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NEWS

Hold For Release
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MODERATE ALCOHOL CONSUMPTION:
PUBLIC SHOULD KNOW OF ITS BENEFICIAL EFFECTS

Boston, Mass.--"The public should be aware that there are beneficial effects of moderate alcohol intake," wrote R. Curtis Ellison, M.D., a professor of medicine at Boston University School of Medicine, in an editorial in the September 10th issue of Epidemiology. Ellison's editorial accompanies an American Cancer Society (ACS) study that demonstrated that moderate alcohol consumption reduced the risk of death from heart attack and most other causes.

Ellison wrote that there appears to be an increasing tendency to equate alcohol use with illicit drug use and to advocate abstinence from all drugs, including alcohol. He says, however, that the protective effects of small amounts of alcohol against heart disease have been known for many years, but have not been widely publicized, possibly because of a fear that making a positive statement about drinking would lead to greater abuse of the substance. This study and numerous other studies, said Ellison, suggest that one or two drinks a day may be considered safe for most people.

The researchers compiled data on 276,802 men to determine whether drinkers of varying amounts of alcohol had different risks of dying than did nondrinkers. Participants in the study were ages 40 to 59 when they enrolled in an ACS prospective study in 1959. The researchers found that those who consumed some alcohol, up to an average of two drinks per day, were less likely to die during the following 12 years than men who did not consume alcohol. There was a 20-percent reduction in deaths from heart disease in moderate drinkers compared with nondrinkers. In addition, those who drank

occasionally or an average of one drink per day were also less likely than nondrinkers to die from other leading causes of death, such as cancers, strokes and accidents. However, individuals who stated that they averaged three or more drinks per day increased their risk of dying from most causes.

Ellison noted that caution must be used when translating the study into specific recommendations for alcohol consumption for individuals. He emphasized that the study, which evaluated only men, could not be used to determine safe drinking levels for women. Further, factors, such as body size and whether or not alcohol is consumed with food, influence the effects of alcohol. The type of alcohol consumed also affects its influence on the risk of cardiovascular disease, with wine usually showing the greatest benefit.

"When considering the relation between alcohol consumption and health," Ellison wrote, "both the benefits and harmful effects must be considered." He stated that drinking alcohol might be considered analogous to taking aspirin. Aspirin is widely taken by American men to reduce their risk of heart disease, even though it is known that the drug increases bleeding among individuals with ulcers and certain other diseases. For individuals with such bleeding problems, any aspirin is too much; for any individual, taking an excessive amount of aspirin is dangerous. Similarly, individuals who are prone to substance abuse should not drink alcohol at all, and no one should drink it to excess.

Ellison concluded: "Based on our current knowledge, the American male who does not have a bleeding tendency, who is not at increased risk for alcohol abuse, and who wants to reduce his risk of heart disease might consider the advantages of washing down his aspirin with a glass of cabernet."