

Heavy Drinking Slashes Survival in Severe Illness

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CHICAGO — A history of heavy drinking cuts the life span by up to 25 years across all major chronic diseases, Hsiao-ye Yi, Ph.D., reported at the annual meeting of the Research Society on Alcoholism.

The effect seems particularly pronounced in women drinkers, who lose their survival advantage over men at an early age, wrote Dr. Yi, an epidemiologist with the National Institute on Alcohol Abuse and Alcoholism, and his coauthors.

“When no heavy alcohol use is involved, women have a lower cumulative probability of death from all major chronic diseases from age 40 and throughout the rest of life. However, when heavy alcohol use is involved, the cumulative probability of death for women does not diverge significantly from that for men until close to age 55, suggesting an undue effect of alcohol on women,” they wrote.

The researchers examined death records from 1999 to 2004 from the Multiple Causes of Death database, maintained by the National Center for Health Statistics. The database contained information on more than 14.5 million deaths in the United States over that time period. Each death record contained one underlying cause of death and up to 20 contributing causes, all identified by International Classification of Diseases (ICD) codes.

They divided chronic diseases into five categories: malignant neoplasms, diabetes mellitus, neuropsychiatric conditions, cardiovascular disease, and digestive disease, each with detailed subcategories.

The death records did not contain direct drinking measures, so the researchers presumed heavy drinking when they saw any of 12 ICD-10 codes for alcohol-induced medical conditions (Cushing’s syndrome; mental/behavioral disorders; degeneration of nervous system; alcohol in blood; alcohol poisoning, accidental or undetermined; and alcoholic polyneuropathy, myopathy, gastritis, liver disease, or chronic pancreatitis).

They then compared the cumulative probability of death by age and the mean age at death between the drinking and nondrinking groups within each of the disease categories. “The analysis of all deaths from major chronic diseases showed that heavy alcohol use is associated with a higher cumulative probability of death beginning as early as age 35,” they reported. “The gap between heavy alcohol use and no heavy alcohol use in the cumulative probability of death from major chronic diseases becomes increasingly wider throughout life until around age 70.”

The average years of life lost due to heavy drinking varied by disease, ranging from 25 years for neuropsychiatric conditions to 7 years for malignant neoplasms, and was generally much greater in women than in men.

Heavy drinkers with neuropsychiatric conditions lost the most years of life, com-

pared with similar patients who didn’t drink heavily. Those with cardiovascular disease died a mean of 17 years earlier, and those with digestive diseases, a mean of 15 years earlier. Diabetics who drank heavily lost a mean of 16 years, compared with those without heavy drinking. Heavy alcohol use also shortened the life spans of those with cancer by more than 7 years. ■

Behavioral Changes Sustained

Freshmen Drinking from page 1

the effects of drinking on women.

The project recruited participants through a random sample e-mail invitation. The intervention group, which involved 126 freshmen women, received a 120-minute group session (8-12 members) lead by two women trained in motivational interviewing. The group completed a 3-month Alcohol Timeline Followback of their drinking behavior, and a discussion of alcohol consumption expectations along with normative feedback comparing

their drinking with the drinking of the average college freshman woman. The group then entered an open-ended discussion about their reasons for drinking, a decisional balance exercise weighing the pros and cons of drinking less, and a personal goal-setting session.

The major aim was to identify whatever discrepancy there was between their personal desires and goals and what was really going on in their life with alcohol, and then to “use that to prompt them to

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The correlation of pharmacodynamic data to clinical effect has not been established.

¹This pharmacodynamic study measured the median percentage of time gastric pH >4 as 18.6 hours over 24 hours with ZEGERID 40 mg Powder for Oral Suspension in healthy subjects (N=24).

²Median values for the time gastric pH >4 for patients taking ZEGERID Powder for Oral Suspension and Capsules, 20 mg and 40 mg doses, ranged from 12.2 to 18.6 hours on Day 7.

[†]Powder for oral suspension.

[‡]Gastric pH >4 ranged from 12.2 to 18.6 hours on Day 7.³

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