KEY MESSAGE OF AWARH 2017

The WHO European region has the highest proportion of total ill health and premature death due to alcohol. One fifth of the population aged 15 years and above report heavy episodic drinking at least once a week. Alcohol is known to be a causal factor in over 60 diseases and conditions, including at least 7 types of cancer. 1 in 8 alcohol-related deaths are due to cancer.

Given the above statistics, the AWARH partners and the endorsers call on the European Parliament, European Commission and the Member States to ensure that:

1. The message regarding alcohol included in the European Code Against Cancer is widely disseminated: “If you drink alcohol of any type, limit your intake. Not drinking alcohol is better for cancer prevention”

2. Member States and the European Commission implement the WHO’s European action plan to reduce the harmful use of alcohol 2012-2020

3. Effective and evidence-based policies are implemented that would allow Member States and the European Union to meet their obligations under Goal 3 of the Sustainable Development Goals to strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.

MEPs AGAINST CANCER AND MEP LIVER GROUP MEETING

INTRODUCTION BY THE HOST

MEP Biljana Borzan (S&D, Croatia) welcomed AWARH partners, experts, policymakers and other stakeholders at the European Parliament on 23 November 2017. MEP Borzan underlined the importance of the topic which all Europeans can relate to. MEP Borzan stated that alcohol had been her focus at the EP since the start of her mandate and that there were not enough alcohol control policies in place at the EU nor at the MS level. Despite MEP Borzan and like-minded MEPs calling for new EU alcohol strategy, the willingness of the Commission seemed to be lacking for the moment.
EXPERT PRESENTATIONS

I. Alcohol & Cancer by Marilys Corbex, PhD, WHO Europe

Europe has the highest alcohol consumption in the world with 70% of Europeans who drink alcohol and 19.4 litres per year (215 bottles of wine) for men and 12.9 litres for women. Cancer accounts for 12% of alcohol-related deaths following cardio-vascular diseases, injuries and liver cirrhosis. 7 types of cancer are related to alcohol consumption: mouth & upper throat, larynx, oesophagus, breast, liver and bowel. Public is not always aware of the relationship between alcohol and cancer and there is a need for more campaigns and helping government implement policies such as (i) setting a minimum price for alcohol unit, (ii) curbing advertisement or (iii) limiting availability of alcohol in shops which were indicated as three ‘best buys’ areas of action, followed by (iv) labelling, (v) taxation etc.

II. Alcohol & Digestive Cancers, Thierry Ponchon, UEG

Ethanol and acetaldehyde (liver metabolism of alcohol) have direct carcinogenic effect. Moreover, alcohol indirectly increases absorption of tobacco carcinogens and decreases absorption of protecting nutrients (vitamins, folate etc.). Alcohol is responsible for 79,000 cases of digestive cancers in Europe each year. For example, colorectal cancer is the second most common cancer in Europe accounting for 13% of all cancers. One alcoholic drink a day increases the risk of colorectal cancer by 21%. Need for change in regulation and cultural habits. Vast majority of public unaware of the link between cancer and alcohol consumption.

III. Awareness Campaign of the Danish Cancer Society by Anne Friis Krakup and Dorte Dahl

90% of adult Danes associate alcohol as an important aspect of their life. In Denmark, 12% of breast cancer and 5% of all cancers prevalence is connected to alcohol. Only 22% of population aware of the alcohol-related cancer risk (10% for breast cancer). Campaign to raise awareness among population between 35 and 55 years old launched in November 2017 (separate campaign for youth 15-25 years old). Humour and cultural aspects injected in short films. Campaign reached more than 1.5 million people (≈ 27% of Danish population) within the first week.

IV. Alcohol & Cancer by Ana Sarasa Renedo, European Commission

JRC with its 3000 staff members provides independent scientific evidence for the EU policies. The Health in Society Unit provides (i) European Cancer Information System (ECIS) collecting data from different cancer registries, providing harmonisation support and IT tools, and disseminating and analysing data; (ii) the European Initiative on Breast Cancer (ECIBC) launched to address inequalities and diversity of care, mapping access to breast cancer screening in Europe and providing guidelines for quality assurance; (iii) prevention of non-communicable diseases with key health determinants: nutrition, alcohol and physical activity concentrating on impact assessment, policy analysis, monitoring and evaluation, foresight and capacity building; and (iv) EU Platform on rare disease registration.
Alcohol and Cancer - An Avoidable Risk

"If you drink alcohol of any type, limit your intake. Not drinking alcohol is better for cancer prevention"
- European Code Against Cancer

Worldwide, the WHO European Region has the highest proportion of total ill health and premature death due to alcohol

Over one fifth of the European population aged 15 years and above report heavy episodic drinking* at least once a week

Alcohol is a causal factor in more than 60 diseases and conditions, including 7 types of cancer: Mouth, Upper throat, Larynx, Oesophagus, Breast, Liver and Bowel

12% of cancer cases
Around 12% of cancer cases worldwide are linked to alcohol consumption

60+ diseases, including
Alcohol is a causal factor in more than 60 diseases and conditions, including 7 types of cancer: Mouth, Upper throat, Larynx, Oesophagus, Breast, Liver and Bowel

5.9% deaths
Globally, alcohol causes 5.9% deaths (as at 2012), of which 1 in 8 are due to cancer

Breast cancer
The relative risk of breast cancer increases with alcohol intake, increasing by 7.1% for each additional 10 g per day intake of alcohol, i.e. for each extra unit/drink of alcohol consumed on a daily basis

Bowel cancer
Lifetime alcohol intake can increase the risk of bowel cancer by 23%

* five or more drinks on an occasion, or 60g pure alcohol
** one drink = 12g pure alcohol
Alcohol consumption is a known risk factor for digestive cancers, including oesophageal, liver, pancreatic, colorectal and gastric cancer.

People who drink more than 3 drinks per day increase their risk of liver cancer by 16%.

People who consume 50 or more grams of alcohol per day have at least a two to three times greater risk of developing head and neck cancers than non-drinkers.

More than 4 drinks resulted in a 5% increase in the risk of developing mouth and pharynx cancers, compared to people who never drank or drank occasionally.

** one drink = 12g pure alcohol

European Parliament Event

Lunch Debate on “Alcohol and Cancer”

hosted by Biljana Borzan MEP

Date: 23rd November 2017
12:00 – 14:30 CET
Room: Paul-Henri Spaak – P1C047

12:00 – 12:30 Registrations and Buffet Lunch
12:30 - 12:40 Welcome, aims and objectives
Biljana Borzan MEP
12:40 - 12:50 MAC and MEP Liver Group Introductions
12:50 - 13:10 Setting the scene – Marilys Anne Corbex, World Health Organization
13:10 – 13:30 Alcohol and Cancer – Thierry Ponchon, United European Gastroenterology
13:30 – 13:50 Raising Awareness About Alcohol and Cancer – Anne Friis Krarup & Dorte Dahl, Danish Cancer Society
13:50 - 14:10 European Commission Actions – Ana Sarasa Renedo, Joint Research Centre
14:10 – 14:15 The patient perspective – Rita Nilsen, Manager, Stiftelsen Retretten
14:15 – 14:25 Questions and discussion
14:25 - 14:30 Closing Remarks – Mariann Skar, European Alcohol Policy Alliance

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