Minimum Pricing for Alcohol Would Affect Poorer, High-Risk Drinkers

Setting a minimum price for alcohol would benefit the health of high-risk drinkers with low incomes but have little effect on moderate drinkers with low incomes, according to a new study.

Using a computer model that analyses the way people respond to price changes, British researchers examined how a minimum price of about 73 cents per unit of alcohol would affect the drinking habits of different groups of people.

There are about two units in a pint of beer, nine to 10 units in a bottle of wine, and one unit in a 25 milliliter shot of spirits, the University of Sheffield researchers explained.

The study results showed that this minimum price would have the greatest impact on the 5 percent of the population who are high-risk drinkers, defined as more than 50 units of alcohol a week for men and more than 35 units a week for women.

Three-quarters of the total decrease in alcohol consumption caused by a minimum price would occur among high-risk drinkers, leading to 860 fewer alcohol-related deaths and nearly 30,000 fewer hospital admissions per year in this group of people, the researchers reported.

Minimum pricing would have the greatest effect on high-risk drinkers with low incomes, who spend an average of $4,410 a year on alcohol. It's estimated that these people would reduce their alcohol consumption by nearly 300 units a year per person if the minimum price of alcohol was 73 cents per unit, according to the study published online Feb. 10 in The Lancet.

That minimum price would have little effect on moderate drinkers, who would reduce their alcohol consumption by just one to four units a year per person, the study found.

"Overall, the impact of a minimum unit price policy on moderate drinkers would be very small, irrespective of income. The policy would mainly affect harmful drinkers, and it is the low-income harmful drinkers -- who purchase more alcohol below the minimum unit price threshold than any other group -- who would be most affected," study lead author Dr. John Holmes said in a journal

news release.

"Policy makers need to balance larger reductions in consumption by harmful drinkers on a low income against the large health gains that could be experienced in this group from reductions in alcohol-related illness and death," he added.

Added study co-author Petra Meier, director of the Sheffield Alcohol Research Group: "Our study finds no evidence to support the concerns highlighted by government and the alcohol industry that minimum unit pricing would penalize responsible drinkers on low incomes. Instead, minimum unit pricing is a policy that is targeted at those who consume large quantities of cheap alcohol. By significantly lowering rates of ill health and premature deaths in this group, it is likely to contribute to the reduction of health inequalities."

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Source: HealthDay News. Robert Preidt, HealthDay Reporter