Moderate Alcohol Consumption and Health

By ACSH Staff — February 1, 1999

This report represents a work in progress. ACSH realizes that research in the areas of health impacts of alcoholic beverages is continuing, and we will update this paper as new research and insights are received. We welcome input from readers.

Executive Summary

- Moderate drinking is defined as not more than two standard drinks per day for a man age 65 or under, and not more than one standard drink per day for a man over the age of 65 or a woman of any age. A standard drink consists of one 12-ounce can of beer, one 5-ounce glass of wine, or a mixed drink containing 1.5 ounces of 80-proof spirits. Each of these standard servings contains an equivalent amount of alcohol.
- No one should drink alcohol, even in moderation, before operating a motor vehicle or engaging in other activities that involve attention and skill or physical risk. Such activities include operating machinery, boating, swimming, diving, and skiing.
- Some people need to abstain from or minimize their use of alcohol for health reasons. These people include individuals with a personal or family history of alcohol abuse; persons who cannot keep their drinking moderate; women who are pregnant or who are planning to conceive; and individuals who are taking prescription or over-the-counter medications that can interact adversely with alcohol or with other components of alcoholic beverages.
- Among middle-aged and elderly people, moderate drinkers have lower mortality rates than do abstainers. This difference is due largely to the protective effect of alcohol against coronary heart disease a positive effect that appears to outweigh any possible adverse effects of moderate drinking.
- The potential health benefits of moderate drinking in middle-aged and elderly people can be achieved at consumption levels as low as one half of one standard drink per day.
- Among younger people men who have not reached their 40s and premenopausal women no beneficial effect of moderate drinking on mortality has been demonstrated. Young people would not be expected to benefit from the consumption of alcoholic beverages because the causes of death that alcohol protects against (primarily coronary heart disease) are rare among young adults. It is possible that moderate drinking by young people might reduce their risk of heart disease in later life, but this has not been demonstrated.
- People who drink alcohol in amounts that exceed the limits of moderation have higher death rates than do moderate drinkers. Heavy drinking is associated with severe risks to the safety of the drinker and others. Heavy drinking is also associated with increased risks of liver disease, high blood pressure, alcohol-related heart diseases, and some types of cancer.
- The consumption of small amounts of alcohol on a regular basis is more healthful than the sporadic consumption of larger amounts of alcohol. The pattern of drinking that includes
episodes of heavy intake (e.g., weekend splurges alternating with weekday abstinence) is associated with health and safety risks. This pattern of drinking should not be regarded as truly moderate or healthful, even if the individual’s total weekly alcohol intake is within the limits of moderation.

- The choice to drink or not to drink alcoholic beverages should be an individual matter reflecting each person’s cultural values, religious beliefs, and personal preferences as well as health considerations. Both moderate drinking and abstention are compatible with a healthy lifestyle. Although moderate drinking has potential health benefits for some people, no one should ever feel pressured to drink alcoholic beverages for health reasons. Those who choose to abstain can attempt to reduce their risk of coronary heart disease in other ways.

By Kathleen Meister, M.S.
Project Coordinator: Ruth Kava, Ph.D., R.D., Director of Nutrition
Art Director: Yelena Ponirovskaya

The American Council on Science and Health gratefully acknowledges the comments and contributions of the following individuals who reviewed this work:

J. B. Allred, Ph.D. The Ohio State University
M. B. Bracken, Ph.D., M.P.H. Yale University
C. J. Carr, Ph.D. Columbia, MD
R. A. Coulombe, Jr., Ph.D. Utah State University
M. H. Criqui, M.D., M.P.H. University of California, San Diego
J. J. DeCosse, M.D., Ph.D. New York Hospital-Cornell Medical Center
M. A. Dubick, Ph.D. U.S. Army Institute of Surgical Research
R. L. DuPont, M.D. Rockville, MD
A. Furst, Sc.D., Ph.D. University of San Francisco
D. M. Goldberg, M.D., Ph.D. Banting Institute
D. B. Heath, Ph.D. Brown University
R. J. Jaeger, Ph.D. Westwood, NJ
R. Kava, Ph.D., R.D. ACSH
A. M. Kirsch, M.D. Highland Heights, OH
A. L. Klatsky, M.D. Kaiser Permanente Medical Center, Oakland, CA
L. Langseth, Dr.Ph. Palisades, NY
R. P. Maickel, Ph.D. Purdue University
ACSH accepts unrestricted grants on the condition that it is solely responsible for the conduct of its research and the dissemination of its work to the public. The organization does not perform proprietary research, nor does it accept support from individual corporations for specific research projects. All contributions to ACSH—a publicly funded organization under Section 501(c)(3) of the Internal Revenue Code—are tax deductible.

Moderate Alcohol Consumption and Health [1] by American Council on Science and Health [2] on Scribd

COPYRIGHT © 1978-2016 BY THE AMERICAN COUNCIL ON SCIENCE AND HEALTH

Source URL: https://www.acsh.org/news/1999/02/01/moderate-alcohol-consumption-and-health

Links