Alcohol Briefing

Contents

Introduction:

Alcohol misuse is a pattern of drinking that results in harm to one's health, interpersonal relationships or ability to work and can also include alcohol dependence.[1] Alcohol misuse is one of the biggest risk factors for death, ill-health, and disability among 15 to 49 year olds in the UK.[2] As well as causing serious health problems it can also lead to societal problems such as unemployment, increased crime rate, relationship and family issues. Across the United Kingdom alcohol misuse has a significant economic impact, estimated to be between £21 and £52 billion a year.[3] Admissions to hospitals is often the first-time alcohol dependence is identified as an underlying or primary condition and each year there are over 1 million admissions to hospital for alcohol-related conditions.[4]

Alcohol contributes to both the social and economic landscape of society despite this, no amount of alcohol consumption is without risk. The UK Chief Medical Officers (CMOs) advice is to keep the risk from alcohol low, adults should not regularly drink more than 14 units of alcohol per week (14 units is equivalent to six pints of average-strength beer or ten small glasses of lower-strength wine).[5]

The East Sussex alcohol harm reduction strategy 2021-2026 acknowledges the complex nature of alcohol harm and outlines a whole system approach to address the social determinants of alcohol harm.[6] The strategy outlines five ambitions that describe how East Sussex will work towards fostering a healthier relationship with alcohol.

To reach these five ambitions, there are four guiding priority areas which are:

1. Encouraging a healthy relationship with alcohol
2. Protecting children, young people, and their families
3. Making effective treatment and recovery accessible to all who need it
4. Creating safe environments in East Sussex

This report will primarily focus on the data that is not publicly available and will look at the health-related effects of drinking alcohol. It will not consider the wider consequences such as: increased crime rate, unemployment, and homelessness.

This report aims to bring together data for East Sussex on various aspects of alcohol including:

- Alcohol consumption – Children, young people and Adults
- Treatment services
- Hospital admissions and attendances - Children and young people
- Hospital admissions – Adults
- Alcohol-specific deaths

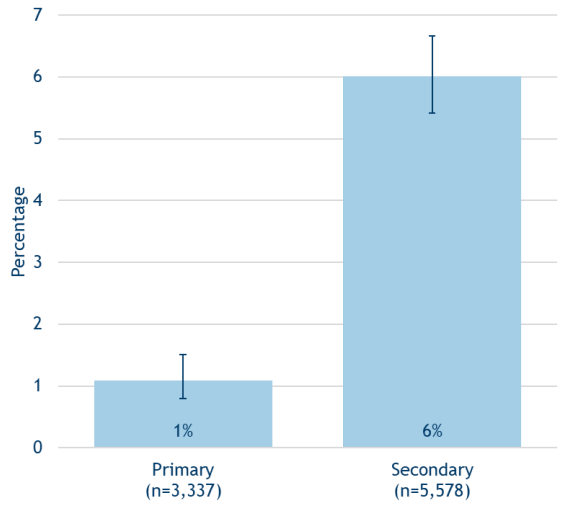
Key findings:

- Secondary students that drink alcohol get most of their alcohol from their parents.
- More males drink more than 14 units of alcohol a week than females.
- Alcohol-specific admission rate is higher for males than females. Highest for ages 45 to 79 years.
- Admissions for mental and behaviour disorders and toxic effect of alcohol have decreased.
- Admissions for alcoholic liver disease have increased.
- People in the most deprived areas are more likely to be admitted to hospital for alcohol specific reasons.

Alcohol consumption – Children and young people:

According to the My Health, My School Survey 2022/23 significantly more secondary students (6%) drink alcohol on a regular basis compared to primary students (1%) (Chart 1). This is similar to the results from the previous academic year (2021/22). A regular drinker is defined as drinking alcohol at least once a week, however it does not consider the amount of alcohol consumed. Of the secondary students that drink alcohol, 2% of these students responded that they are regularly drunk. According to the survey, 68% of primary and 39% of secondary students have never had a drink of alcohol. Of the secondary students that drink alcohol, most students (59%) get most of their alcohol provided to them by their parents.

Chart 1 Percentage of primary and secondary students that regularly drink alcohol, East Sussex 2022/23



Source: My Health, My School Survey 2022/23

Hospital admissions and attendances – Children and young people:

Over a three-year period from 2020/21 to 2022/23, there were 125 (40.7 per 100,000) admissions episodes for alcohol-specific conditions for under 18s in East Sussex (this translates to an average of three children a month), this was significantly worse than England (26 per 100,000). Rother and Hastings were also significantly worse than England (42.9 and 72.8 per 100,000 respectively).

Alcohol-specific admissions: Admissions to hospital where alcohol is wholly attributable to the condition, for example alcoholic liver disease.

There were 81 attendances (under 18s) during 2023 at either Eastbourne District General Hospital or Conquest Hospital Accident and Emergency departments where the primary reason for attendance was alcohol intoxication compared to 69 in 2022 (this translates to an average of 7 children a month in 2023 and 6 children a month in 2022). There will likely be more attendances involving alcohol, but where the primary reason for attendance was another cause.

Alcohol consumption – Adults:

The Health Survey for England is used to estimate the proportion of people in England who have health conditions, the prevalence of risk factors and behaviours associated with certain health conditions.

According to the Health Survey for England 2022, an estimated 32% of males and 15% of females in England drink more than 14 units a week. This is similar to the Southeast region putting these adults at an increased or higher risk of alcohol-related harm.[7]

Females were more likely not to drink or to drink at lower levels compared to males. In England, 17% of males and 22% of females did not drink alcohol in the last 12 months. Furthermore, 51% of males and 62% of females drank at levels that put them at a lower risk of alcohol-related harm, drinking less than 14 units of alcohol in a week.

The proportions of men and women who usually drank more than 14 units in a week varied across the age groups, increasing up to the age of 55 to 64 (30% of all adults, 38% and 23% of men and women respectively). *For more information see: Appendix, table 3.*

AUDIT (Alcohol Use Identification Test) is a simple method used to screen for unhealthy use of alcohol, defined as risky or hazardous consumption or any alcohol disorder. It can be used to measure alcohol dependence. It comprises ten indicators of problem drinking: three indicators of consumption, four of use of alcohol considered harmful to oneself or others, and three of physical dependency on alcohol. The responses to the questions are then used

to form a scale, from 0 to 40, of alcohol use.

A score of:

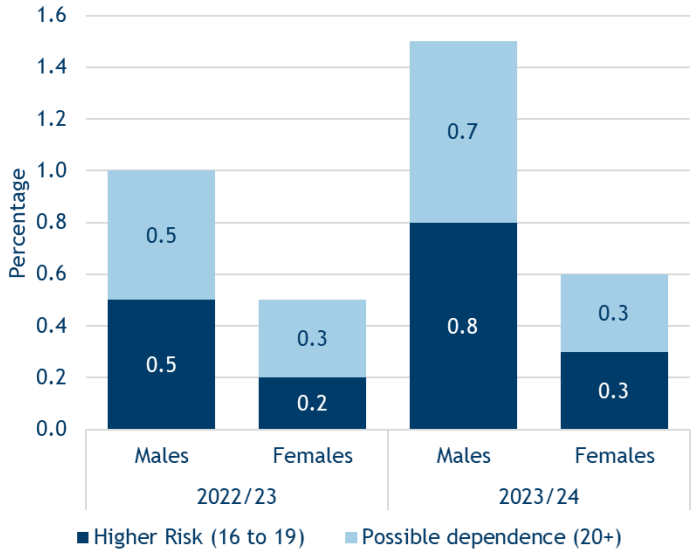
- 0 to 7 indicates low risk drinking behaviour, or abstinence
- 8 to 15 indicates medium levels of alcohol problems, with increased risk of developing alcohol-related health or social problems (sometimes described as hazardous drinking behaviour)
- 16 to 19 indicates high levels of alcohol problems, for which counselling is recommended (harmful drinking behaviour)
- 20 or more warrants further investigation for possible alcohol dependence

AUDIT also forms part of the NHS Health Check. People aged 40 to 74 who do not have any pre-existing cardiovascular conditions or risk factors are eligible for an NHS Health Check. There is limited local data about consumption of alcohol in East Sussex, therefore AUDIT scores have been analysed to investigate alcohol dependence (in residents aged 40 to 74 years who have had the NHS Health Check and as part of that also completed an AUDIT).

Based on AUDIT scores from 2022/23 and 2023/24, males are more likely than females to be at a high risk of alcohol harm or possible dependence. From 2022/23 to 2023/24 the percentage of both higher risk and possible dependence has increased for males whereas for females it has remained similar (Chart 2).

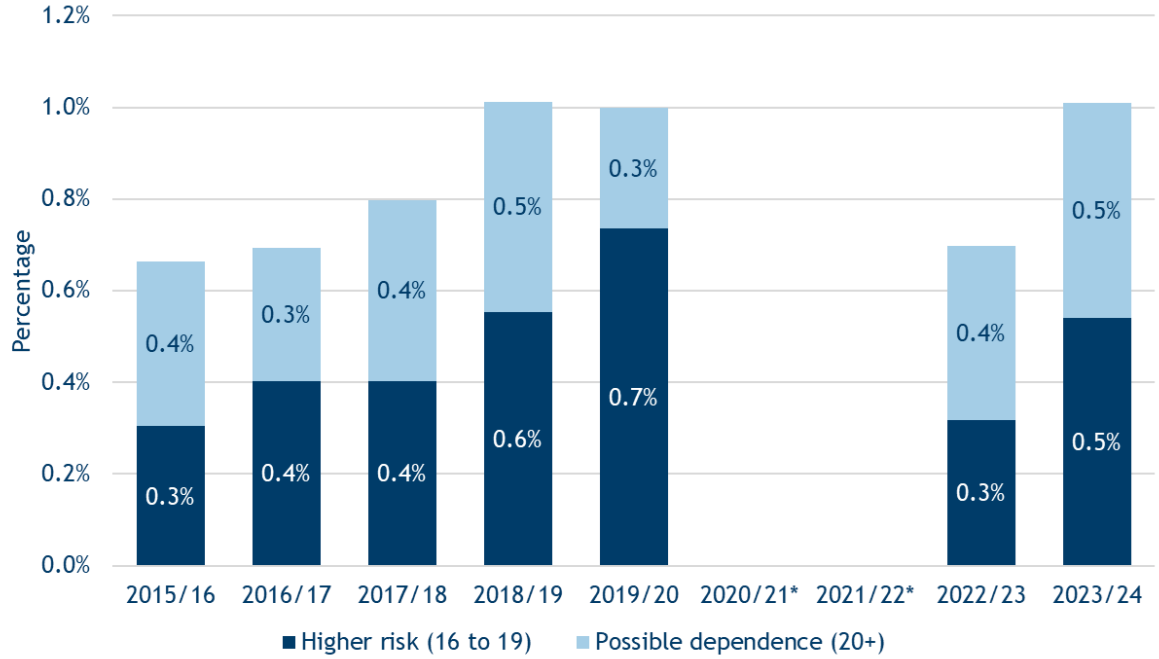
From 2015/16 to 2019/20 the percentage of higher risk drinkers had been increasing and the overall percentage of higher risk and possible dependence had gone up from around 0.7% to around 1%. During 2020/21 and 2021/22 the number of people who had completed an NHS health check was less than half of the previous years due to COVID-19, so these years have been removed from the analysis. As of 2023/24 the percentage of higher risk and possible dependent drinkers is now around the same level (around 1%) as before COVID-19 (Chart 3).

Chart 2 Alcohol dependence in East Sussex (according to AUDIT) by sex 2022/23 to 2023/24



Source: East Sussex NHS Health Check Data 2022/23 to 2023/24

Chart 3 Alcohol dependence in East Sussex (according to AUDIT) 2015/16 to 2023/24



Source: East Sussex NHS Health Check Data 2015/16 to 2023/24

***2020/21 and 2021/22 years data not included due to COVID-19 as there was a low uptake of NHS Health Checks during this time within East Sussex and nationally.**

Treatment services:

In East Sussex there are an estimated 5,277 dependent drinkers, with an estimated 1,254 of these in treatment. This leaves 76% of unmet need in East Sussex. (OHID, 2019/20).

Change Grow Live (CGL) treatment services help adults who need support for their alcohol or drug use in East Sussex. In 2022, there were 1,330 adults in treatment for alcohol and 1,379 in 2023 across East Sussex. This includes adults in treatment for non-opiate and alcohol, opiate with alcohol and alcohol only clients. In 2022, there were 506 new clients and 566 in 2023. **For more detailed information for each district/borough see: Appendix: table 4 and 5.**

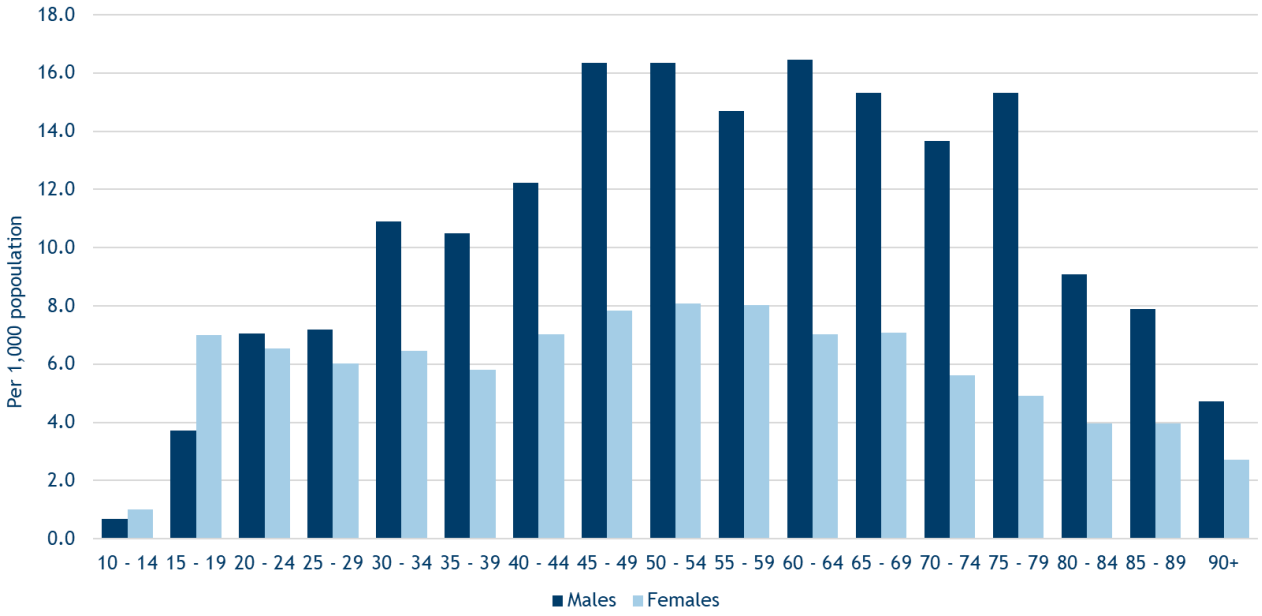
Hospital admissions:

Detailed hospital admission data can be accessed online via the following link: Alcohol Profile - OHID (phe.org.uk) for each of the districts and boroughs within East Sussex. This tool allows for comparisons between local authorities and allows bench marking against other local authorities in a region or England or a regional average. In summary, local data shows that Hastings is significantly worse than England for all the alcohol admissions indicators. Eastbourne is significantly worse than England for admission episodes for alcohol-related conditions (Narrow, 2022/23).

> Alcohol-specific admissions include admissions for the following reasons: mental & behavioural disorders due to the use of alcohol, toxic effect of alcohol, alcohol gastritis, alcoholic liver disease and alcohol-induced chronic pancreatitis.

In East Sussex between 2020/21 and 2022/23 the alcohol-specific admission rate was higher for males than females for almost all age groups. The admission rate was highest for males aged 45 to 79 years (Chart 4).

Chart 4 Alcohol-specific admission rate – people by age group and sex, East Sussex 2020/21 to 2022/23 (3 years)



Source: Hospital Episode Statistics, accessed via DAE, NHS England

The top three reasons for alcohol-specific admissions in East Sussex are: alcoholic liver disease, mental & behavioural disorders due to alcohol and toxic effect of alcohol.

From 2018/19 to 2022/23 admissions with both mental & behavioural disorders and toxic effect of alcohol have decreased whereas admissions for alcoholic liver disease have increased for both the number of people and the number of admissions (Chart 5-7).

Chart 5 Admissions with mental & behavioural disorders due to use of alcohol, East Sussex between 2018/19 to 2022/23

Source: Hospital Episode Statistics, accessed via DAE, NHS England

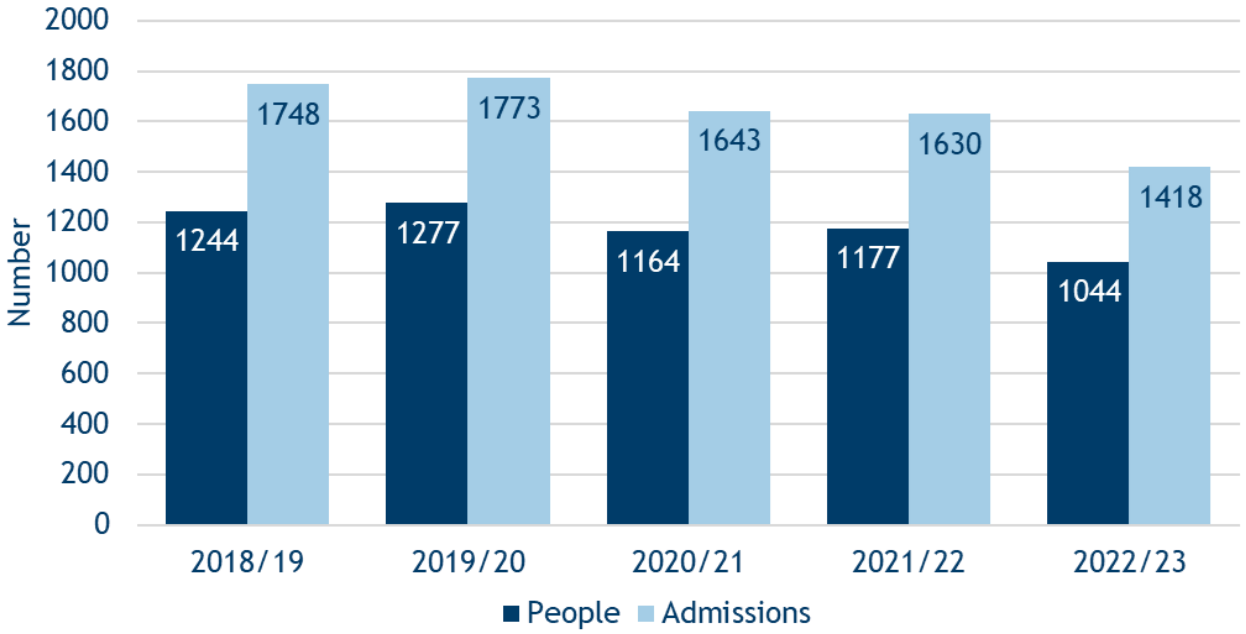
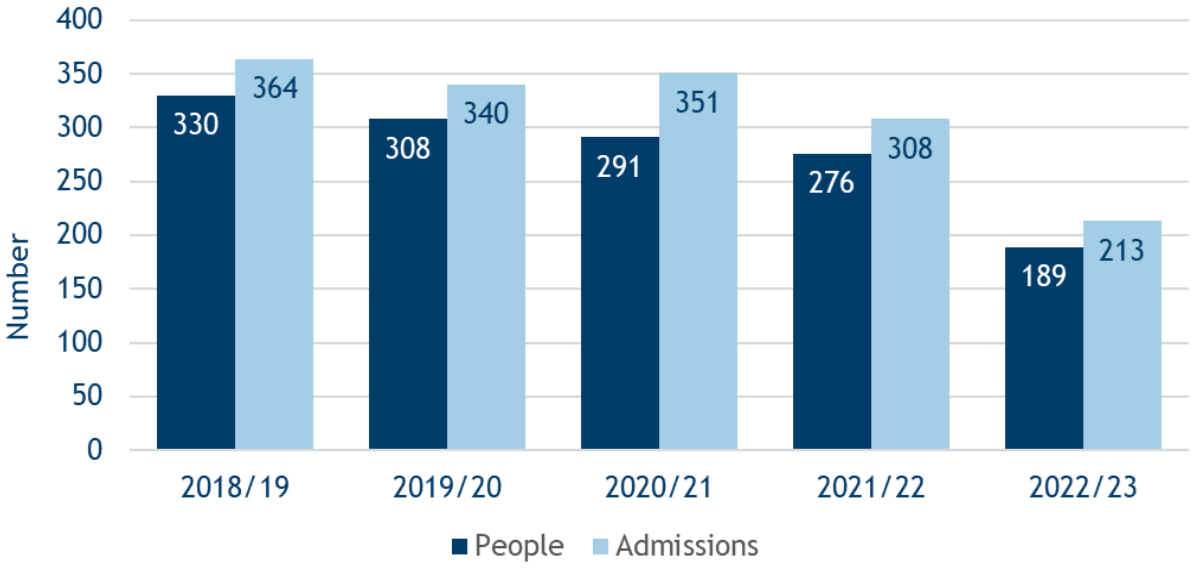
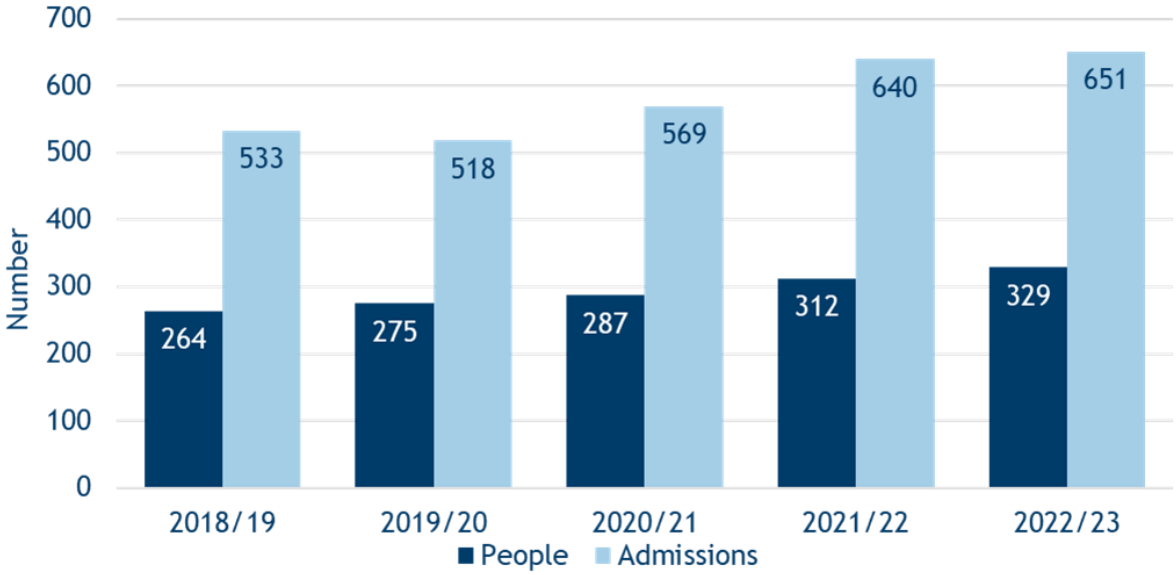


Chart 6 Admissions with toxic effect of alcohol, East Sussex between 2018/19 to 2022/23



Source: Hospital Episode Statistics, accessed via DAE, NHS England

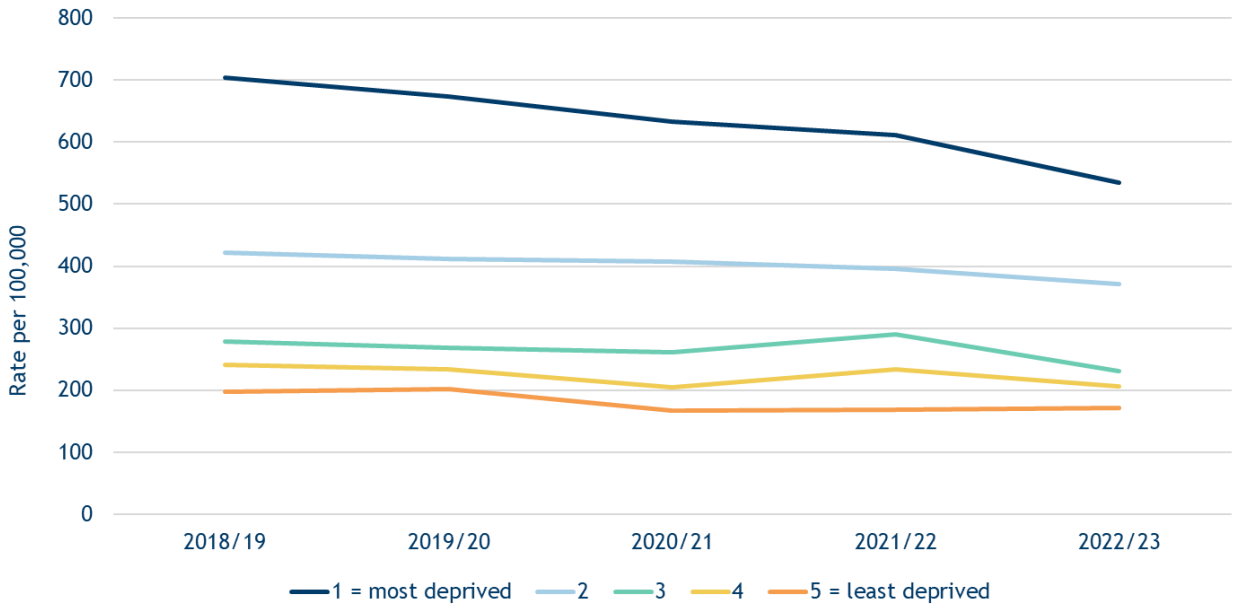
Chart 7 Admissions with alcoholic liver disease, East Sussex between 2018/19 to 2022/23



Source: Hospital Episode Statistics, accessed via DAE, NHS England

From 2018/19 to 2022/23, people in the most deprived areas were more likely to be admitted to hospital for alcohol specific reasons compared to people in less deprived areas. From 2018/19 to 2022/23 the gap between the admissions for the most and least deprived areas has reduced (Chart 8).

Chart 8 Alcohol-specific admission rate (people) by deprivation quintile (directly age-standardised rate per 100,000), East Sussex between 2018/19 to 2022/23

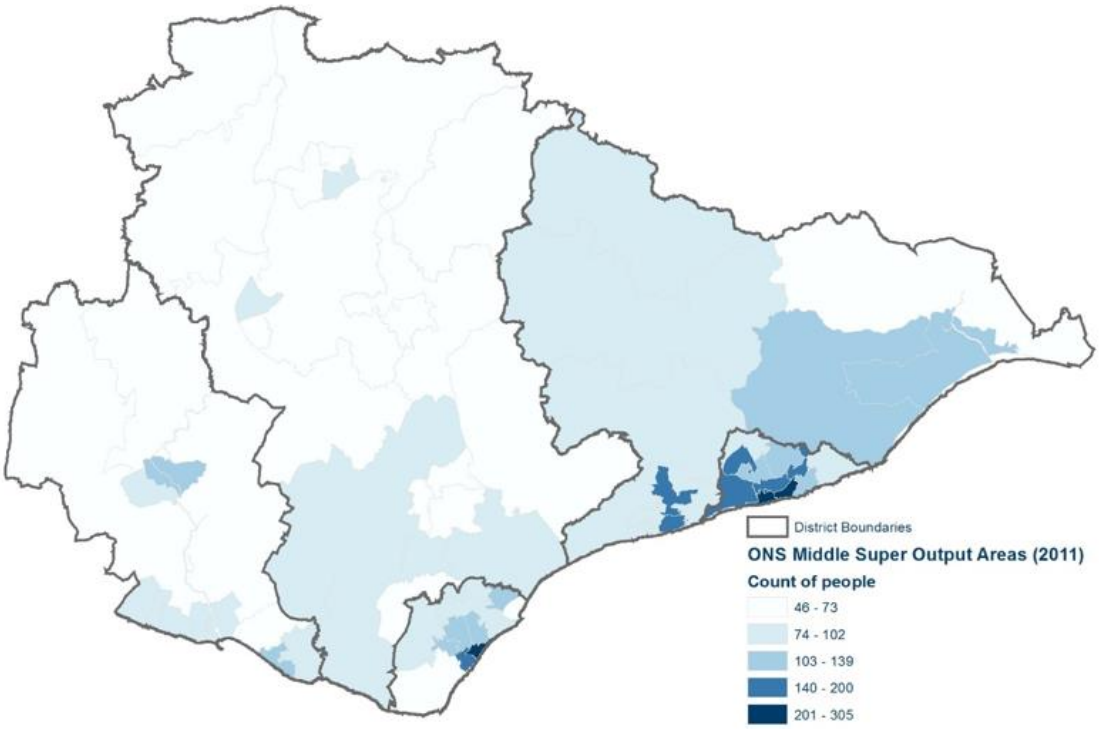


Source: Hospital Episode Statistics, accessed via DAE, NHS England

Map 1 shows the number of people admitted to hospital due to alcohol-specific admissions during 2017/18 to 2021/22. Numbers are based on middle super output areas (MSOAs), the darker the area the higher the number of people admitted in that MSOA. The top ten MSOAs with the highest number of people are: Pier (305), Central St Leonards (303), Central Hastings (240), Bexhill Central (200), Braybrooke & Bohemia (199), Hollington (192), Broomgrove (183), King Edward's Parade (180), West St Leonards (167) and Bexhill North & Sidley (159).

Middle Super Output Areas (MSOAs) are statistical geographies with an average resident population of 8,200.

Map 1 Number of people admitted due to alcohol-specific admissions, East Sussex MSOAs, 2017/18 to 2021/22



Source: Hospital Episode Statistics, accessed via DAE, NHS England

Alcohol-specific deaths:

Detailed mortality data can be accessed online via the following link: Alcohol Profile - OHID (phe.org.uk). This tool allows for comparisons between local authorities and allows bench marking against other local authorities in a region or England or a regional average. In summary local data shows that Eastbourne and Hastings are similar to England for all the alcohol mortality indicators. Wealden is significantly better than England for all the alcohol mortality indicators.

In 2023 in East Sussex there were 62 alcohol-specific deaths this is the highest it has been in ten years. This data is only provisional and may increase further as more death registrations are processed (Table 1).

Table 1 Number of alcohol-specific deaths in East Sussex, 2013 to 2023

Year of death	Number of deaths
2013	59
2014	57
2015	46
2016	56
2017	56
2018	51
2019	48
2020	57
2021	60
2022	57
2023	62*

Source: East Sussex Public Health Mortality Files

References:

1. Alcohol misuse - NHS (www.nhs.uk)
2. Alcohol Profile - OHID (phe.org.uk)
3. Alcohol public health burden evidence review 2016 (publishing.service.gov.uk)
4. Statistics on Alcohol, England 2020 - NHS Digital
5. UK Chief Medical Officers' Low Risk Drinking Guidelines (publishing.service.gov.uk)
6. East Sussex alcohol harm reduction strategy 2021-2026 | East Sussex County Council
7. Adult drinking - NHS England Digital

Appendix:

Table 1: National Statistics definition for alcohol-specific deaths

ICD-10 code	Description of condition
E24.4	Alcohol-induced pseudo-Cushing's Syndrome
F10	Mental and behavioural disorders due to the use of alcohol
G31.2	Degeneration of nervous system due to alcohol
G62.1	Alcoholic polyneuropathy
G72.1	Alcoholic myopathy
I42.6	Alcoholic cardiomyopathy
K29.2	Alcoholic gastritis
K70	Alcoholic liver disease
K85.2	Alcohol-induced acute pancreatitis
K86.0	Alcohol-induced chronic pancreatitis
Q86.0	Fetal-induced alcohol syndrome (dysmorphic)
R78.0	Excess alcohol blood levels
X45	Accidental poisoning by and exposure to alcohol
X65	Intentional self-poisoning by and exposure to alcohol
Y15	Poisoning by and exposure to alcohol, undetermined intent

Source: Office for National Statistics

Table 2: Definition for alcohol-specific admissions

ICD-10 code	Description of condition
E24.4	Alcohol-induced pseudo-Cushing's Syndrome
F10	Mental and behavioural disorders due to the use of alcohol
G31.2	Degeneration of nervous system due to alcohol
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I42.6	Alcoholic cardiomyopathy
K29.2	Alcoholic gastritis
K70	Alcoholic liver disease
K85.2	Alcohol-induced acute pancreatitis
K86.0	Alcohol-induced chronic pancreatitis
Q86.0	Fetal-induced alcohol syndrome (dysmorphic)
R78.0	Excess alcohol blood levels
X45	Accidental poisoning by and exposure to alcohol
X65	Intentional self-poisoning by and exposure to alcohol
Y15	Poisoning by and exposure to alcohol, undetermined intent
Y90	Evidence of alcohol involvement determined by blood alcohol level
Y91	Evidence of alcohol involvement determined by level of intoxication

Table 3: Summary of weekly *alcohol consumption*, by age and sex

Estimated weekly alcohol consumption	Age group							
	16-24 %	25-34 %	35-44 %	45-54 %	55-64 %	65-74 %	75+ %	Total %
Men								
Non drinker/did not drink in last 12 months	28	13	19	16	13	13	15	17
Up to 14 units (low risk)	48	58	49	53	49	47	54	51
More than 14, up to 50 units (increasing risk)	19	24	29	23	29	32	27	26
More than 50 units (higher risk)	5	5	3	7	9	8	5	6
More than 14 units (increasing or higher risk)	*24*	*29*	*32*	*30*	*38*	*40*	*31*	*32*
Women								
Non drinker/did not drink in last 12 months	24	27	23	19	15	20	29	22
Up to 14 units (low risk)	62	64	64	63	62	62	57	62
More than 14, up to 35 units (increasing risk)	8	7	10	13	18	15	12	12
More than 35 units (higher risk)	6	2	3	5	5	4	2	4
More than 14 units (increasing or higher risk)	*14*	*9*	*13*	*18*	*23*	*19*	*14*	*15*
All adults								
Non drinker/did not drink in last 12 months	26	20	21	18	14	17	23	19
Up to 14 units (low risk)	55	61	57	58	56	54	56	57
More than 14, up to 35/50 units (increasing risk)	14	15	19	18	23	23	18	19
More than 35/50 units (higher risk)	6	4	3	6	7	6	3	5
More than 14 units (increasing or higher risk)	*19*	*19*	*22*	*24*	*30*	*29*	*22*	*24*
Bases (unweighted)								
Men	*200*	*365*	*502*	*496*	*606*	*659*	*538*	*3366*
Women	*213*	*505*	*617*	*652*	*737*	*750*	*617*	*4091*
All adults	*413*	*870*	*1119*	*1148*	*1343*	*1409*	*1155*	*7457*
Bases (weighted)								
Men	*427*	*601*	*598*	*592*	*583*	*434*	*356*	*3591*
Women	*390*	*646*	*636*	*616*	*605*	*456*	*445*	*3794*
All adults	*817*	*1247*	*1234*	*1208*	*1188*	*889*	*801*	*7385*

Source: Health Survey for England 2022, NHS England

Notes:

1 The method for calculating alcohol units in this table is described in HSE 2022 Alcohol consumption methodology report.

2 Bases exclude adults who did not answer questions about their usual consumption of different types of drinks, and so the estimates shown for non-drinkers are not definitive. Definitive estimates are shown in Table 1.

3 Definitions for increasing and higher risk reflect different thresholds for men and women.

Table 4: Number of adults in treatment for alcohol 2022 and 2023, East Sussex

Area	2022	2023
Eastbourne	382	423
Hastings	395	404
Wealden	198	202
Rother	161	191
Lewes	194	160
East Sussex	1,330	1,379

Table 5: Number of new presentations 2022 and 2023 for alcohol, East Sussex

Area	2022	2023
Eastbourne	157	177
Hastings	137	147
Wealden	84	102
Rother	62	82
Lewes	63	42
East Sussex	506	566