

EDITORIAL

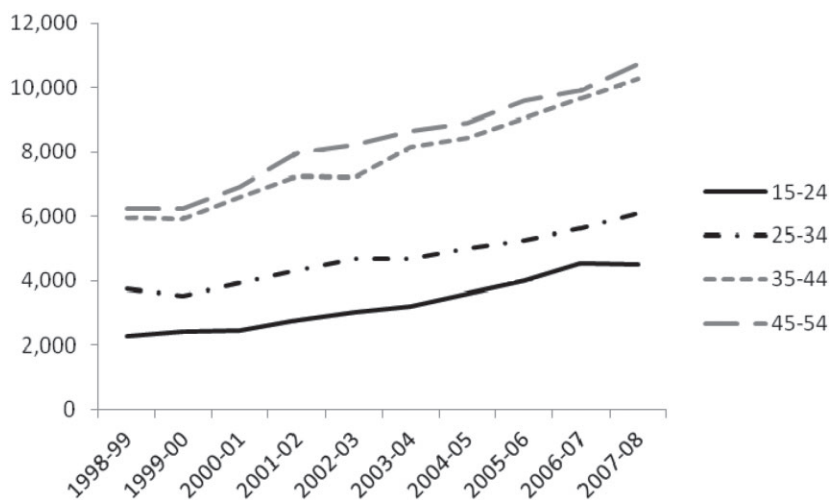
## Increasing alcohol use disorders among mid-life Australians: Time for a new focus?

Over the past 5 years, the federal government has committed \$103.5 million dollars to tackle alcohol-related harm in Australia through its ‘National Binge Drinking Strategy’ [1]. As the former Minister for Health and Ageing Nicola Roxon explained, ‘Combating risky drinking amongst young Australians is a priority for the Gillard Government . . . Binge drinking among young people is a community-wide problem that demands a community-wide response, including an emphasis on young people taking greater personal responsibility for their behaviour’ [2]. While binge drinking among young people may be a problem, this policy focus may have overlooked a potentially larger issue of alcohol use disorders among mid-life Australians.

In 2007–2008 three-quarters of hospitalisations for alcohol use disorders in Australia occurred among people aged 35 years or over [3]. These hospital admissions were for alcohol intoxication, harmful use, dependence, withdrawal, delirium, amnesia and psychosis. The number of hospital admission in this older age bracket vastly overshadowed those seen among people aged 15–24 years (Figure 1). Not only did mid-life

Australians account for bulk of hospital admissions for alcohol use disorders in 2007–2008, but the number of admissions in this age bracket had almost doubled compared to a decade ago (Figure 1). The higher number of hospital admissions among older Australians is not merely an artefact of the number of older Australians: rates of alcohol hospital admissions per person show the same pattern, with the rate in the 35–54 year age band (3.69 per 1000 persons) twice as high as the rate in the 15–24 year age band (1.67 per 1000 persons) (see notes in Figure 1 for details) [3,4].

Data on risky drinking derived from the National Health Survey similarly show that risky alcohol consumption (defined as 5+ drinks per day for men and 3+ drinks per day for women [5]) is highest in the mid-life years [5]. The number of people in this age band who are engaging in risky drinking has also increased since the 1990s. For example, the Australian Bureau of Statistics reports that 18% of men aged 45–54 years were risky drinkers in 2004–2005, compared to 15% in 2001 and 12% in 1995 [5]. While the level of risky drinking among women is lower than for men, the proportion of



Notes: Hospital admissions were for mental and behavioural disorders due to alcohol use (ICD codes F10.0–9, covering intoxication, harmful use, dependence, withdrawal, delirium, psychosis and other/unspecified disorders due to alcohol) [3]. Rates per population were calculated using 2006 census data from the Australian Bureau of Statistics (2 704 280 Australians were aged 15–24 years; 5 700 348 Australians were aged 35–54 years) [4].

Figure 1. The number of hospital admissions in Australia for alcohol use disorders by age group, 1998–1999 to 2007–2008.

women drinking at risky levels has increased more than for men over this time [5].

The problem of heavy alcohol consumption among older adults is not unique to Australia. Recently released findings from the 2010 General Lifestyle Survey in Britain found over-45s were three times as likely to drink almost every day than younger people [6]. These findings have prompted public attention in Britain, with experts calling for a need to increase awareness of the health risks associated with heavy drinking among older adults [7]. In Australia, messages about the potential harmful effects of over-indulging in alcohol through later adulthood, including sleep problems, liver disease, increased risk of cancer and stroke, are all too often overshadowed by messages about the potential health benefits of a daily tittle [8].

This is not to dismiss the harm arising from binge drinking, nor to ignore the important role of preventing the uptake of heavy drinking among youth. Granted, binge drinking (defined by the Australian Bureau of Statistics as consuming more than 11 drinks on a single occasion [5]), which is concentrated among 18- to 24-year-olds, accounts for the bulk of alcohol-related injury and a substantial proportion of alcohol-related morbidity and mortality [9]. Preventing risky drinking among young Australians is also likely to have flow-on effects in reducing the level of long-term alcohol-related harm in years to come.

Rather, these data demonstrate that there is a clear need to pay attention to the substantial and growing problem of heavy drinking among mid-life Australians. With the implementation of the National Binge Drinking Strategy drawing to a close, and the expiration of our National Alcohol Strategy 2006–2011 [10], it is an opportune time to reflect on the broader picture of alcohol-related harm in Australia. In this context, we need to refocus attention on strategies to tackle heavy alcohol use among older Australians.

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