



**Translating Research into Practice on Alcohol and Polysubstance Use Disorders
by Educating the Interprofessional Primary Care Team**

Epidemiology and Current Trends in Alcohol Use Disorder

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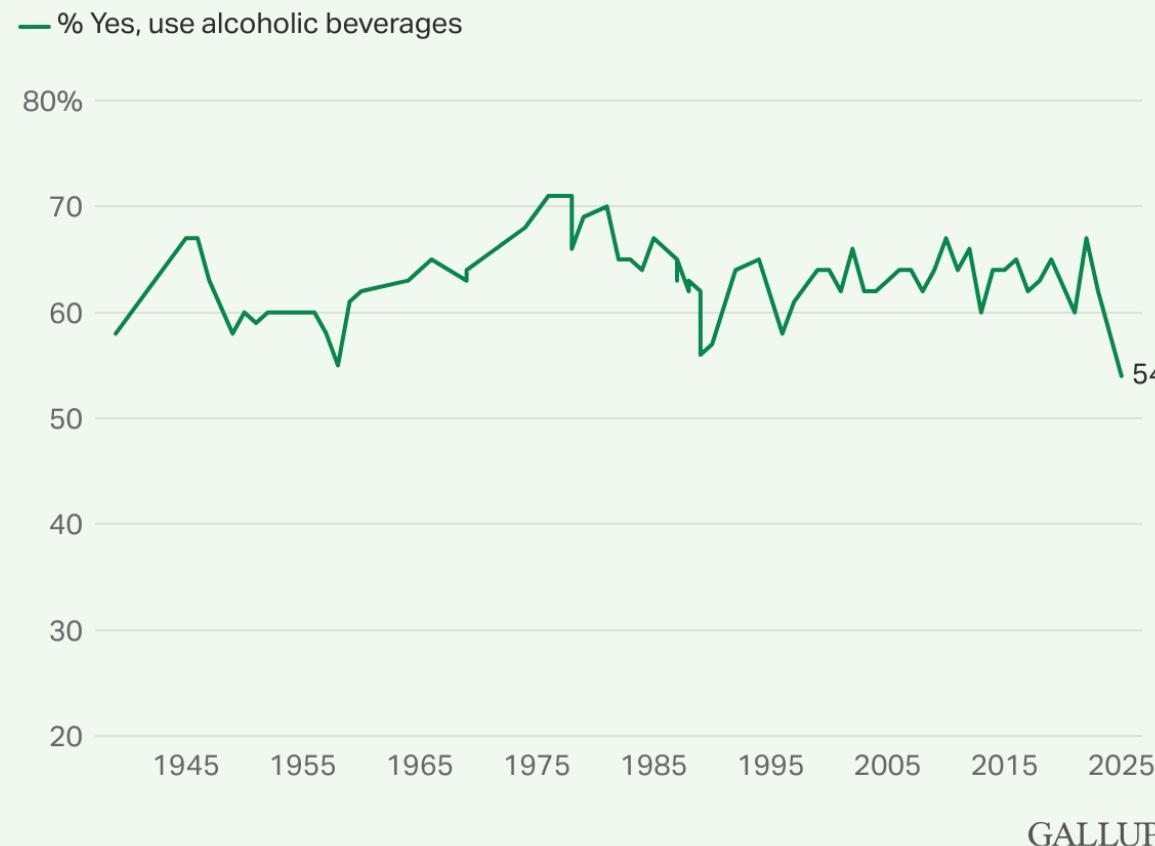
Learning objectives

By the end of this session, participants will be able to...

1. Describe diagnostic criteria and current understanding of the neurobiology of addiction
2. Analyze current alcohol use disorder (AUD) prevalence and trends in the United States
3. Describe behavioral health complications and comorbidities of AUD
4. Assess commonly encountered disease complications and downstream effects of alcohol use in primary care
5. Discuss the effect of alcohol use and misuse on certain special populations

Americans' Use of Alcoholic Beverages, 1939-2025

Do you have occasion to use alcoholic beverages such as liquor, wine or beer, or are you a total abstainer?



DSM V definition of alcohol use disorder (AUD)

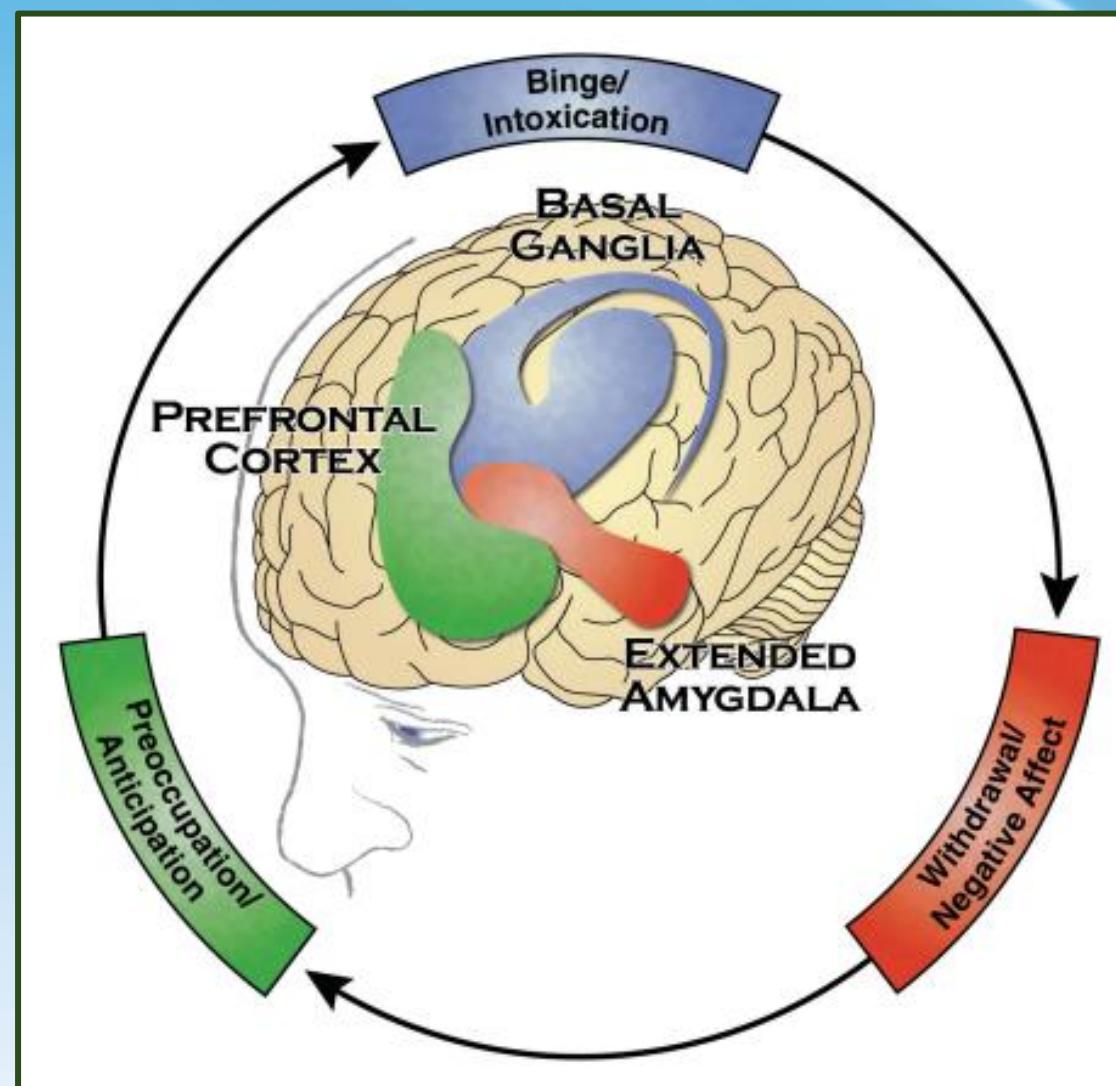
- "A problematic pattern of alcohol use leading to clinically significant impairment or distress."
- Diagnosed as mild, moderate, or severe based on the number of symptoms, out of a possible 11, in the past 12 months

Excessive alcohol consumption is defined as the rate of adults (age 18 and older) who report binge drinking and/or heavy drinking in the past 30 days.

Binge drinking is defined as having 4 or more drinks for women or 5 or more drinks for men on one occasion.

Heavy drinking is defined as having 7 or more drinks per week for women or 15 or more drinks per week for men.

Phases of addictive behaviors



Drink equivalents

14 grams of pure alcohol is equivalent to:

- 12 oz beer at 5% alcohol
- 5 oz of wine
- 1.5 fl oz of 80 proof distilled spirits
- Mixed drink with 1.5 fl oz of liquor

(U.S. Department of Health and Human Services and U.S. Department of Agriculture, 2015)



Current scope of the problem



- Landmark US Surgeon General's Report in 2016 reported that over **24%** of Americans over age 12 had at least one binge episode of alcohol in the **last 30 days**
- Over **17 million** were considered "heavy drinkers"
- COVID increased the prevalence of all drinking behaviors in the US, including heavy drinking but now we are seeing a downward trend again
- Alcohol related deaths have **increased 89%** from 1999 to 2024
(National Institute on Alcohol Abuse and Alcoholism (NIAAA), 2024a);
(Substance Abuse and Mental Health Services Administration (SAMHSA)
& Office of the Surgeon General, 2016); (Ayyala-Somayajula, 2024)

Current Scope Continued

- Covid related changes in drinking affected different groups differently: women showed greater increases in liver disease than males
- Native American populations including In Oglala Lakota County (SD), McKinley County (NM), and Apache County (AZ), have seen 80 fatalities per 100,000 since 2020- extremely high rates of death 2/2 ETOH
- Since 2024, rates of drinking related deaths have returned within 10% of their 2019 levels in about half the states.
- Black females, all males aged 15-34 and women ages 35-44 all saw sharp increases during Covid
- Mississippi had the highest state increase at 122% greater deaths
(Wong et al., 2025)



Worrisome trend

- ER visits associated with ethyl alcohol (ETOH) rose by **47%** between 2006-2014
- After years of decreases, alcohol related vehicular deaths rose in 2022 to the highest level since 2008
- **21%** of suicide deaths record a blood alcohol level that shows intoxication

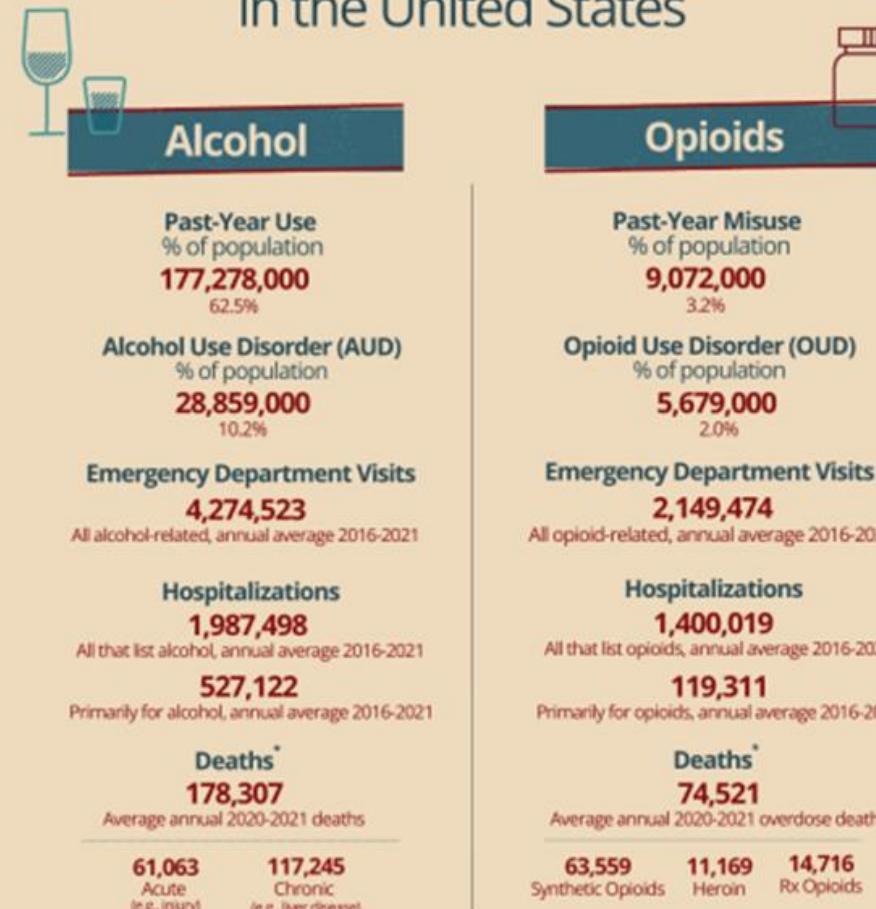
(White et al., 2018); (NIAAA, 2024b)



Impact of Alcohol and Opioids

(NIAAA, 2024b)

Impact of Alcohol and Opioids in the United States



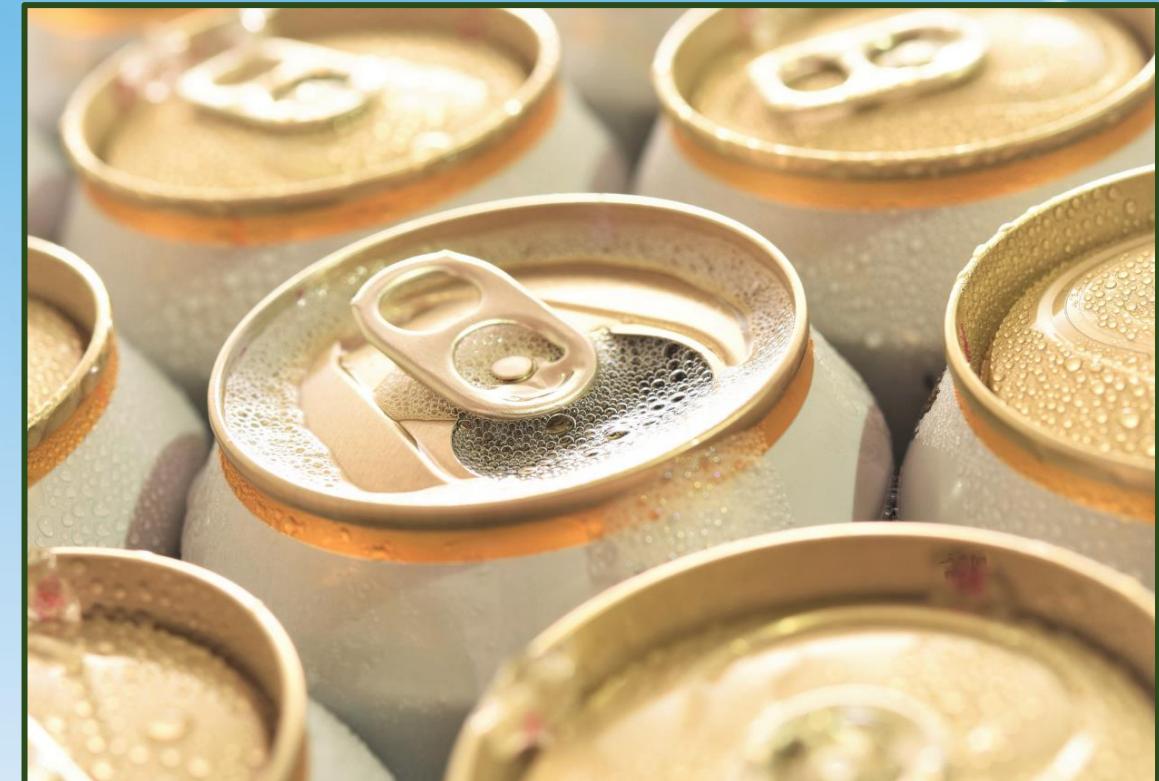
Sources: 2023 NSDUH Tables 2.1A&B, 1.1A&B, 5.1A&B; 2021 HCUP-NEDS; 2020-2021 CDC ARDI; 2022 NIDA Drug Overdose Death Rates.

* Acute and chronic alcohol-related deaths do not add to the total due to rounding. Note that the values for the three opioid types sum to more than the total because some deaths involve multiple types of opioids.

Zoom poll: Health comorbidities

Which of the following is the most frequently occurring health consequence of drinking 2-3 drinks per day?

- a) Fetal Alcohol Syndrome
- b) Liver Cancer
- c) Pancreatitis
- d) Hypertension



Alcohol-attributable deaths due to OD, suicide, accidents and chronic conditions in the United States are the 4th leading cause of death

- **Liver diseases** (e.g., alcohol-associated liver disease and unspecified liver cirrhosis) (heavy drinking)
- **Cardiovascular diseases** (moderate to heavy drinking)
- **Cancer** (all amounts of alcohol use)
- **Gastric and intestinal bleed** (heavy drinking)
- **Pancreatitis** (heavy drinking): *15% of individuals who drink alcohol heavily have acute pancreatitis*

POLITICS

Surgeon General calls for new label on drinks to warn Americans of alcohol's cancer risk



Forbes

MONEY > INVESTING

Alcohol Stocks Tumble As Health And Cannabis Trends Surge

By [Garth Friesen](#), Contributor. ⓘ Specialist in global markets, economics and ... [Follow Author](#)

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Beer, wine and spirit sales are down as consumers recognize growing health concerns of consuming alcohol. (Photo by Spencer Platt/Getty Images)

GETTY IMAGES

Spotlight on cancer

3.6%

**of all cancers are
attributable to
alcohol use**

20%

**of all colon cancers
may be attributable
to alcohol exposure**

5%

**of hormone positive
breast cancers may
be attributable to
alcohol exposure**

Even light alcohol use (less than 2 drinks per day) showed a statistical increase in the risk for oropharyngeal cancer, esophageal squamous cell carcinoma and breast cancer. Acetaldehyde, a toxic metabolite of alcohol, damages DNA and is thought to be the main mechanism for this increased risk.

(Bagnardi et al., 2012); (Bagnardi et al., 2014)

Spotlight on cardiovascular risks

Alcohol is arrhythmogenic



Increases risk for atrial fibrillation and ventricular tachyarrhythmias



Increases risk for both hemorrhagic and ischemic stroke

Atrial fibrillation (AFib) is a leading cause of stroke. Studies have shown that prolonged exposure to alcohol causes cardiac cellular remodeling that can lead to fibrotic tissue development and left atrial dilatation. These structural changes can lead to abnormal rhythm. One study showed that patients could decrease their AFib episodes by decreasing alcohol intake to less than 2 drinks per week or total abstinence.

(Mannan et al., 2024); (Beilin, 1995)

Spotlight on diabetes

- Prevalence of diabetes mellitus (DM) ranges from 2.4% in 18-44 year olds to around 20% in those 65 and older
- Studies show that moderate drinking (8-14 drinks per week) is associated with hypertension in patients with diabetes
- Daily alcohol use also increases the risk for poor glycemic control, impotence, retinopathy and peripheral neuropathy

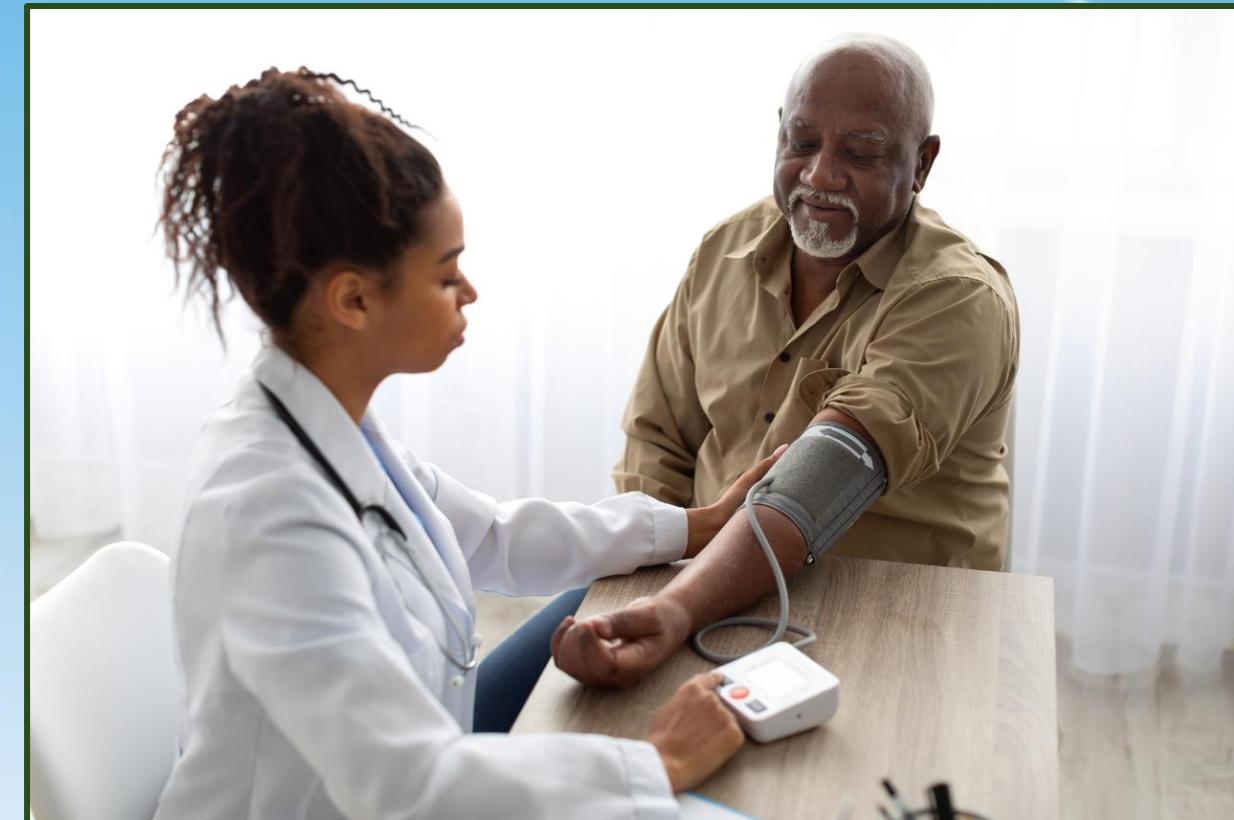
(Imken, 2024)



Spotlight on hypertension

- **More than 3 drinks in one sitting** can increase blood pressure (BP) acutely - dose dependent and linear relationship
- First described in 1915 by a French physician Lian who noted that sailors who drank liters of wine per day had elevated BP
- **More than 1 drink per day for women** and **more than 2 drinks per day for men** has one of the most modifiable risk factors for hypertension
- **Drinking 3 or more drinks per day** doubles the risk of hypertension in adults

(Beilin, 1995); (Cushman, 2001)



Spotlight on special populations

- Pregnant women are at increased risk not only for harm to fetus
 - Alcohol can increase bleeding risk and risk of miscarriage
- 3% of women report binge drinking in pregnancy
(Dejong et al., 2019)



Spotlight on youth

- **27% of youth aged 15-19** drank alcohol in the last 30 days
- NIAAA first reported in 1998 that teens who begin drinking before age 15 are **4x more likely to have substance problems as adults**
- These effects are both due to genetic predisposition and subsequent neuronal changes during late development
(Squeglia et al., 2015); (SAMHSA, 2018)



Zoom poll

Which of the following is a “safe” amount of alcohol to drink?

- a) 1-2 drinks per day
- b) 2-4 drinks per week
- c) 2-3 drinks per day
- d) There is no safe level of regular alcohol consumption





Dr. Faiz Bhora

Professor of surgery and regional
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***We now know that there is no safe level for alcohol
consumption, and that alcohol is a known carcinogen.***

**There is no “moderate” amount of alcohol intake. All alcohol intake is a risky
behavior that we as medical professionals must assess and discuss with patients.**

Questions?

**Feel free to unmute or put your
questions in the chat!**



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