan-Isik et al (2010) Life sciences, 87(5-6),133-8. Fernandez-Solia and Nicolas-Arfelis (2002) J Gend Specif Med 5(1):41-7.

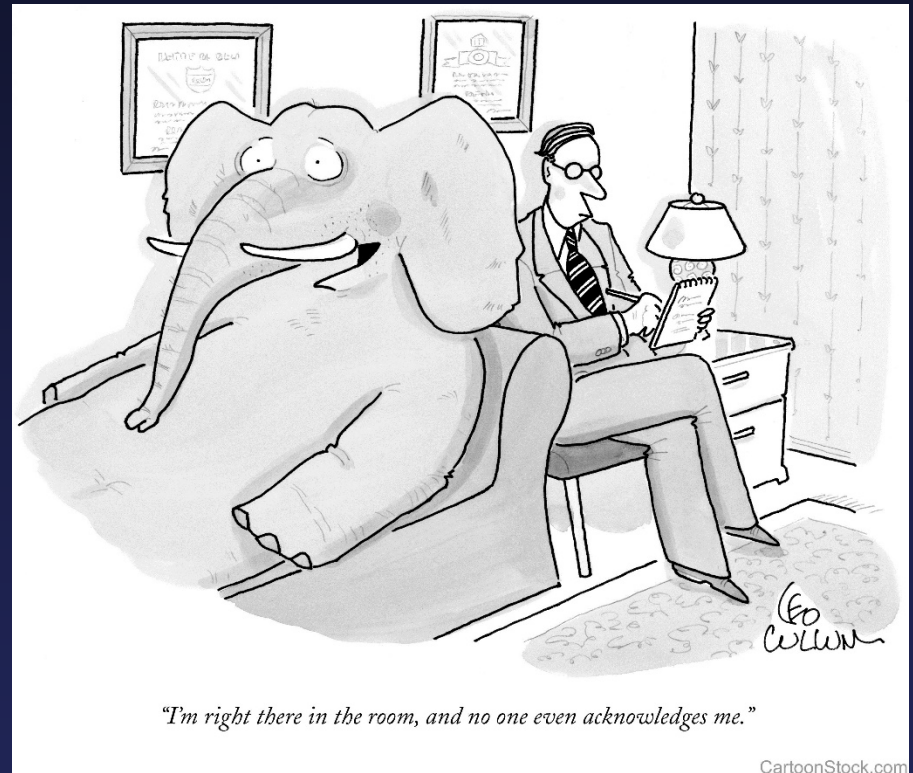
Alcohol-Related Deaths, 1999-2020



Alcohol and Mental Health – The Elephant in the Room

Alcohol misuse correlates with poor mental health

- Often precedes diagnoses of mental health conditions
- Commonly used in an effort to cope with symptoms
- In the end it makes the prognoses worse
- Similarly, mental health conditions complicate treatment for AUD



“I’m right here in the room and no one even acknowledges me.”

Sources: Centanni SW, Bedse G, Patel S, and Winder DG. 2019. Driving the Downward Spiral: Alcohol-Induced Dysregulation of Extended Amygdala Circuits and Negative Affect. *Alcohol Clin Exp Res*; Mäkelä P, Raitasalo K, and Wahlbeck K. 2015. Mental health and alcohol use: a cross-sectional study of the Finnish general population. *European Journal of Public Health*, 25(2): 225–231; Markou A, Kosten TR, and Koob GF. 1998. Neurobiological Similarities in Depression and Drug Dependence: A Self-Medication Hypothesis. *Neuropsychopharmacology*, 18: 135–174.

COVID-19 Pandemic Highlighted Issues Around Drinking to Cope

- Studies suggest around 1 in 4 people (23%) began drinking more during the pandemic while 1 in 4 (23%) drank less ([Acuff et al., 2022](#))
- Drinking to cope was a common reason for increasing consumption
- A longitudinal NIAAA-funded study found that, compared to right before the pandemic, people were 48% more likely to indicate they drank to forget their worries early in the pandemic ([Martinez et al., 2022](#))
 - The odds of drinking to cope were far higher when respondents also reported symptoms of depression and anxiety
- In another survey, 29% of respondents reported drinking more and the odds of increasing were higher for those with symptoms of anxiety or depression ([Capasso et al, 2021](#))
- Other studies suggest having psychological well-being impacted negatively by the pandemic is associated with more drinking ([Rodriguez et. al. 2020](#); [Grossman et al., 2020](#))
- Such findings are concerning given that drinking to cope increases the likelihood of developing AUD and related harms

Growing Up in a Home with Adult AUD

- 10.5% (7.5 million) kids grow up in a home with at least one parent with AUD
- Children of parents with AUD are at greater risk for depression, anxiety disorders, problems with cognitive and verbal skills, and abuse or neglect ([Lipari and Van Horn, 2017](#))
- **They are 4 times more likely than other children to develop an alcohol use disorder.**
- Relationship mediated by impact of AUD on parenting (e.g., lower involvement, poor parent-child communication, rule setting) ([Su et al., 2018](#))



Article

Adverse Childhood Experiences are Associated with High-Intensity Binge Drinking Behavior in Adulthood and Mediated by Psychiatric Disorders

Jeesun Jung[†], Daniel B. Rosoff[†], Christine Muench, Audrey Luo, Martha Longley, Jisoo Lee, Katrin Charlet, and Falk W. Lohoff^{*}

Conclusion: ACEs were associated with significantly increased odds of HIBD and the relationship may be mediated by psychiatric disorders.

Resilience as a Mediator between Adverse Childhood Experiences and Prescription Opioid Misuse among U.S. Adults

Zhi Wang, David K. Lohrmann, Anne Buu & Hsien-Chang Lin

To cite this article: Zhi Wang, David K. Lohrmann, Anne Buu & Hsien-Chang Lin (2021) Resilience as a Mediator between Adverse Childhood Experiences and Prescription Opioid Misuse among U.S. Adults, *Substance Use & Misuse*, 56:4, 484-492, DOI: [10.1080/10826084.2021.1879148](https://doi.org/10.1080/10826084.2021.1879148)

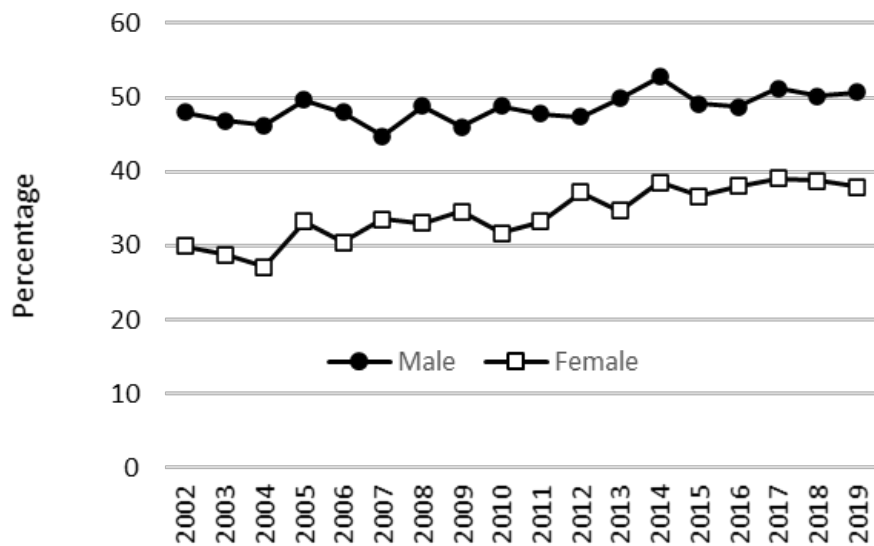
To link to this article: <https://doi.org/10.1080/10826084.2021.1879148>

“Studies have shown that resilience, defined as the adaptive well-being process of individuals after experiencing changes or stress, has psychological protective effects when facing adverse events... Previous research found that factors including social connections, religiosity, hardiness, and personal competence are linked to psychological resilience.. Positive experiences in childhood or adolescence may improve personal strengths and competencies that help facilitate remission of mental disorders in adulthood.. Resilience may also protect against adolescents’ risks of using substances..”

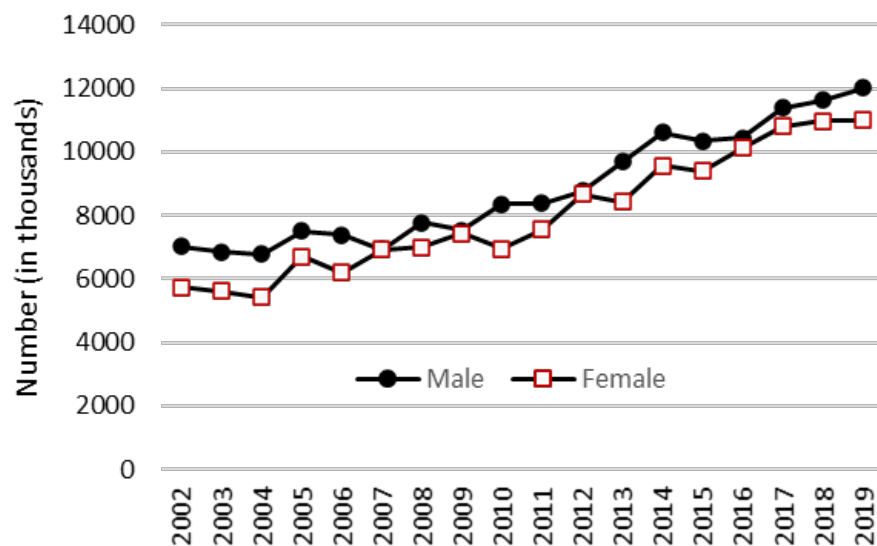
Rapidly Increasing Number of Drinkers and People With AUD in the Aging Population

- **Percentage** of people 65+ who drink alcohol each month increased 16% between 2002-2019 (from 38% to 44%), with larger increases for women
- Due to the increase in the size of population 65+ the **number** of drinkers actually increased 80% (from 12.4 to 23.0 million)
- Similarly, the **prevalence** of DSM-IV AUD among people 65+ grew from 1.1–1.9%, but the **number** of people with AUD more than doubled from 386,000 to 1 million

16% increase in prevalence of past month use

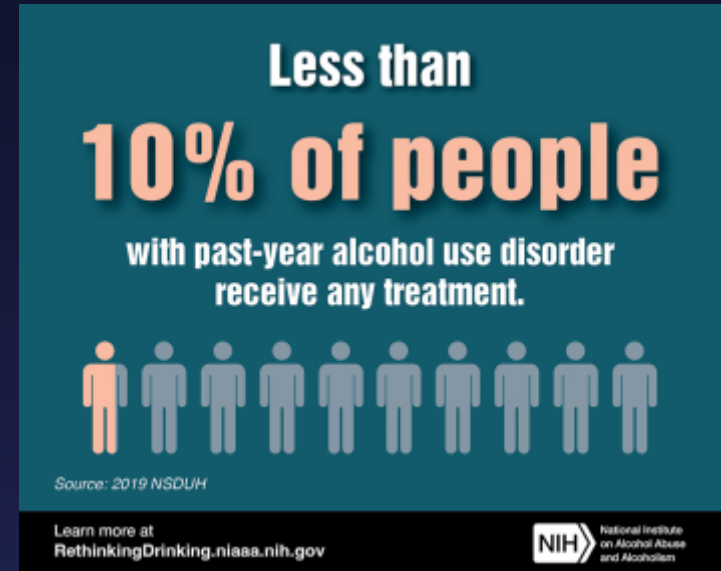


80% increase in the number of drinkers



Closing the Treatment Gap and Promoting Long-Term Recovery

- Only around 7.6% of people with AUD receive any care at all each year
- SBIRT can help close that gap but right now nearly 90% of people see a healthcare provider each year but only around 60% are asked a question about alcohol (most likely on an intake form) and very few are asked more questions, given advice, referred to further care ([Mintz et al, 2021](#))
- **One question reveals a lot** -- Adults who binge drink are more likely than drinkers who do not binge to report past-year suicidal ideation (6.3% vs 3.8%), episodes of major depression (9.2% vs 6.5%) and prescription pain medication misuse (6.2% vs 2.7%)
- **Promoting long-term recovery** -- Recovery is a process through which an individual pursues both remission from alcohol use disorder (AUD) and cessation from heavy drinking. Recovery means both remission from AUD and cessation from heavy drinking are achieved and maintained over time.

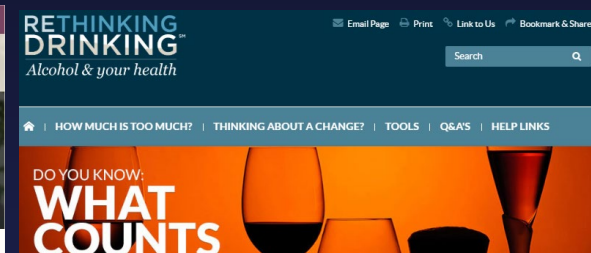
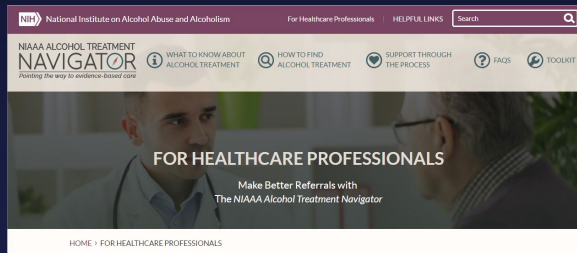


Priority Areas for NIAAA

- Develop effective prevention strategies that address the links between social and environmental determinants of health (including ACE), mental well-being, coping strategies, and alcohol use
- Develop and refine behavioral treatments for AUD
- Identify novel targets and support medications development
- Support research into strategies/outcomes for long-term recovery
- Integrate prevention, early detection, intervention, and treatment into routine health care to reduce AUD and close the treatment gap for it
- Disseminate NIAAA's [Health Professional Core Resource](#)* and promote use of our [Rethinking Drinking](#) and [Treatment Navigator](#) resources
 - *Free CME or CE credit
- Continue to promote research exploring differences in patterns of alcohol use, health effects, and recovery among diverse groups
- Promote non-stigmatizing terms, such as “[person with an alcohol use disorder](#)” instead of “[alcohol abuser](#)” or “[alcoholic](#)”.

THANK YOU!

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Special thanks to:
George Koob, PhD
Patricia Powell, PhD

Improving Health Disparities in Alcohol Health Services

Examples of **new health services projects** to address health disparities:

- One project is assessing the effectiveness of a **culturally adapted, personalized feedback intervention** among Latinx individuals with alcohol misuse and anxiety within community-based health clinics
- Another study is exploring the impact of various combinations of **follow-up engagement after alcohol-related hospitalization** and assessing alcohol-related outcomes across racial and ethnic groups, including analysis of social determinants of health.
- A third study is examining barriers to AUD care by surveying **Medicaid health plan policies** related to delivery and management of AUD treatment and their relationship with access to and outcomes of care for racial/ethnic minorities, women, and rural Americans