



# **Alcohol Statistics Scotland 2005**

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ISD Scotland Publications  
Information Services  
NHS National Services Scotland  
Gyle Square  
1 South Gyle Crescent  
Edinburgh EH12 9EB  
Tel: 0131-275-6233  
Email: [isdpublishing@isd.csa.scot.nhs.uk](mailto:isdpublishing@isd.csa.scot.nhs.uk)

Publication enquiries:

National Alcohol Information Resource  
NHS National Services Scotland  
Gyle Square  
1 South Gyle Crescent  
Edinburgh EH12 9EB  
Tel: 0131-275-7777  
Email: [alcohol.information@isd.csa.scot.nhs.uk](mailto:alcohol.information@isd.csa.scot.nhs.uk)

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## 1. Introduction

### Content and structure

*Alcohol Statistics Scotland 2005* brings together information from a wide range of sources on alcohol in Scotland.

There are four topic-based sections:

- The **Alcohol Market** reports on aspects such as relative price and availability of alcohol.
- **Alcohol Consumption** reports on levels and patterns of alcohol consumption in different population groups.
- The section on **Social Harm** reports on a range of social problems that can arise from excess alcohol consumption such as violence and drunk driving.
- The section on **Health Harm** reports on consequences of excessive drinking such as disease and death.
- A **Technical Appendix** includes data tables, further information on data sources, a glossary of key terms and advice on data interpretation.

Every effort has been made to report the most recently available information for Scotland. If appropriate, where such information is not available, UK or British information has been reported.

All information is referenced with references at the end of each section, including a web link if available. Where ISD Scotland has undertaken analysis, these data can be found in the data tables in the Technical Appendix.

### The National Alcohol Information Resource at ISD Scotland

Alcohol Statistics Scotland 2005 is produced by the National Alcohol Information Resource (NAIR). NAIR is part of the Substance Misuse Programme at ISD Scotland.

The role of NAIR is to:

- Act as a focal point for alcohol information in Scotland
- Collect, collate and disseminate quality assured statistics
- Provide support for key stakeholders, in particular, alcohol action teams and the Scottish Executive.

NAIR manage the Alcohol Information Scotland website  
[www.alcoholinformation.isdscotland.org](http://www.alcoholinformation.isdscotland.org)

## 2. The Alcohol Market

### 2.1 Introduction

A variety of factors can influence the consumption of alcohol. These include the price of alcohol, its availability, its promotion and the product itself. This section reports on these factors. It also reports on other economic data including consumer spending on, and government revenue from, alcohol.

For some facts, UK or British data has been reported, as there is no Scottish level data available.

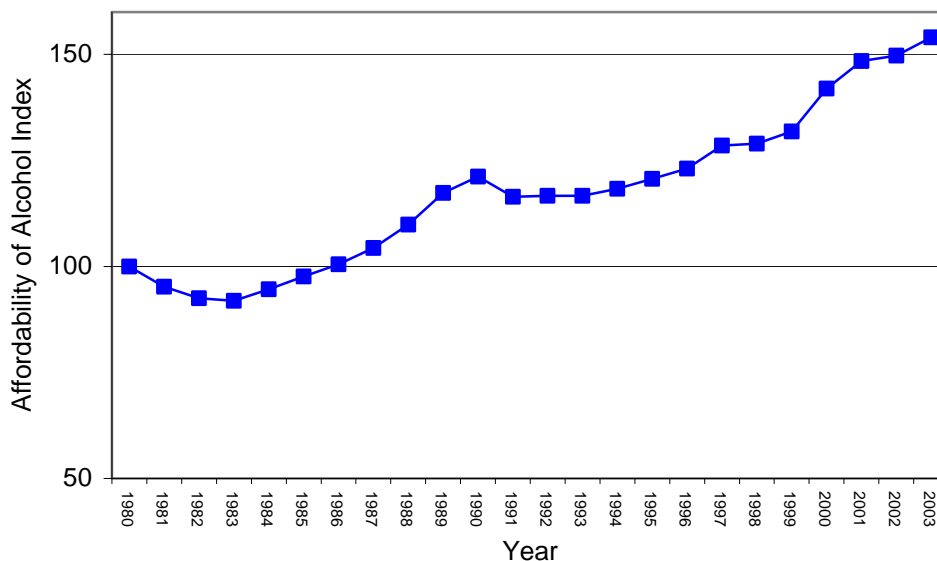
### 2.2 Income and expenditure on alcohol

#### Alcohol was 54% more affordable in 2003 than in 1980

- The price of alcohol increased 236% between 1980 and 2003. Relative to prices as a whole, the increase was 24%.
- Because household disposable income has increased, alcohol was 54% more affordable in 2003 than in 1980.

[Source: Department of Health<sup>1</sup>][Chart 2.1]

**Chart 2.1: Index of the affordability of alcohol: United Kingdom, 1980-2003**



*Indices (1980 = 100)*

[Source: Department of Health<sup>2</sup>]

#### UK households spent £39,143 million on alcohol in 2003

- In 2003, UK households spent £39,143 million on alcohol.
  - Households' relative expenditure on alcohol is lower than 20 years ago (5.7% in 2003, down from 7.5% in 1980).
  - In 2003, it was estimated that each adult in the UK spent £822.12 on alcohol.
- [Source: Department of Health<sup>3</sup> and HMCE<sup>4</sup>]

**Scottish households spent more on 'brought home' alcoholic drinks and less on alcoholic drinks 'away from home' than English households**

- Scottish households spent an average £6.30 per week on 'brought home' alcoholic drinks and £7.90 on alcoholic drinks 'away from home'. English figures were £5.80 and £8.80 respectively.  
[Source: Expenditure and Food Survey<sup>5</sup>]

**Almost a quarter of fifteen year olds in Scotland, who drank alcohol at least weekly, spent more than £10 per week on alcohol**

- In 2002, 23% of 15 year old and 13% of 13 year old regular drinkers spent more than £10 per week on alcohol.  
[Source: SALSUS 2002<sup>6</sup>]

**Almost £200 million was spent on alcohol advertising in the UK in 2002**

- In 2002, £188 million was spent on alcohol advertising in the UK. This figure does not include sponsorship and special promotions expenditure.  
[Source: Nielsen Media Research, WARC<sup>7</sup>]

**In 2002/03 the UK government received £12,930 million from duty on alcohol**

- £7,298 million was received in excise duty.
- An estimated £5,630 million was received in VAT.  
[Source: HM Customs & Excise<sup>8</sup>]

## 2.3 Product

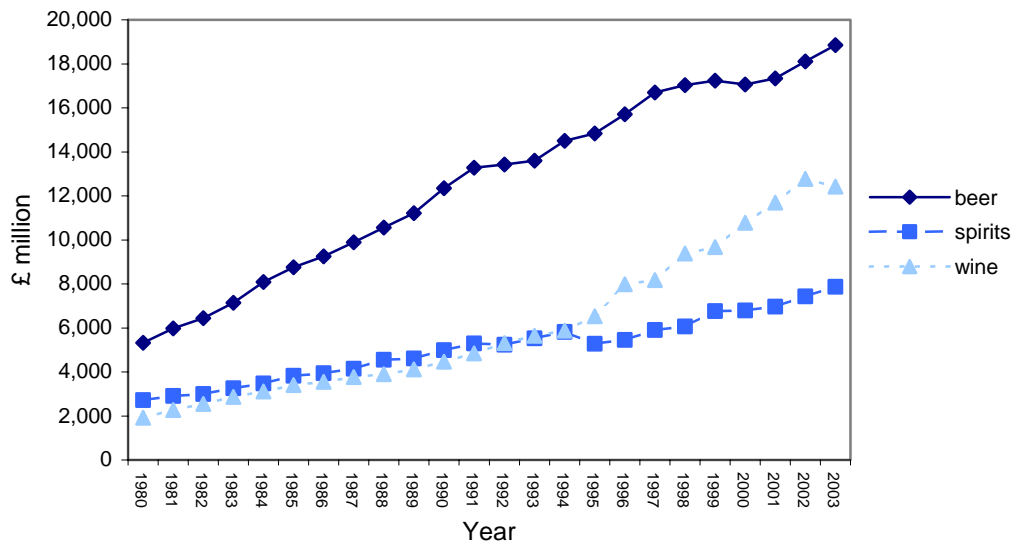
**Average strength of beer and wine is increasing**

- The average estimated strength of table wine increased from 11.40% in 1994/95 to 11.85% in 2003/04.
- The average estimated strength of beer increased from 4.06% in 1994/95 to 4.19% in 2003/04.  
[Source: HM Customs & Excise<sup>9</sup>]

**Wine accounts for increase in proportion of consumer spend**

- Between 1980 and 2003, there has been a rise in the proportion of household expenditure spent on wine (19% to 32%) and a decrease in the proportion spent on spirits (27% to 20%) and beer (53% to 48%).  
[Source: Department of Health<sup>10</sup>][Chart 2.2]

**Chart 2.2: Household expenditure on beer, wine and spirits: United Kingdom, 1980-2003**



[Source: Department of Health<sup>11</sup>]

**Despite a gradual fall, beer still accounts for nearly half of alcohol market**

- The beer share of alcohol market (alcohol released for home consumption) fell from 56% in 1990/91 to 46% in 2003/04.
- The wine share of the alcohol market rose from 18% in 1990/91 to 27% in 2003/04.
- The spirit share has risen slightly in recent years to 22% in 2003/04 to almost equal the previous share of 21% in 1990/91.

[Source: Department of Health<sup>12</sup>]

**In 2004, men and women in Britain appear to have different tastes in drink type**

- Beer, lager and cider accounted for approximately two thirds (65%) of alcohol consumed by men compared to 27% for women.
- Wine accounted for 37% of alcohol consumed by women compared to 16% for men.
- Spirits accounted for 21% of alcohol consumed by women compared to 13% for men.
- Alcopops accounted for 10% of alcohol consumed by women compared to 3% for men.

[Source: ONS<sup>13</sup>]

**Alcopops were a popular drink for children in 2002**

- 57% of 13 year olds and 59% of 15 year olds drank alcopops in the previous week.
- More girls than boys drank alcopops (64% compared with 50% for 13 year olds and 67% compared with 51% for 15 year olds).
- Beer, lager or cider accounted for the most units of alcohol consumed by teenagers in the previous week for both age groups and both sexes.
- Between 1992 and 2000, consumption of alcopops rose from 0 to 2.8 units per week, spirits rose from 1.7 to 3 units per week and beer fell from 4.3 to 3.7 units per week.

[Source: SALSUS 2002<sup>14</sup> and Boreham<sup>15</sup>]

**More money was spent on ‘brought home’ spirits in Scotland than England**

- In Scotland, £2 per week was spent on ‘brought home’ spirits compared to £1.10 in England.
- Spirits accounted for 32% of expenditure on ‘brought home’ alcohol in Scotland, compared to 19% in England.  
[Source: HM Customs & Excise<sup>16</sup>]

**2.4 Place of purchase**

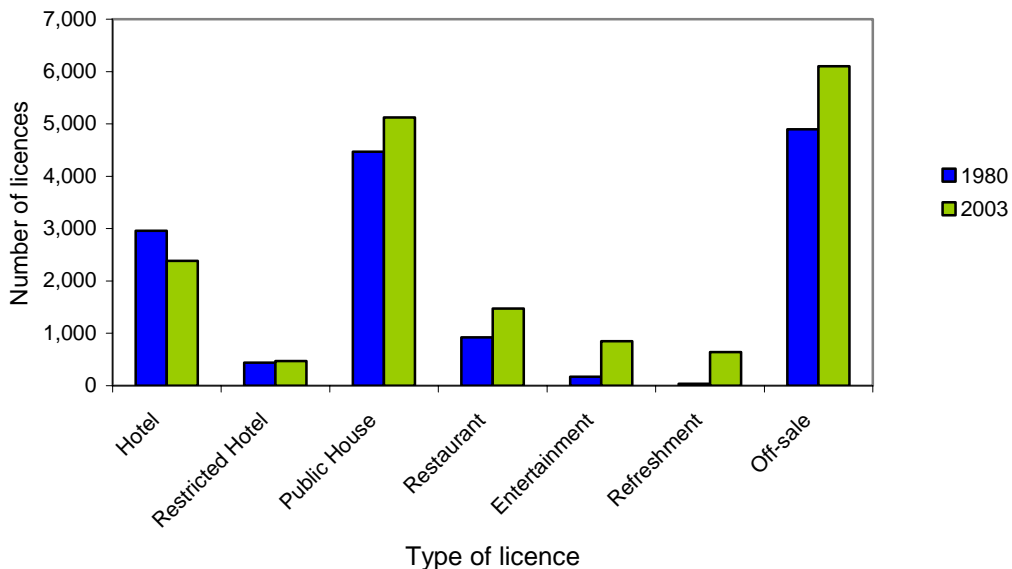
**There has been a rise in the number of liquor licences in Scotland since 1980**

- 13,892 liquor licences were in force in 1980 compared with 17,048 by 2003, a 23% rise.
- The number of licences per head of population has increased from 37 per 10,000 in 1980 to 43 per 10,000 in 2003.
- There has been little change in the overall number of licences in force over the past 5 years (17,048 liquor licences in 2003 compared to 17,318 licences in 1999).  
[Source: Scottish Executive<sup>17</sup>]

**Between 1980 and 2003, there were differences in the rate of increase of liquor licence categories**

- A 15% increase in public house licences (from 4,472 to 5,122).
- A 25% increase in off-sale licences (from 4,899 to 6,104).
- A four fold increase in entertainment licences (from 169 to 852).
- From a small base, there was a rise in refreshment licences from 34 to 642.  
[Source: Scottish Executive<sup>18</sup>][Chart 2.3]

**Chart 2.3: Number of liquor licences by type of licence: Scotland 1980 and 2003**



[Source: Scottish Executive<sup>19</sup>]

**The majority of on-sale licences in Scotland had regular extensions in 2003**

- 92% of public houses had regular extensions.
- 87% of hotels had regular extensions.
- 88% of registered clubs had regular extensions.  
[Source: Scottish Executive<sup>20</sup>]

**On average, there were 16 new applications for liquor licences each week in 2003**

- There were 806 new applications for liquor licences in 2003, 14% higher than 2002.
- The year 2000 had the highest number of applications in recent years (880).  
[Source: Scottish Executive<sup>21</sup>]

**There has been fluctuation in the number of liquor licensing offences in recent years but the overall trend appears to be downwards**

- There were 329 recorded offences against liquor licensing laws by licensed persons in 2003. This was 42% lower than the 1996 figure of 572.
- There were 604 'other' recorded offences against liquor licensing laws in 2003. This was 30% lower than the 1996 figure of 865 offences.  
[Source: Scottish Executive. Table A1]

**In 2002, 15 year olds reported buying alcohol from a range of commercial premises**

- 24% reported buying alcohol from a shop.
- 23% reported buying alcohol from an off-licence.
- 11% reported buying alcohol from a pub.
- 7% reported buying alcohol from a supermarket.  
[Source: SALSUS 2002<sup>22</sup>]

**Between 1996 and 2002, there have been changes in where 15 year olds purchase alcohol**

- In 2002, 23% of 15 year olds reported buying alcohol from off-licences, compared with 33% in 1996.
- In 2002, 11% of 15 year olds reported purchasing alcohol from pubs, bars and 8% from clubs/discos, compared with 1996 when the figures were 7% and 5% respectively.
- In 2002, 26% of 15 year olds reported purchasing alcohol from supermarkets/shops, compared with 22% in 1996.  
[Source: SALSUS 2002<sup>23</sup>]

**Between 1996 and 2003, there has been a fall in the number of recorded offences of underage alcohol sales**

- There were 283 recorded offences of sale of alcohol to a person under 18 in 2003. This was 31% fewer offences than in 1996 (411 offences).
- There were 60 recorded offences of a person under 18 buying alcohol or consuming it in a bar in 2003. This was 69% lower than in 1996 (194 offences).
- There were 273 recorded offences of purchasing alcohol for consumption by a person under 18 in 2003. This was 23% lower than in 1996 (354 offences).  
[Source: Scottish Executive. Table A1]

**In the UK, in 2003, more money was spent on alcohol at on-trade premises such as pubs and restaurants than off-trade, such as off-licences and supermarkets**

- 31% (£12,051 million) of consumer expenditure on alcoholic drinks was retail (off-trade) compared with 69% (£27,092 million) on-sale (on trade).  
[Source: ONS Consumer Trends<sup>24</sup>]

**In Britain, men were more likely than women to buy alcohol in a bar**

- In 2004, 33% of men reported buying alcohol in a bar at least once a week compared to 13% of women.  
[Source: ONS<sup>25</sup>]

**One in three adults in Britain had bought alcohol abroad or duty free in the previous year**

- In 2004, 34% of adults had bought alcohol either abroad or duty free at any time in the past year.  
[Source: ONS<sup>26</sup>]

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- <sup>10</sup> Department of Health (2004) **Statistics on Alcohol: England, 2004** [Internet] DH <<http://www.publications.doh.gov.uk/public/sb0415.htm>> Table 27 [Accessed 10 January 2005]
- <sup>11</sup> Department of Health (2004) **Statistics on Alcohol: England, 2004** [Internet] DH <<http://www.publications.doh.gov.uk/public/sb0415.htm>> Table 27 [Accessed 10 January 2005]
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<sup>18</sup> Scottish Executive. (2004) **Liquor Licensing in Scotland 1999-2003**. [Internet] Scottish Executive <<http://www.scotland.gov.uk/stats/bulletins/00333-00.asp>> Table 1 [Accessed 10 January 2005]

<sup>19</sup> Scottish Executive. (2004) **Liquor Licensing in Scotland 1999-2003**. [Internet] Scottish Executive <<http://www.scotland.gov.uk/stats/bulletins/00333-00.asp>> Table 1 [Accessed 10 January 2005]

<sup>20</sup> Scottish Executive. (2004) **Liquor Licensing in Scotland 1999-2003**. [Internet] Scottish Executive <<http://www.scotland.gov.uk/stats/bulletins/00333-00.asp>> Tables 6 and 10 [Accessed 10 January 2005]

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### 3. Alcohol Consumption

#### 3.1 Introduction

The majority of people in Scotland drink alcohol. Alcohol may have a beneficial effect for certain people. However, drinking excessively can lead to a range of health and social problems. In recognition of this, UK governments have produced sensible drinking guidelines based on units of alcohol. Concern about certain patterns of drinking, such as 'binge drinking', led to a change from weekly limits to daily benchmarks in 1995<sup>27</sup>. Current daily benchmarks are 3-4 units for men and 2-3 units for women.

The information on alcohol consumption has been drawn from a range of sources. The most recent data on consumption for Scotland comes from the General Household Survey 2003. This has been supplemented with more in-depth information drawn from the 1998 Scottish Health Survey. Where Scottish level data is unavailable, UK or British data is reported.

#### 3.2 Knowledge of units and guidelines

**The majority of people in Scotland have heard of units of alcohol although fewer people know what the sensible drinking guidelines are**

- In recent years, around 15% of respondents said they did not know what a unit of alcohol was.
- In 2003, 30% of drinkers said they did not know what the recommended weekly limits were.
- In 2003, 1 in 5 (21%) drinkers knew what recommended weekly limits were. One third (32%) thought the limits were lower than they were and one in six (17%) thought the limits were higher.  
[Source: HEPS<sup>28</sup>]

**In 2004, 8 out of 10 adults in Britain had heard of measuring alcohol consumption by units**

- 83% of adults said that they had heard of measuring alcohol consumption by units.
- There was little difference between men and women having heard of alcohol units (84% and 83% respectively).
- More than 9 out of 10 of those exceeding sensible weekly limits had heard of units of alcohol.
- Younger respondents were more aware of alcohol units than older respondents (88% of 25-44 year olds compared to 68% of those aged 65 and over).
- There was a marked difference in knowledge of units between different social classes (92% of managerial & professional occupations had heard of alcohol units compared to 79% of routine and manual occupations) and those who had never worked or were long-term unemployed were the least likely to have heard of measuring alcohol by units.  
[Source: ONS<sup>29</sup>]

**Knowledge of the unit content of different alcohol drinks varies and has increased since 1998**

In 2004:

- Over a half (56%) of the respondents in Britain thought half a pint of beer was one unit (compared with 45% in 1998).
- Approximately 2 in 3 people (67%) thought one unit was equivalent to a glass of wine (compared with 53% in 1998).
- Just under 2 in 3 people (64%) thought one unit was equivalent to a single measure of spirits (compared with 55% in 1998).

[Source: ONS<sup>30</sup>]

**In 2004, 3 out of 5 people in Britain were aware of daily benchmarks**

- 61% of people in Britain had heard of daily benchmarks.
- Awareness for men and women was similar, 62% and 61% respectively.
- Those who exceeded sensible weekly limits were most likely to have heard of daily benchmarks, with 74% having heard of them.

[Source: ONS<sup>31</sup>]

**Not all of those who had heard of daily benchmarks knew what the correct levels were**

In 2004:

- 56% of male respondents who had heard of daily benchmarks thought that for men it was 4 units or less, 16% thought it was 4 units and 24% thought it was 3 units.
- Among women who had heard of daily benchmarks, 54% thought that for women it was 3 units or less, 12% thought it was 3 units whilst 36% thought it was 2 units.
- Knowledge of daily benchmarks was higher among both men and women in 2004 compared to 1997 (men, 56% up from 46%, and women 54% up from 45%).

[Source: ONS<sup>32</sup>]

### **3.3 UK alcohol consumption**

**Alcohol released for consumption in the UK has risen over the past decade**

- In 2003/04, the equivalent of 11.6 litres of 100% alcohol was released for consumption in the UK per adult (aged 16 and over).
- There has been a 23% rise in alcohol released for consumption in the past ten years (from 9.4 litres of 100% alcohol per adult in 1993/94).

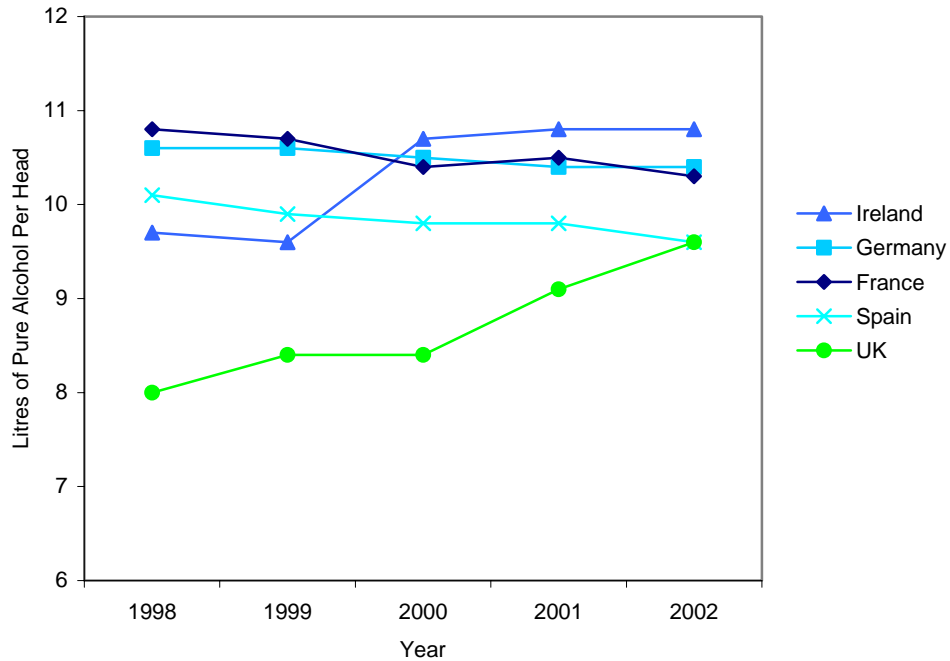
[Source: HM Customs & Excise<sup>33</sup>]

**In 2002, the UK was in the top 10 in the world for per capita alcohol consumption**

- In 2002, the UK was ranked 9<sup>th</sup> out of 23 EU countries for alcohol consumption per head of population and also 9<sup>th</sup> in the world.
- In 2002, UK consumption was 9.6 litres of pure alcohol per head of population. Luxembourg consumption was highest, in the European Union and the World, at 11.9 litres per head.
- UK population alcohol consumption has risen in recent years (1998-2002) from 8 to 9.6 litres of pure alcohol per head of population.
- Ireland also experienced a rise during this period (from 9.7 to 10.8 litres of pure alcohol per head) whilst population consumption in some of the heavier drinking European Union countries were showing downward trends e.g. France (10.8 to 10.3 litres per head), Germany (10.6 to 10.4 litres per head) and Spain (10.1 to 9.6 litres per head).

[Source: HM Customs & Excise<sup>34</sup>][Chart 3.1]

**Chart 3.1: Litres of pure alcohol consumption per head of population: Ireland, Germany, France, Spain and UK, 1998-2002**



[Source: HM Customs & Excise<sup>35</sup>]

### 3.4 Frequency of alcohol consumption in Scotland

#### Men were more likely than women to have had an alcoholic drink in the previous week

- In 2003, 73% of men and 59% of women aged 16 and over reported having had a drink on at least one day during the previous week.

[Source: General Household Survey. Table A2]

#### Older people tended to drink more frequently than younger people or not drink at all

In 1998:

- 29% of men aged 65-74 drank on 5 or more days of the week compared to 9% of those aged 16-24.
- 9% of women aged 65-74 drank on 5 or more days per week compared to 2% of those aged 16-24.
- 14% of men and 28% of women aged 65-74 reported never drinking or not drinking in the past year compared to 5% of men and 9% of women aged 16-24.

[Source: Scottish Health Survey 1998<sup>36</sup>]

#### Men were more likely to drink more frequently than women

- In 2003, 16% of men and 8% of women aged 16 and over had drunk on at least five of the preceding seven days. These proportions have been similar in recent years, with figures for 2001, 16% and 10% respectively.

[Source: General Household Survey. Table A3]

### 3.5 Daily alcohol consumption in Scotland

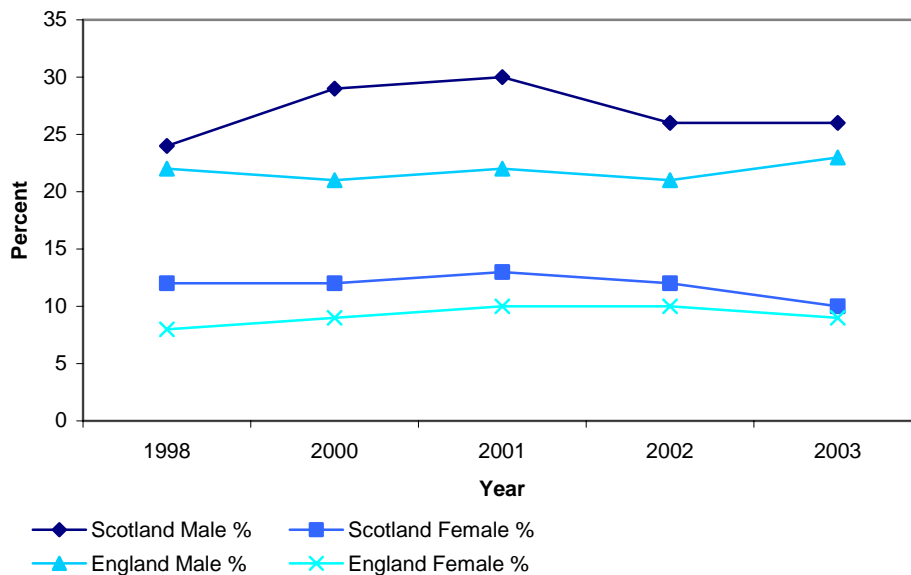
#### 2 in 5 men and 1 in 4 women reported exceeding daily benchmarks

- In 2003, 44% of men and 27% of women aged over 16 reported exceeding daily benchmarks in the previous week.  
[Source: General Household Survey 2003<sup>37</sup>]

#### 1 in 4 men and 1 in 10 women reported drinking more than double the daily benchmark

- In 2003, 26% of men and 10% of women aged 16 and over reported exceeding double the daily benchmark on at least one day in the previous week. These percentages were similar to the 1998 figures of 24% and 12% respectively.  
[Source: General Household Survey 2003<sup>38</sup>][Chart 3.2]

**Chart 3.2: Percent reporting drinking more than double daily benchmark on heaviest drinking day in past week: Scotland and England 1998-2003.**



[Source: General Household Survey<sup>39</sup>]

#### Young people were more likely to exceed daily benchmarks than older people

In 1998:

- 62% of young men aged 16-24 drank 8 or more units on their heaviest drinking day in the previous week compared to 16% of men aged 65-74.
- 49% of young women aged 16-24 drank 6 or more units on their heaviest drinking day in the past week compared to 3% of women aged 65-74.  
[Source: Scottish Health Survey 1998<sup>40</sup>]

#### People in social class IV and V were more likely to drink heavily on their heaviest drinking day than those in social class I and II

In 1998:

- For men aged 16-74, 36% in social class I and 41% in social class II drank 8 or more units on the heaviest drinking day compared to 50% in social class IV and 52% in social class V.
- For women aged 16-74, 17% in social class I and 22% in social class II drank 6 or more units on the heaviest drinking day compared to 33% in both social class IV and V.

[Source: Scottish Health Survey 1998<sup>41</sup>]

### 3.6 Weekly alcohol consumption in Scotland

#### The average weekly consumption of alcohol for men was more than double that for women

- In 2002, for those aged 16 and over, the average weekly alcohol consumption was 17.7 units for men and 6.7 units for women.
- In 2002, male average weekly consumption was 5% higher than in 1992 (when it was 16.9 units) whereas female average weekly consumption was 45% higher than in 1992 (when it was 4.6 units).  
[Source: General Household Survey. Table A4]

#### Young people aged 16-24 had the highest average weekly consumption

- In 1998, young men drank an average of 23 units per week while young women drank an average of 10 units per week.  
[Source: Scottish Health Survey 1998<sup>42</sup>]

#### Men in social class I drank less than men in social class V whereas women in social class I drank more than women in social class V

- In 1998, men aged 16-74, in social class V had a higher weekly average alcohol consumption (26 units) compared to men in social class I (19.1 units).
- In 1998, women aged 16-74, in social class V had a lower weekly average (5.4 units) compared to women in social class I (7.8 units).  
[Source: Scottish Health Survey<sup>43</sup>]

#### Men were twice as likely as women to exceed recommended weekly limits

- The proportion of men aged 16-64 exceeding 21 units a week was 33% in both 1995 and 1998.
- From 1995 to 1998, the proportion of women aged 16-64 exceeding 14 units a week increased from 13% to 15%.  
[Source: Scottish Health Survey 1998<sup>44</sup>]

#### Young people were most likely to exceed recommended weekly limits

- In 1998, 43% of young men aged 16-24 and 24% of young women exceeded weekly limits (compared with 37% and 18% respectively in 1995).  
[Source: Scottish Health Survey 1998<sup>45</sup>]

#### There were social class differences between women for exceeding weekly limits but little differences for men

- In 1998, 17% of women, aged 16-74, in social class I and 16% of women in social class II exceeded 14 units in the previous week compared to 12% in social class IV and 13% in social class V.
- In 1998, 32% of men, aged 16-74, in social class I and 33% of men in social class II exceeded 21 units in the previous week compared to 33% in social class IV and 35% in social class V.  
[Source: Scottish Health Survey 1998<sup>46</sup>]

### 3.7 Problem drinking in Scotland

#### **One in five male drinkers in Scotland had been drunk at least once a week in the previous three months**

In 1998:

- 20% of current male drinkers, aged 16-74, reported being drunk at least once a week on average in the past three months.
- 51% of men said they had been drunk at least once in the past three months.
- The likelihood of being drunk in the previous three months declined sharply with age, from 76% aged 16-24; 55% aged 35-44 and 14% aged 65-74.

[Source: Scottish Health Survey 1998<sup>47</sup>]

#### **Almost one in ten women drinkers in Scotland had been drunk at least once a week in the past 3 months**

In 1998:

- 9% of current women drinkers, aged 16-74, said they had been drunk at least once a week on average in the past three months.
- 30% of women said they had been drunk at least once in the last three months.
- The likelihood of being drunk in the last three months declined sharply with age, from 63% at ages 16-24 to 1% at ages 65-74.

[Source: Scottish Health Survey 1998<sup>48</sup>]

#### **Being drunk at least once a week in the past three months was strongly related to age**

In 1998:

- Current male drinkers aged 16-24, were the most likely to say they had been drunk at least once a week (45%); this proportion declined to 15% in men aged 35-44 and to 4% in men aged 65-74.
- 24% of current women drinkers aged 16-24 reported they had been drunk at least once a week, compared with 10% of those aged 25-34 and 1% of those aged 65-74.

[Source: Scottish Health Survey 1998<sup>49</sup>]

#### **Approximately 2 in 5 men and 1 in 7 women in Scotland drank alcohol hazardously**

In 2000:

- 41% of men, aged 16-74, were drinking at levels hazardous to their health (as measured by an AUDIT score of 8 or more).
- 15% of women, aged 16-74, were drinking hazardously.

[Source: ONS<sup>50</sup>]

#### **Approximately 1 in 8 men and 1 in 20 women in Scotland may have alcohol problems**

In 1998:

- Among current drinkers, 12% of men and 5% of women aged 16-74 were identified as possible problem drinkers (as measured by a CAGE score of 2 or more).
- The prevalence of problem drinking decreased with age: among men from 16% for those aged 16-24 to 7% for those aged 65-74; among women, from 8% to 2% respectively.

[Source: Scottish Health Survey 1998<sup>51</sup>]

**Approximately 1 in 8 men and 1 in 24 women in Scotland had some degree of alcohol dependence**

In 2000:

- Amongst men aged 16-74, 117 per 1000 had mild dependence, 13 per 1000 moderate dependence and 1 per 1000 severe dependence (as measured by a SAD-Q score of 4 or more).
  - Amongst women aged 16-74, 39 per 1000 had mild dependence, 1 per 1000 moderate dependence and 2 per 1000 severe dependence.
- [Source: ONS<sup>52</sup>]

### **3.8 Children's alcohol consumption in Scotland**

**The majority of 13 and 15 year olds have drunk alcohol**

In 2004:

- 67% of 13 year old boys and 69% of 13 year old girls reported having ever drunk alcohol.
- 86% of 15 year old boys and 90% of 15 year old girls reported they had ever drunk alcohol.

[Source: SALSUS 2004<sup>53</sup>]

**Less than a half of 15 year olds and a fifth of 13 year olds reported drinking alcohol in the past week**

In 2004:

- 40% of 15 year old boys and 46% of 15 year old girls reported drinking in the past week.
- Among 13 year olds, 20% of both boys and girls reported drinking in the past week.

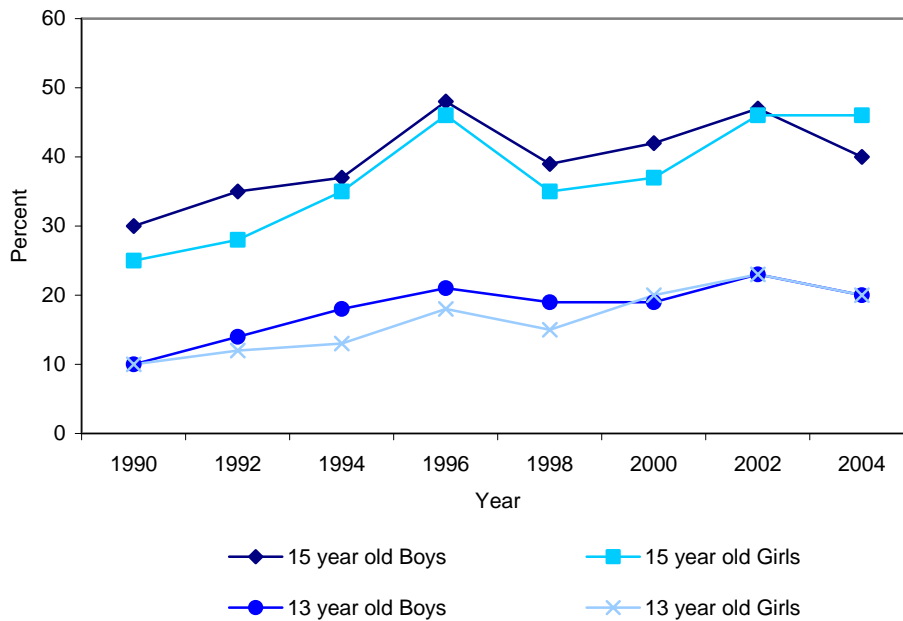
[Source: SALSUS 2004<sup>54</sup>]

**The proportion of 13 year olds reporting drinking alcohol in the past week has doubled since 1990.**

- The proportion of 13 year old boys and girls who reported drinking in the previous week rose from 10% in 1990 to 20% in 2004.
- The proportion of 15 year old boys reporting drinking in the previous week rose from 30% in 1990 to 40% in 2004.
- The proportion of 15 year old girls reporting drinking the previous week rose from 25% in 1990 to 46% in 2004.

[Source: SALSUS 2004<sup>55</sup>][Chart 3.3]

**Chart 3.3: Percentage of pupils who reported that they drank alcohol in the week before the survey, by age and sex: Scotland 1990-2004**



[Source: SALSUS 2004<sup>56</sup>]

#### 15 year olds drank on average more alcohol per week than 13 year olds

- In 2004, the average units of alcohol drunk by pupils who drank in the last week were 12 units of alcohol for 15 year olds, and 9 units for 13 year olds.

[Source: SALSUS 2004<sup>57</sup>]

#### Boys drank more alcohol on average than girls

In 2004:

- In each age group, boys who drank alcohol in the last week consumed more units of alcohol than girls. Fifteen year old boys drank an average of 13 units of alcohol a week, compared to 11 units consumed by 15 year old girls.
- Thirteen year old boys reported drinking an average of 10 units per week, compared with 13 year old girls who drank an average of 8 units per week.

[Source: SALSUS 2004<sup>58</sup>]

#### The majority of children who drank alcohol have been drunk

- In 2004, three out of four (75%) 15 year olds and 54% of 13 year olds who had drunk alcohol reported they had been drunk at least once in their lives. There was no difference between boys and girls.
- Almost one in five (19%) of 15 year olds and 6% of 13 year olds reported having been drunk more than 10 times.
- In 2002, the average age given by 15 year olds for first being drunk was 13.

[Source: SALSUS 2004<sup>59</sup> and SALSUS 2002<sup>60</sup>]

#### The majority of children who had ever drunk alcohol reported drinking more than 5 units on a single occasion at least once

- In 2004, 4 out of 5 (80%) of 15 year olds and 57% of 13 year olds reported drinking more than 5 drinks on the same occasion at least once.
- Seventeen percent (17%) of 15 year olds and 7% of 13 year olds had had five or more drinks on the same occasion more than 4 times in the past 30 days.

[Source: SALSUS 2004<sup>61</sup>]

**In 2004, among 15 year olds, 1 in 5 boys and 1 in 4 girls reported drinking above adult sensible weekly limits**

- 20% of 15 year old boys had drunk 21 or more units in the past week, 25% of 15 year old girls reported drinking 14 or more units of alcohol in the past week.
- 17% of 15 year olds and 11% of 13 year olds who drank in the past week reported drinking 21 or more units of alcohol in the past week.  
[Source: SALSUS 2004<sup>62</sup>]

**Pupils who drank alcohol more frequently were also more likely to show evidence of drinking to excess**

In 2002:

- The majority (92%) of the weekly drinkers had been drunk compared with just over half (56%) of less frequent drinkers.
- Almost all (94%) of weekly drinkers reported drinking more than five drinks on the same occasion at some time, compared with 59% of those who drank less frequently.
- On average, weekly drinkers had drunk 14 units of alcohol in the week before the survey compared with 6 units for less frequent drinkers (who reported drinking during that week).  
[Source: SALSUS 2002<sup>63</sup>]

### **3.9 Comparison of alcohol consumption between Scotland and England**

**Men in England drank alcohol more frequently than men in Scotland although men in Scotland were more likely to exceed daily benchmarks**

- In 2003, similar proportions of men aged 16 and over in Scotland (73%) and England (75%) drank in the previous week.
- 16% of men in Scotland compared with 23% of men in England drank on 5 or more days in the previous week.
- 44% of men in Scotland drank more than 4 units on at least one day in the previous week compared to 40% of men in England.
- 26% of men in Scotland drank more than 8 units on at least one day in the previous week compared to 23% of men in England.  
[Source: General Household Survey 2003<sup>64</sup>][Chart 3.2]

**Women in England drank more frequently than women in Scotland although women in Scotland were more likely to exceed daily benchmarks**

- In 2003, 59% of women in Scotland aged 16 and over drank in the previous week, similar to the proportion of 60% of women in England.
- 8% of women in Scotland drank on 5 or more days the previous week compared with 14% of women in England.
- 27% of women in Scotland drank more than 3 units on at least one day in the previous week compared with 22% in England.
- 10% of women in Scotland drank more than 6 units on at least one day in the previous week, similar to the proportion of 9% of women in England.  
[Source: General Household Survey 2003<sup>65</sup>][Chart 3.2]

**Alcohol dependence was more common in men and women in Scotland than in England**

- In 2000, the prevalence of alcohol dependence in Scotland, for people aged 16-74, was higher than that for England for both men (131 per 1000 men in Scotland compared to 115 per 1000 men in England) and women (42 per 1000 women in Scotland compared to 28 per 1000 women in England).  
[Source: ONS<sup>66</sup>]

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## 4. Social Harm

### 4.1 Introduction

Excess consumption of alcohol either in a single session or over a period of time can result in a variety of social problems not only for those who drink but also for others, such as their family. These problems include anti-social behaviour, risky sex, and crime such as drunk driving.

This section provides information on a range of social problems resulting from excessive alcohol consumption drawn from routinely published sources.

### 4.2 Community problems

#### **In 2003, 4 out of 5 people in Scotland thought 'alcohol abuse' was a serious issue**

- 'Alcohol abuse' was viewed as the third most serious social issue in Scotland, with 79% of respondents feeling 'alcohol abuse' was an 'extremely' or 'quite' serious issue compared with 91% concerned about drug abuse and 83% concerned about crime.
- The proportion concerned about 'alcohol abuse' had risen from 70% in 2000. [Source: Scottish Crime Survey 2003<sup>67</sup>]

#### **In 2003, 1 in 25 people in Scotland reported 'alcohol abuse' as an aspect of their neighbourhood they disliked**

- 4% of respondents rated 'alcohol abuse' as one aspect of their neighbourhood they disliked.
- 'Alcohol abuse' was more likely to be seen as a problem in their neighbourhood by those living in urban areas than rural areas (6% of those in large urban areas compared to 0% of those in remote rural areas).
- 33% of people who rated their neighbourhoods as 'very poor' rated 'alcohol abuse' as one aspect of their area they disliked, compared to 1% of people who rated their neighbourhoods as 'very good'. [Source: Scottish Household Survey<sup>68</sup>]

#### **People drinking or taking drugs was considered to be the most common sign of a local disorder problem**

- Overall, 44% of respondents reported people drinking or taking drugs a 'very' or 'fairly' big disorder problem, with 25% reporting both drinking and drugs, 12% drinking only and 7% drugs only. [Source: Scottish Crime Survey 2003<sup>69</sup>]

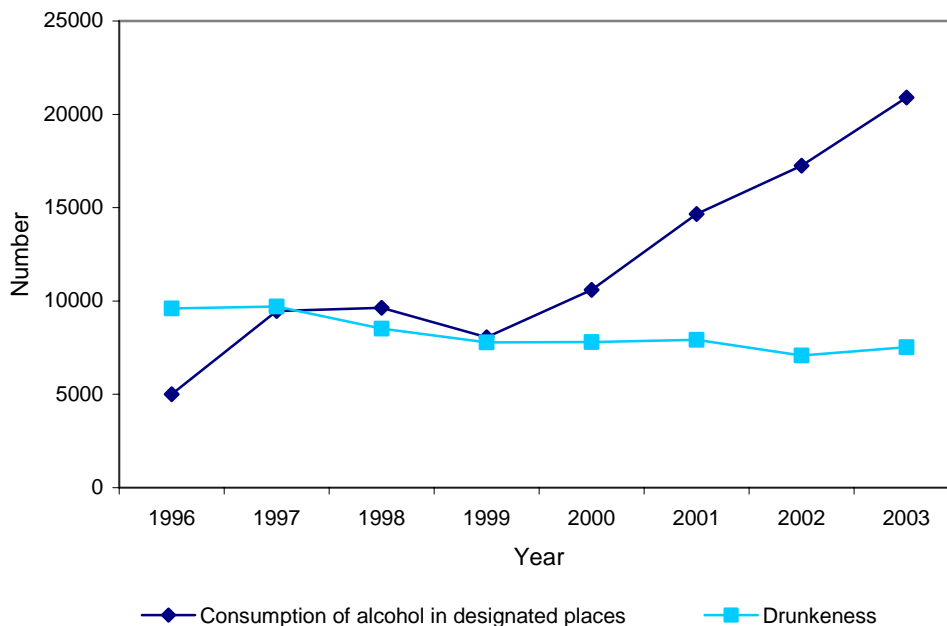
#### **Recorded offences for drunkenness have been falling in recent years**

- The number of offences of drunkenness recorded by the police fell from 10,289 to 7,532 between 1994 and 2003.
- Over a similar period the number of persons with a proven charge of drunkenness has also fallen, from 1,735 in 1993 to 384 in 2002.
- Of the 384 proven charges in 2002, the majority were men (339). [Source: Scottish Executive<sup>70 & 71</sup>][Chart 4.1]

#### **Rise in offences of drinking in designated (prohibited) places**

- In Scotland in 2003, 20,907 offences for consumption of alcohol in a designated place were recorded. [Source: Scottish Executive. Table A5][Chart 4.1]

**Chart 4.1: Recorded offences of drunkenness and consumption of alcohol in a designated place: Scotland 1996-2003**



[Source: Scottish Executive<sup>72</sup> and Table A5]

**Alcohol was estimated to cost Scotland £1.1 billion in 2002/03**

- Estimated costs for Scotland were: health service (£110.5 million); social work (£96.7 million); criminal justice (£276.7 million); wider economic costs (£417.8 million) and human costs (£223.8 million).  
[Source: Scottish Executive<sup>73</sup>]

**4.3 Risk of harm to children and young people**

**Use of alcohol by children is worried about less than other risks by people with children in their household**

- 35% of people with children in their household worried ‘a lot’ or ‘quite a lot’ about alcohol. Other issues were of more concern such as their safety on the roads; being sexually attacked, molested, or abducted by strangers; getting involved with drugs or glue sniffing and being bullied.  
[Source: Scottish Crime Survey 2000<sup>74</sup>]

**15 year olds who had drunk alcohol in the previous week were more likely to have ever engaged in sexual intercourse**

- Almost half (46%) of 15 year olds who drank alcohol in the previous week reported ever having sex compared with 8% of 15 year olds who had never drunk alcohol, and 22% who had drunk alcohol but not in the week before the survey.  
[Source: SALSUS 2002<sup>75</sup>]

**One in seven 15 year olds who had drunk alcohol reported having unprotected sex as a result of drinking alcohol**

- 17% of 15 year-old-girls and 12% of 15 year old boys reported having had unprotected sex as a result of alcohol.  
[Source: SALSUS 2002<sup>76</sup>]

**Children reported a range of negative effects as a result of drinking in the previous year**

In 2002:

- 34% of 15 year olds and 20% of 13 year olds had an argument or a fight.
- 20% of 15 year olds and 8% of 13 year olds had tried drugs.
- 12% of 15 year olds and 11% of 13 year olds had stayed off school.

[Source: SALSUS 2002<sup>77</sup>]

**The number of referrals to the Children’s Reporter on grounds of misuse of alcohol and/or drugs doubled between 1997/98 and 2002/03**

- There were 1,854 referrals in 2002/03 on grounds of misuse of drugs or alcohol compared with 976 in 1997/98.

[Source: SCRA. Table A6]

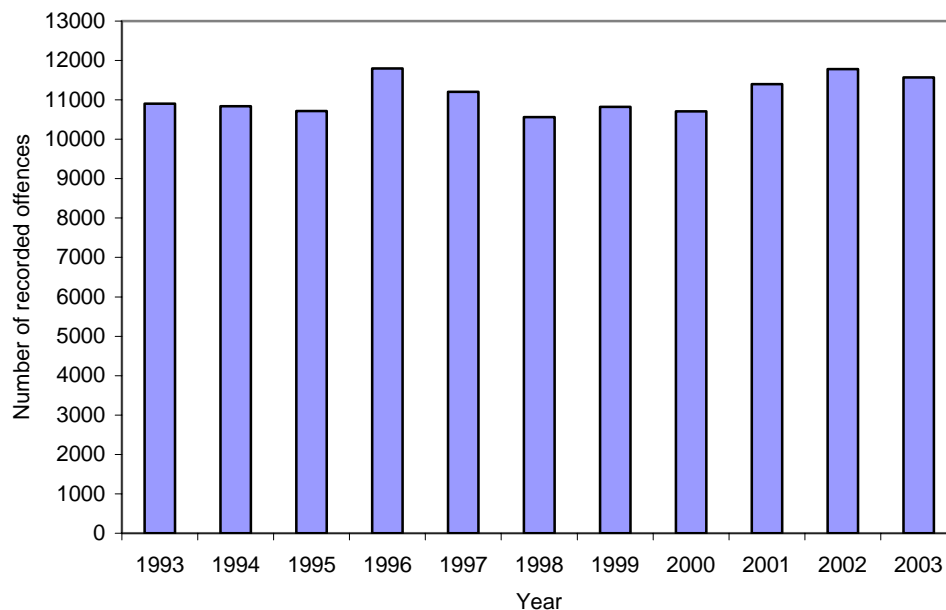
**4.4 Drunk driving**

**There has been no clear trend in drink drive offences in the past decade**

- In 2003, there were 11,566 recorded offences of drunk driving.
- The 2003 figure was 6% higher than the 1993 figure of 10,905 offences.

[Source: Scottish Executive<sup>78</sup>][Chart 4.2]

**Chart 4.2: Recorded offences of drunk driving: Scotland, 1993-2003**



[Source: Scottish Executive<sup>79</sup>]

**The majority of people convicted of drunk driving are disqualified and fined**

In 2002, of the 9,978 convictions for drunk driving in Scotland:

- 9,468 (95%) cases were disqualified from driving.
- The average length of disqualification was 22 months.
- 8,537 (86%) cases resulted in a fine.
- The average fine was £337.
- 411 cases (4%) resulted in a custodial sentence.
- 238 (2%) were admonished.
- 31 cases (0.3% of cases) resulted in a life ban from driving.

[Source: Scottish Executive<sup>80</sup>]

**Between 1996 and 2002, there was an increase in drunk driving convictions for women**

- Convictions for men for drunk driving rose by 5% (from 7,393 to 7,791) whilst convictions for women rose by 59% (from 670 to 1,064).
- In 2002, the majority (88%) of convictions were men.  
[Source: Scottish Executive. Table A7]

**Between 1996 and 2002, there was a rise in those aged under 21 convicted of drunk driving**

- There was a 38% increase in convictions for drunk driving for those under 21 years of age compared with a 2% increase for those aged 21-30 and an 11% increase for those aged over 30.  
[Source: Scottish Executive. Table A7]

**Failed breath tests at injury road accidents have increased in recent years**

- In 2003, 22,542 motorists were involved in injury road accidents of whom 13,884 (62%) were breath tested.
- In 2003, 501 motorists failed/refused breath tests after injury road accidents.
- Between 1999 and 2003, there has been a small rise in the proportion of those who were tested who failed/refused breath tests, from 3.1% to 3.6%.  
[Source: Road Accidents Scotland 2003<sup>81</sup>]

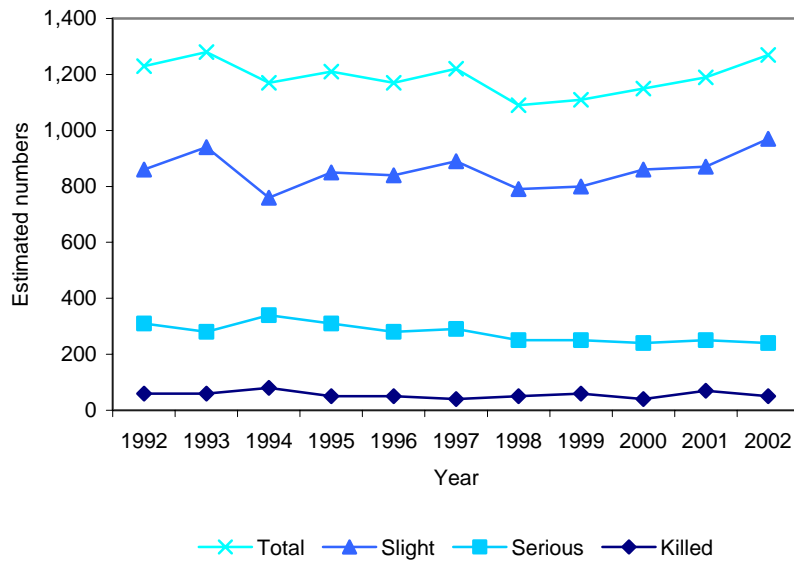
**In 2002, approximately 1 in 6 deaths on Scotland's roads were caused by drunk driving**

- There were an estimated 50 people killed as a result of drunk driving in 2002.
- In 2002, 304 people died in road accidents in Scotland.
- In 2002, an estimated 820 accidents involving 1,270 casualties in Scotland were estimated to result from drunk driving.  
[Source: Road Accidents Scotland 2003<sup>82</sup>][Chart 3.3]

**Between 1998 and 2002 in Scotland, there was a rise in the estimated number of drunk drive accidents and casualties**

- In 2002, there were an estimated 820 drunk drive accidents in Scotland, a rise from 740 in 1998
- In 2002, there were an estimated 1,270 drunk drive accident casualties in Scotland compared with 1,090 in 1998.
- In 2002, an estimated 50 people were killed in drunk driving accidents, the same figure as for 1998.
- From 1992 to 1998, there was a steady fall in the number of drunk drive accidents from 860 to 740. There was no clear trend in the estimated number of casualties.  
[Source: Road Accidents Scotland 2003<sup>83</sup>][Chart 4.3]

**Chart 4.3 Casualties in accidents involving motor vehicle drivers or riders with illegal alcohol levels<sup>1</sup> by severity: Scotland, 1992-2002.**



<sup>1</sup>above the current drink-drive limit of 80mg of alcohol per 100ml of blood.  
 Estimated numbers, adjusted for under-reporting. See source for fuller technical notes.  
 [Source: Road Accidents Scotland 2003<sup>84</sup>]

#### 4.5 Fatal fires

##### In recent years alcohol was a factor in over half of fatal fires

- In 2002/03, 84 people died in Scotland as a result of fire. The misuse of alcohol was a direct contributory factor in 32 (54%) fatal fires and an indirect factor in a further 5 (8%).
- In 2001/02 and 2000/01, alcohol was a factor in more than half of all fatal fires in Scotland.

[Source: HMCI of Fire Services for Scotland. Table A8]

#### 4.6 Alcohol and violence

##### In 1999, one in eight violent incidents reported by respondents to the Scottish Crime Survey, occurred in or around pubs and clubs

- 13% of reported incidents of violence reported in the Scottish Crime Survey occurred in or around pubs and discos.

[Source: Scottish Crime Survey 2000<sup>85</sup>]

##### In 1999, alcohol was reported to be involved in the majority of assaults reported by respondents to the Scottish Crime Survey

- Almost two thirds (72%) of victims of assault, who could tell, thought the perpetrator was under the influence of alcohol.
- Male offenders were more likely to be under the influence of alcohol (69%) than female (30%).
- Alcohol was more likely to be a factor in muggings (88%) and crimes committed by strangers (88%) or acquaintances (82%) and less likely in domestic violence assaults (32%).

[Source: Scottish Crime Survey 2000<sup>86</sup>]

**In 1999 in Scotland, alcohol was involved in the majority of domestic abuse incidents reported by respondents to the Scottish Crime Survey**

- In 1999, 62% of respondents who said they had had force used against them or had been threatened by a partner reported that the perpetrator had been drinking alcohol.  
[Source: Scottish Crime Survey 2000<sup>87</sup>]

**Alcohol was known to be a factor in half of those accused of homicide in Scotland in 2003**

- Of the 140 people accused of homicide in 2003, 55 (39%) were drunk and 14 (10%) were drunk or under the influence of drugs. The intoxication status was not known for 40 (29%) people.  
[Source: Scottish Executive<sup>88</sup>]

#### **4.7 Prison and probation**

**One in eleven probation orders had an alcohol treatment/education condition in 2003/04**

- In 2003/04, there were 729 probation orders with a condition of alcohol treatment/education. This represented 8.6% of all orders.
- In 1999/00, 403 probation orders had a condition of alcohol treatment/education. This represented 6.8% of all orders.
- In 2003/04, there were 593 male orders and 136 female orders with an alcohol treatment/education condition. This represented 8.7% of male orders and 8.5% of female orders.  
[Source: Scottish Executive<sup>89</sup>]

**In Scotland, one in three prisoners believed alcohol was a factor in their incarceration**

- A third (32%) of prisoners agreed they wouldn't have been in prison if they hadn't been drinking.
- 39% of prisoners agreed that many of their crimes were committed while drunk
- 34% agreed that alcohol was a problem for them outside prison.
- 29% of prisoners reported a history of violent behaviour relating to alcohol.  
[Source: 4<sup>th</sup> Prison Survey. Table A9]

**Alcohol appears more problematic for young prisoners,**

- Over half (54%) of young prisoners agreed that many of their crimes were committed while drunk.
- 44% of young prisoners agreed they wouldn't have been in prison if they hadn't been drinking.
- 43% of young prisoners had a history of violent behaviour relating to alcohol.  
[Source: 4<sup>th</sup> Prison Survey. Table A9]

**One in four women prisoners reported committing crimes when drunk**

- A quarter (24%) of women prisoners agreed that many of their crimes were committed whilst drunk.
- 22% agreed that they wouldn't have been in prison if they hadn't been drinking and that alcohol was a problem for them on the outside.  
[Source: 4<sup>th</sup> Prison Survey. Table A9]

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<sup>83</sup> Scottish Executive (2004) **Road Accidents Scotland 2003** [Internet] Scottish Executive <<http://www.scotland.gov.uk/library5/transport/ras03-00.asp>> Table 22 [Accessed 25 January 2005]

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## 5. Health Harm

### 5.1 Introduction

Excessive alcohol consumption can result in a wide range of health problems. Alcohol can cause short-term problems such as intoxication and poisoning. Over the longer term, excessive consumption can cause serious damage to parts of the body such as the liver. Alcohol can also lead to mental health problems such as dependency.

As well as health problems directly caused by alcohol, it is recognised as a contributory factor in many other illnesses such as cancer, stroke and heart disease. There is no standard method for Scotland for quantifying this burden. The information in this section reports on the problems that alcohol causes directly, such as alcoholic liver disease and alcohol dependency. Appendices C-E list the codes used in analyses. There is also no agreed standard methodology for defining alcohol related deaths (see glossary for further details).

Please note: historically, health care information has reported the number of health care episodes of treatment even though an individual may have more than one episode of care. This publication also describes the number of individuals (patients) discharged each year, expressing this also as the number of patients discharged for a given population group (patient discharge rate). Data on episode rates have not been reported in the text but can be found in Tables A14 (SMR01) and A23 (SMR04) in the Appendix.

### 5.2 Contact with services

#### General hospital admissions

##### **In 2003/04 in Scotland, over 26,000 people were admitted to a general hospital with an alcohol related diagnosis**

- In 2003/04, there were 26,010 patients admitted to a general hospital with an alcohol related diagnosis, 4% of all hospital patients in that year.
- These patients accounted for 36,369 alcohol related hospital episodes.
- There was an average of 1.4 episodes per patient.
- The patient discharge rate was 514 per 100,000 population.  
[Source: SMR01. Tables A10-A13]

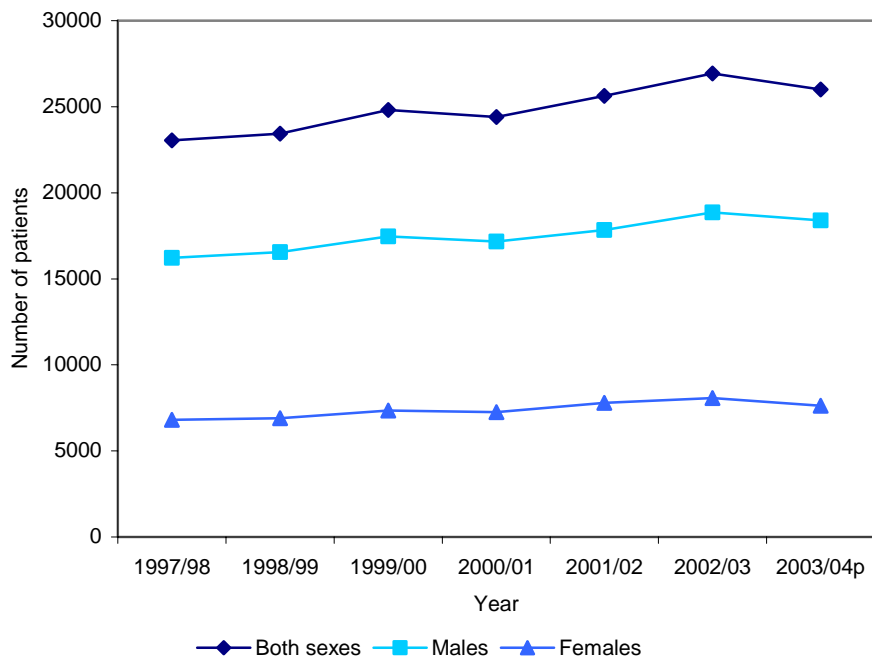
##### **In Scotland, between 1997/98 and 2003/04, there was a 13% rise in the number of patients admitted to a general hospital with an alcohol related diagnosis**

- There was a 13% increase in the number of patients admitted to a general hospital with an alcohol related diagnosis (from 23,039 to 26,010).
- There was a 19% rise in the number of alcohol related hospital episodes in general hospitals (from 30,546 to 36,369).
- The average number of episodes per patient with an alcohol related diagnosis rose from 1.3 to 1.4.
- The patient discharge rate rose by 13% from 453 per 100,000 population to 514 per 100,000 population.  
[Source: SMR01. Tables A10-A13][Chart 5.1]

**In 2003/04 in Scotland, more than twice as many men as women were admitted to general hospitals with an alcohol related diagnosis**

- There were 18,385 men and 7,625 women admitted to a general hospital with an alcohol related diagnosis, a ratio of 2.4 to 1.
  - There were 26,206 male hospital episodes and 10,163 female hospital episodes, a ratio of 2.6 to 1.
  - Patient discharge rates for men were 755 per 100,000 population compared with 291 per 100,000 population for women.
- [Source: SMR01. Tables A10-A13][Chart 5.1]

**Chart 5.1 Number of general hospital patients with an alcohol related diagnosis, by gender: Scotland 1997/98-2003/04**



p - provisional data  
 [Source: SMR01 Table A10]

**In Scotland, between 1997/98 and 2003/04, the percentage rise in the number of patients admitted to general hospitals with alcohol related diagnoses was the same for both men and women**

- There was a 13% rise in the number of men admitted with an alcohol related diagnosis (from 16,226 to 18,385).
  - There was a 12% rise in the number of women admitted with an alcohol related diagnosis (from 6,813 to 7,625).
  - Alcohol related hospital episodes for both men and women rose by 19% (from 21,974 to 26,206 for men and from 8,572 to 10,163 for women).
  - Patient discharge rates for men rose by 14% from 664 per 100,000 to 755 per 100,000 compared with a rise of 13% for women (from 258 per 100,000 to 291 per 100,000).
- [Source: SMR01. Tables A10-A13]

**Alcohol related general hospital admissions were commonest in the middle aged**

- In 2003/04, the age group with the highest patient discharge rate were those aged 45-64 with a rate of 814 per 100,000. There has been a 16% increase in the discharge rate for this age group since 1997/98 when the rate was 704 per 100,000.
- The greatest percentage increase in patient discharge rate was for those aged 65 and over, a 23% increase since 1997/98 from 471 per 100,000 to 581 per 100,000.

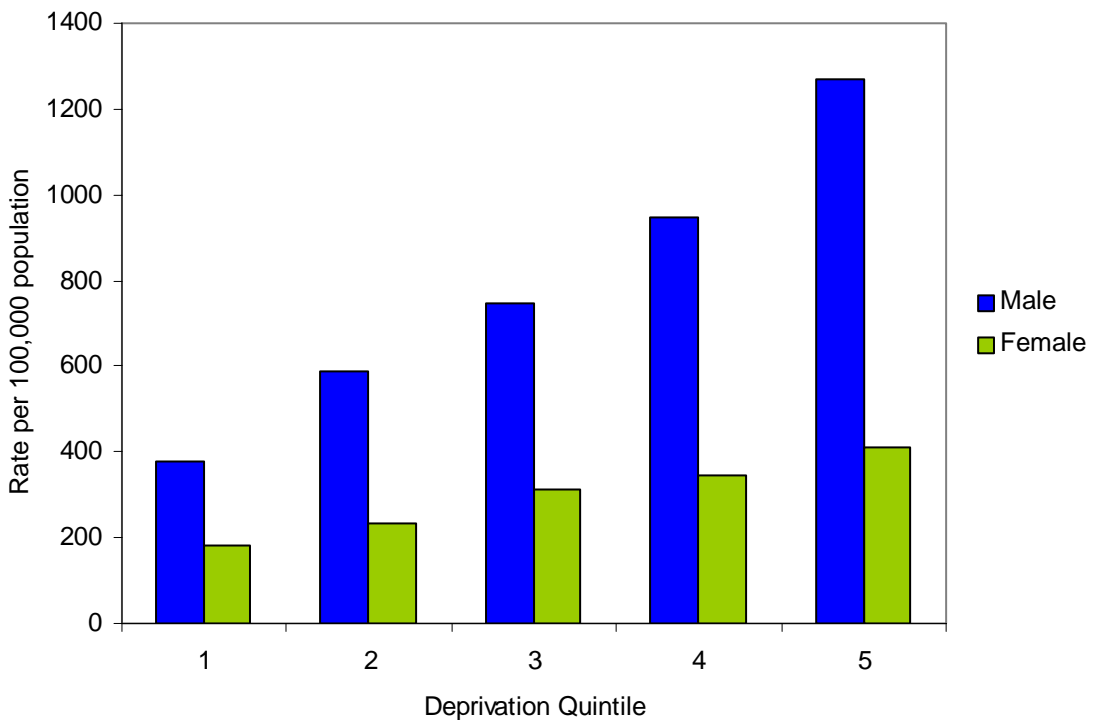
[Source: SMR01. Table A16]

**In 2003/04, people living in the most deprived areas were three times more likely to be admitted to a general hospital with an alcohol related diagnosis than those in the least deprived areas**

- The patient discharge rate was 816 per 100,000 in the most deprived areas (deprivation quintile 5) compared to 276 per 100,000 in the least deprived areas (deprivation quintile 1).
- Men in the most deprived areas were more than three times more likely to be admitted (1,268 per 100,000 in deprivation quintile 5 compared to 379 per 100,000 in deprivation quintile 1) whereas women were just over twice as likely (410 per 100,000 in deprivation quintile 5 compared to 180 per 100,000 in deprivation quintile 1).

[Source: SMR01. Table A17][Chart 5.2]

**Chart 5.2 General hospital patient discharge rates for alcohol related diagnoses, by deprivation quintile and sex: Scotland 2003/04<sup>p</sup>**



(1=least deprived, 5=most deprived)

p - provisional data

[Source: SMR01. Table A17]

**In Scotland, between 1997/98 and 2003/04, the number of general hospital patients admitted with alcoholic liver disease rose by 41%**

- The number of patients admitted to a general hospital with alcoholic liver disease rose by 41% (from 2,295 to 3,237).
- The number of general hospitals episodes with a diagnosis of alcoholic liver disease rose by 47% (from 3,600 to 5,306).
- The patient discharge rate for those with a diagnosis of alcoholic liver disease rose by 42% from 45 per 100,000 to 64 per 100,000 population.
- In 2003/04, the average number of episodes per patient was 1.6 compared with 1.4 for all alcohol related conditions.
- In 2003/04, those aged 45-64 had the highest patient discharge rate for alcoholic liver disease, for both men (214 per 100,000) and women (100 per 100,000).

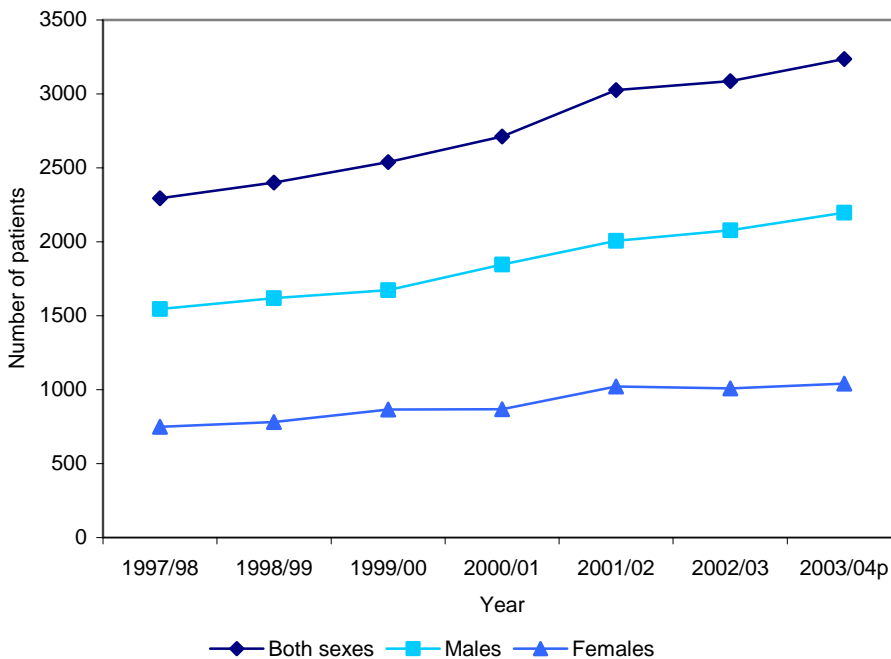
[Source: SMR01. Tables A10-A13, A18]

**Between 1997/98 and 2003/04, there was a 50% increase in the number of women aged 25-44 admitted to a general hospital with alcoholic liver disease**

- Patient discharge rates for women with alcoholic liver disease aged 25-44 have risen by 56% (from 19 to 30 per 100,000) compared with a 30% rise in rates for men of this age (from 47 to 61 per 100,000).
- Overall, for alcoholic liver disease, patient discharge rates rose by 42% for men (from 63 per 100,000 to 90 per 100,000 population) and by 40% for women (from 28 per 100,000 to 40 per 100,000 population).

[Source: SMR01. Tables A13, A18][Chart 5.3]

**Chart 5.3: Number of general hospital patients with a diagnosis of alcoholic liver disease, by gender: Scotland, 1997/98-2003/04**



p - provisional data

[Source: SMR01. Table A10]

**In Scotland in 2003/04, over 1 in 4 of all alcohol related general hospital admissions had a diagnosis of acute intoxication**

- 33% of all patients with an alcohol related diagnosis had been using alcohol in a way that was harmful to their health (harmful use), 76% of whom were men.
- 28% of all patients with an alcohol related diagnosis had been admitted with acute intoxication, 73% of whom were men.
- 12% of all patients with an alcohol related diagnosis had alcoholic liver disease, 68% of whom were men.
- 11% of all patients with an alcohol related diagnosis had alcohol psychoses, 79% of whom were men.
- 11% of all patients with an alcohol related diagnosis had alcohol dependence, 75% of whom were men.
- 9% of all patients with an alcohol related diagnosis had experienced toxic effect from alcohol (either accidental or intentional), 42% of whom were men.

[Source: SMR01. Tables A10, A15]

**In Scotland, between 1997/98 and 2003/04, there was an 80% rise in the number of patients admitted to a general hospital with a diagnosis of harmful use of alcohol**

- The number of patients admitted with a diagnosis of harmful use rose by 80% (from 4,806 to 8,631).
- The number of patients admitted with a diagnosis of acute intoxication fell by 14% (from 8,388 to 7,183).
- The number of patients admitted for alcohol psychoses rose by 35% (from 2,058 to 2,772).
- The number of patients admitted for alcohol dependence fell by 13% (from 3,218 to 2,794).
- The number of patients admitted for toxic effect of alcohol fell by 17% (from 2,884 to 2,384).

[Source: SMR01. Tables A10, A15]

**Mental illness hospital and psychiatric unit discharges**

**In Scotland, in 2000/01, almost 1 in 5 patients discharged from psychiatric units had an alcohol related diagnosis**

- There were 3,557 patients were discharged from psychiatric units with an alcohol related diagnosis.
- 18% of patients discharged from a psychiatric unit had an alcohol related diagnosis.
- These patients accounted for 4,688 hospital episodes, an average of 1.3 episodes per patient.
- Over two thirds (68%) of these patients were men.
- In 2000/01, the patient discharge rate was 70 per 100,000 population.

[Source: SMR04. Tables A19-A22]

**In Scotland, in 2000/01, the commonest alcohol related problem on discharge from a psychiatric unit was of alcohol dependence**

- For both men and women, two out of three (65%) with an alcohol related condition had a diagnosis of alcohol dependence.
- 15% of patients with an alcohol related condition had a diagnosis of alcohol psychoses, 16% of men and 13% of women.

[Source: SMR04. Table A19]

**In Scotland, between 1997/98 and 2000/01, there was a 9% fall in the number of patients discharged from psychiatric units with an alcohol related diagnosis**

- The number of patients discharged from a psychiatric unit with an alcohol related diagnosis fell from 3,905 in 1997/98 to 3,557 in 2000/01.
- The number of discharge episodes from a psychiatric unit with an alcohol related diagnosis fell by 12% from 5,307 in 1997/98 to 4,688 in 2000/01.
- The patient discharge rate fell from 77 per 100,000 population to 70 per 100,000 population.

[Source: SMR04. Tables A19-A22]

**GP contacts**

**In Scotland in 2003, over 42,000 people attended a GP with an alcohol related problem**

- An estimated 42,783 patients attended a GP in Scotland with an alcohol related problem.
- Over two thirds (69%) of these patients were men.
- These patients accounted for an estimated 106,372 GP appointments (contacts), an average of 2.5 appointments (contacts) per patient.
- Patient contact rates were highest for men aged 25-44 (52 per 1,000), whereas for women it was highest in the 45-64 age group (22 per 1,000).

[Source: PTI/CMR. Tables A24-A25]

**Between 1998 and 2003, there was an 11% increase in the numbers of men and women seeing their GP with an alcohol related problem**

- The estimated number of people attending their GP with an alcohol related problem rose by 11% from 38,500 in 1998 to 42,783 in 2003.
- The prevalence rate for men with an alcohol related problem rose slightly from 11 per 1000 in 1998 to 12 per 1000 population in 2003.
- The prevalence rate for women rate also increased slightly during this time from 4 per 1,000 to 5 per 1,000 population.
- The number of appointments (contacts) increased by 6% from 100,707 to 106,372.

[Source: PTI/CMR. Tables A24-A25]

**In 2004, 11% of British men and 8% of British women who drank alcohol had discussed their drinking with a medical professional**

- The majority of people who had discussed their drinking had done so with a GP (8% of men and 5% of women).
- Men aged 45 and over were twice as likely than younger drinkers to have discussed drinking with a GP (10% of 45-64 year olds and 12% of 65 and over, compared to 6% of 16-24 and 5% of 25-44).
- Both men and women who were drinking in excess of weekly limits were more likely to have discussed their drinking with a medical professional than those who were drinking within limits (14% of men drinking more than 21 units per week compared to an average of 8%; 11% of women drinking more than 14 units per week, compared to an average of 5%).

[Source: ONS<sup>90</sup>]

## Contact with drug treatment services

### One in 10 people who attended drug treatment services and had used illicit drugs reported having alcohol problems

- In 2003/04, 11% of new individuals attending drug treatment services reporting illicit use of drugs also reported problematic use of alcohol.
- This was a 3% rise over the previous two years (from 8% in 2001/02) in those reporting alcohol problems.  
[Source: SDMD. Table A26]

### Young people under eighteen attending drug treatment services were most likely to report alcohol problems

- 47% of those aged under 14 reported alcohol problems.
- 39% of those aged 14-17 reported alcohol problems.
- There has been a rise in young people reporting alcohol problems over the previous two years (from 34% to 47% for under 14 year olds and from 23% to 39% for 14 to 17 year olds).  
[Source: SDMD. Table A26]

## Contact with Local Councils on Alcohol

### Women are more likely than men to seek help from Local Councils on Alcohol for someone else's alcohol problem

- In 2001/02, there were 5,196 new referrals to Local Alcohol Councils.
- Most (90%) of these referrals were for someone seeking help for their own alcohol problem. Of these, 7 out of 10 were men.
- 1 in 10 referrals were from people seeking help because of someone else's alcohol problem. Of these, the majority (76%) were women.  
[Source: AFS. Table A27]

## 5.3 Alcohol related deaths

### In Scotland, there were nearly 2,000 alcohol related deaths in 2003

- In 2003, there were 1,980 alcohol related deaths in Scotland.
- The crude death rate was 39 per 100,000 population.  
[Source: NAIR, based on GRO data. Tables A28, A29]

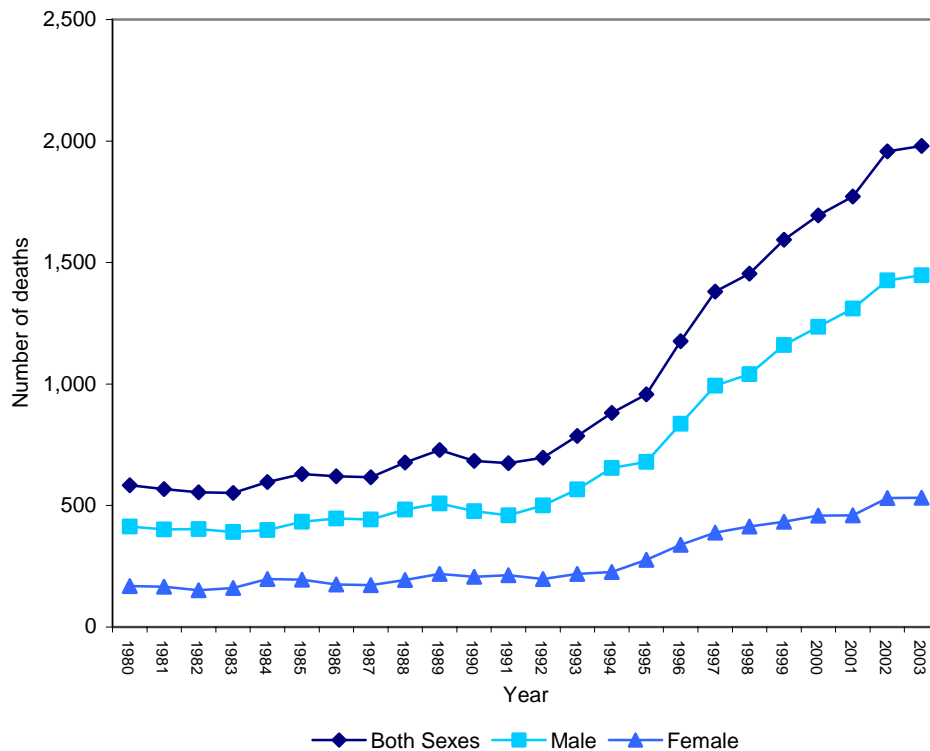
### In Scotland since 1980, alcohol related deaths have risen from less than 1 in 100 to 1 in 30 of all deaths in Scotland

- Numbers of alcohol related deaths have risen by 240% since 1980 (from 583 to 1,980).
- Alcohol related deaths accounted for 1 in 30 (3.4%) of all deaths in 2003.
- Alcohol related deaths accounted for 1 in 109 (0.9%) of all deaths in 1980.
- Crude alcohol related death rates have more than tripled from 11 per 100,000 population in 1980 to 39 per 100,000 population in 2003.  
[Source: NAIR, based on GRO data. Tables A28, A29][Chart 5.4]

**Alcohol related deaths in men are rising at a slightly higher rate than that for women**

- In 2003, 1,448 (73%) of alcohol related deaths were of men compared with 532 (27%) which were of women.
  - The crude alcohol related death rate for men was triple that for women (60 per 100,000 population compared with 20 per 100,000 population).
  - Male alcohol related deaths have risen by a factor of 3.6 since 1980 (from 17 to 60 per 100,000 population) compared with female alcohol related deaths which have risen by a factor of 3.2 (from 6 to 20 per 100,000 population).
- [Source: NAIR, based on GRO data. Tables A28, A29][Chart 5.4]

**Chart 5.4 Number of alcohol related deaths, by sex: Scotland, 1980-2003**



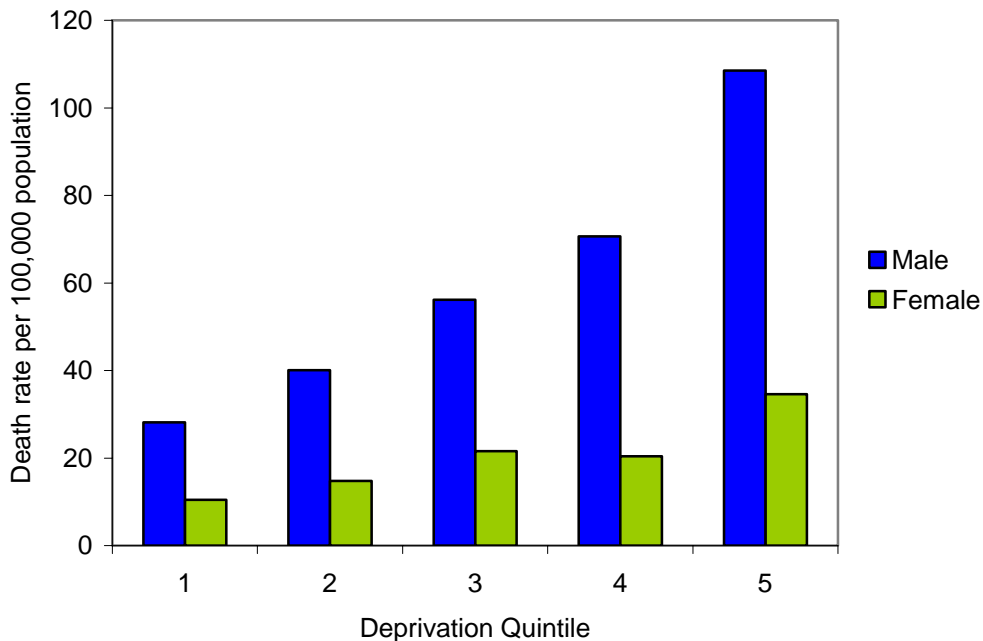
[Source: NAIR, based on GRO data. Table A28]

**People living in the most deprived areas were nearly four times more likely to die an alcohol related death than those in the least deprived areas**

- The death rate for an alcohol related diagnosis was 70 per 100,000 in the most deprived areas (deprivation quintile 5) compared to 19 per 100,000 in the least deprived areas (deprivation quintile 1).
- There was a small difference between men and women with men in the most deprived areas (deprivation quintile 5, 109 per 100,000), four times more likely to die an alcohol related death than those in the least deprived areas (deprivation quintile 1, 28 per 100,000), women were just over three times more likely (35 per 100,000 in deprivation quintile 5 compared to 10 per 100,000 in deprivation quintile 1).

[Source: NAIR, based on GRO data. Table A30][Chart 5.5]

**Chart 5.5: Alcohol related death rates, by deprivation quintile and sex: Scotland 2003.**



(1=least deprived, 5=most deprived)  
 [Source: NAIR, based on GRO data. Table A30]

**In Scotland in 2003, 1 in 10 deaths of people under the age of 45 had an alcohol related diagnosis**

- Almost three quarters (72%) of alcohol related deaths were under the age of 65.
  - The majority of alcohol related deaths are in the middle aged (58% were aged 45-64 years old).
  - Alcohol was a factor in 13% of deaths in the 45-64 age group.
  - Alcohol was a factor in 10% of all deaths of people under the age of 45.
- [Source: NAIR, based on GRO data. Table A31]

**In Scotland in 2003, the majority of alcohol related deaths had a diagnosis of alcoholic liver disease**

- Over half (59%) of alcohol related deaths had a diagnosis of alcoholic liver disease.
  - 56% of alcohol related deaths in males had a diagnosis of alcoholic liver disease compared with 67% of alcohol related female deaths.
- [Source: NAIR, based on GRO data. Tables A31, A32]

**In Scotland, between 1980 and 2003, there was more than a five fold rise in the number of deaths with a diagnosis of alcoholic liver disease**

- Deaths with a diagnosis of alcoholic liver disease rose by 444%, from 215 to 1,170.
- Deaths of males with a diagnosis of alcoholic liver disease rose by 454%, from 147 to 814.
- Deaths of females with a diagnosis of alcoholic liver disease rose by 424%, from 68 to 356.
- The death rate for alcoholic liver disease rose from 4 to 23 per 100,000. For males the rise was from 6 to 33 per 100,000 and for females from 3 to 14 per 100,000.

[Source: NAIR, based on GRO data. Table A32]

## Section references

<sup>90</sup> Lader, Deborah and Goddard, Eileen (2004) **Drinking: adults' behaviour and knowledge in 2004** [Internet] ONS  
<[http://www.statistics.gov.uk/downloads/theme\\_health/Drinking2004.pdf](http://www.statistics.gov.uk/downloads/theme_health/Drinking2004.pdf)> Tables 3.18-3.21  
[Accessed 10 January 2005]

## Technical Appendix

Appendix A: Data tables

**Table A1: Number of Liquor Licensing offences recorded by the police: Scotland, 1996-2003**

	1996	1997	1998	1999	2000	2001	2002	2003
<b>Offences by licensed persons</b>	<b>572</b>	<b>528</b>	<b>359</b>	<b>299</b>	<b>253</b>	<b>377</b>	<b>342</b>	<b>329</b>
Of which								
Sale of drink to person under 18	411	385	237	195	179	292	268	283
<b>Other offences against liquor licensing laws</b>	<b>865</b>	<b>889</b>	<b>1009</b>	<b>509</b>	<b>439</b>	<b>528</b>	<b>457</b>	<b>604</b>
Of which								
Person under 18 buying excisable liquor or consuming in bar	194	185	80	99	72	96	62	60
Purchasing excise liquor for consumption by person under 18	354	347	215	144	161	209	187	273

Source: Scottish Executive Recorded Offences Data

**Table A2: Percent who reported drinking in the past week, by sex: Scotland and England, 2001-2003**

	Scotland		England	
	Male %	Female %	Male %	Female %
2001	77	57	74	60
2002	75	56	73	60
2003	73	59	75	60

Source: General Household Survey 2001, 2002, 2003.

**Table A3: Percent who reported drinking on 5 or more days in last week, by sex: Scotland and England, 2001-2003**

	Scotland		England	
	Male %	Female %	Male %	Female %
2001	16	10	22	14
2002	17	9	23	14
2003	16	8	23	14

Source: General Household Survey 2001, 2002, 2003.

**Table A4: Mean units of alcohol consumed per week, by sex: Scotland and England, 1992-2002**

	Scotland		England	
	Male <i>units</i>	Female <i>units</i>	Male <i>units</i>	Female <i>units</i>
1992	16.9	4.6	15.7	5.4
1994	14.4	4.6	15.4	5.6
1996	16.2	5.5	16.1	6.3
2001	16.1	6.9	16.9	7.5
2002	17.7	6.7	17.0	7.6

Note: Data for 1992-1996 are not weighted. Data for 2001 and 2002 are weighted. See GHS for information about weighting.

Source: General Household Survey 1992, 1994, 1996, 2001, 2002.

**Table A5: Number of recorded offences of consumption of alcohol in a designated place: Scotland, 1996-2003**

Year	Recorded Offences
1996	5003
1997	9467
1998	9637
1999	8061
2000	10590
2001	14656
2002	17247
2003	20907

Source: Scottish Executive Recorded Offences Data

**Table A6: Number of 'J' grounds referrals<sup>1,2</sup> referred to the Reporter for alleged misuse of alcohol or drugs: Scotland, 1997/98-2002/03**

Year	Number of grounds referred
1997/98	976
1998/99	880
1999/00	1260
2000/01	1272
2001/02	1697
2002/03	1854

1 See SCRA entry in Appendix B: Data Sources for information about grounds for referrals.

2 Because a child may be referred on a single ground more than once in any one year these numbers do not represent a count of the number of children.

Source: Scottish Children's Reporter Administration

**Table A7: Number of persons convicted with a main offence of Drunk Driving, by age and sex: Scotland, 1996-2002**

	Male				Female			
	Under 21	21-30	Over 30	Total	Under 21	21-30	Over 30	Total
1996	715	2408	4224	7393	44	181	443	670
1997	749	2501	4437	7723	54	200	536	796
1998	667	2040	3844	6573	54	195	464	714
1999	707	1922	3646	6290	48	150	410	609
2000	692	1863	3436	5999	46	160	480	687
2001	727	1856	3479	6069	55	181	486	724
2002	975	2355	4460	7791	72	273	718	1064

Source: Scottish Executive. **Criminal Proceedings in Scottish Courts**, annual publications 1996-2002, Tables 6a and 6b.

**Table A8: Number of fatal fires where alcohol misuse was a direct or indirect contributory factor: Scotland, 2000/01-2002/03**

	2000/01	2001/02	2002/03
Number of fire deaths	78	84	84
Number of fatal fires where alcohol was a direct contributory factor	29	27	32
<i>Percent of fatal fires</i>	42	40	54
Number of fatal fires where alcohol was an indirect contributory factor	7	18	5
<i>Percent of fatal fires</i>	10	27	8

Source: HMCI of Fire Services for Scotland, Annual Reports, TSO, Edinburgh

**Table A9: Percent of prisoners in Scotland agreeing with statements about alcohol**

	All Offenders	Women Offenders	Young Offenders
	%	%	%
Alcohol was a problem for me on the outside	34	22	43
Many of my crimes were committed while I was drunk	39	24	54
I wouldn't be in prison if I hadn't been drinking	32	22	44
I have a history of violent behaviour relating to alcohol	29	18	43
My drinking has affected my relationships with my family	28	17	34
My drinking has affected my employment prospects	24	13	29
Had help in the community for alcohol use	15	14	na
Had help in prison for alcohol use	16	11	na

Source: Data from **The Fourth Prison Survey**, Tables 3.5, 4.11, 7.11. Scottish Prison Service, 2002.

**Table A10: General hospital<sup>1</sup> patients with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland, 1997/98 - 2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>P</sup>
<b>Total Patients Discharged</b>	<b>682240</b>	<b>695958</b>	<b>676835</b>	<b>676142</b>	<b>661420</b>	<b>636213</b>	<b>624322</b>
<i>% of which alcohol related</i>	3.4	3.4	3.7	3.6	3.9	4.2	4.2
<b>Both sexes</b>							
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>23039</b>	<b>23443</b>	<b>24818</b>	<b>24406</b>	<b>25635</b>	<b>26926</b>	<b>26010</b>
Mental & Behavioural Disorders due to the Use of Alcohol	16438	17111	18161	17312	18309	19390	18453
Alcoholic Liver Disease	2295	2401	2540	2713	3027	3086	3237
Toxic Effect of Alcohol	2884	2536	2559	2672	2759	2726	2384
<b>Males</b>							
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>16226</b>	<b>16548</b>	<b>17463</b>	<b>17161</b>	<b>17839</b>	<b>18862</b>	<b>18385</b>
Mental & Behavioural Disorders due to the Use of Alcohol	12150	12585	13417	12809	13438	14256	13782
Alcoholic Liver Disease	1545	1619	1674	1846	2006	2078	2196
Toxic Effect of Alcohol	1361	1216	1204	1227	1194	1240	1006
<b>Females</b>							
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>6813</b>	<b>6895</b>	<b>7355</b>	<b>7245</b>	<b>7796</b>	<b>8064</b>	<b>7625</b>
Mental & Behavioural Disorders due to the Use of Alcohol	4288	4526	4744	4503	4871	5134	4671
Alcoholic Liver Disease	750	782	866	867	1021	1008	1041
Toxic Effect of Alcohol	1523	1320	1355	1445	1565	1486	1378

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>5</sup> The sum of the rows may exceed the total because the same patient may appear in more than one diagnostic group.

<sup>P</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A11: General hospital<sup>1</sup> episodes with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland, 1997/98 - 2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>p</sup>
<b>Both Sexes</b>							
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>30546</b>	<b>31376</b>	<b>33597</b>	<b>33432</b>	<b>35459</b>	<b>37482</b>	<b>36369</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	20841	21996	23670	22740	24111	25835	24797
Alcoholic Liver Disease	3600	3709	3971	4307	4960	5129	5306
Toxic Effect of Alcohol	3246	2906	2913	2971	3046	3064	2646
<b>Males</b>							
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>21974</b>	<b>22484</b>	<b>24233</b>	<b>23989</b>	<b>25215</b>	<b>26845</b>	<b>26206</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	15717	16418	17960	17182	18073	19379	18844
Alcoholic Liver Disease	2472	2528	2608	2921	3334	3584	3643
Toxic Effect of Alcohol	1562	1425	1433	1381	1325	1412	1125
<b>Females</b>							
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>8572</b>	<b>8892</b>	<b>9364</b>	<b>9443</b>	<b>10244</b>	<b>10637</b>	<b>10163</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	5124	5578	5710	5558	6038	6456	5953
Alcoholic Liver Disease	1128	1181	1363	1386	1626	1545	1663
Toxic Effect of Alcohol	1684	1481	1480	1590	1721	1652	1521

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>5</sup> The sum of the rows may exceed the total because the same patient may appear in more than one diagnostic group.

<sup>p</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A12: General hospital<sup>1</sup> ratio of episodes to patients for alcohol-related diagnoses<sup>2,3,4</sup>, by sex: Scotland, 1997/98 - 2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>p</sup>
<b>Both Sexes</b>							
<b>All Alcohol Related Conditions</b>	<b>1.3</b>	<b>1.3</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	1.3	1.3	1.3	1.3	1.3	1.3	1.3
Alcoholic Liver Disease	1.6	1.5	1.6	1.6	1.6	1.7	1.6
Toxic Effect of Alcohol	1.1	1.1	1.1	1.1	1.1	1.1	1.1
<b>Males</b>							
<b>All Alcohol Related Conditions</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>	<b>1.4</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	1.3	1.3	1.3	1.3	1.3	1.4	1.4
Alcoholic Liver Disease	1.6	1.6	1.6	1.6	1.7	1.7	1.7
Toxic Effect of Alcohol	1.1	1.2	1.2	1.1	1.1	1.1	1.1
<b>Females</b>							
<b>All Alcohol Related Conditions</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	1.2	1.2	1.2	1.2	1.2	1.3	1.3
Alcoholic Liver Disease	1.5	1.5	1.6	1.6	1.6	1.5	1.6
Toxic Effect of Alcohol	1.1	1.1	1.1	1.1	1.1	1.1	1.1

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>p</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A13: General hospital<sup>1</sup> patient discharge rates, per 100,000 population, with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland, 1997/98 - 2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>p</sup>
<b>Both Sexes</b>							
<b>All Alcohol Related Conditions</b>	<b>453.2</b>	<b>461.7</b>	<b>489.3</b>	<b>482.1</b>	<b>506.2</b>	<b>532.7</b>	<b>514.3</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	323.4	337.0	358.1	341.9	361.5	383.6	364.9
Alcoholic Liver Disease	45.1	47.3	50.1	53.6	59.8	61.1	64.0
Toxic Effect of Alcohol	56.7	50.0	50.5	52.8	54.5	53.9	47.1
<b>Males</b>							
<b>All Alcohol Related Conditions</b>	<b>664.4</b>	<b>678.5</b>	<b>716.7</b>	<b>705.7</b>	<b>733.0</b>	<b>775.6</b>	<b>755.2</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	497.5	516.0	550.7	526.7	552.2	586.2	566.1
Alcoholic Liver Disease	63.3	66.4	68.7	75.9	82.4	85.5	90.2
Toxic Effect of Alcohol	55.7	49.9	49.4	50.5	49.1	51.0	41.3
<b>Females</b>							
<b>All Alcohol Related Conditions</b>	<b>258.0</b>	<b>261.4</b>	<b>279.1</b>	<b>275.4</b>	<b>296.4</b>	<b>307.4</b>	<b>290.7</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	162.4	171.6	180.0	171.2	185.2	195.7	178.1
Alcoholic Liver Disease	28.4	29.6	32.9	33.0	38.8	38.4	39.7
Toxic Effect of Alcohol	57.7	50.0	51.4	54.9	59.5	56.7	52.5

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>p</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A14: General hospital<sup>1</sup> episode rates, per 100,000 population, with alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland, 1997/98 - 2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>P</sup>
<b>Both sexes</b>							
<b>All Alcohol Related Conditions</b>	<b>600.9</b>	<b>618.0</b>	<b>662.4</b>	<b>660.3</b>	<b>700.2</b>	<b>741.5</b>	<b>719.1</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	410.0	433.2	466.7	449.1	476.1	511.1	490.3
Alcoholic Liver Disease	70.8	73.1	78.3	85.1	97.9	101.5	104.9
Toxic Effect of Alcohol	63.9	57.2	57.4	58.7	60.1	60.6	52.3
<b>Males</b>							
<b>All Alcohol Related Conditions</b>	<b>899.7</b>	<b>921.9</b>	<b>994.6</b>	<b>986.4</b>	<b>1036.1</b>	<b>1103.9</b>	<b>1076.4</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	643.5	673.1	737.1	706.5	742.6	796.9	774.0
Alcoholic Liver Disease	101.2	103.6	107.0	120.1	137.0	147.4	149.6
Toxic Effect of Alcohol	64.0	58.4	58.8	56.8	54.4	58.1	46.2
<b>Females</b>							
<b>All Alcohol Related Conditions</b>	<b>324.6</b>	<b>337.1</b>	<b>355.3</b>	<b>358.9</b>	<b>389.4</b>	<b>405.5</b>	<b>387.5</b>
Mental & Behavioural Disorders							
Due to the Use of Alcohol	194.0	211.4	216.7	211.2	229.5	246.1	227.0
Alcoholic Liver Disease	42.7	44.8	51.7	52.7	61.8	58.9	63.4
Toxic Effect of Alcohol	63.8	56.1	56.2	60.4	65.4	63.0	58.0

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>P</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A15: General hospital<sup>1</sup> patients with a diagnosis of Mental & Behavioural Disorders Due to the Use of Alcohol<sup>2,3,4</sup>, by sex: Scotland 1997/98-2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>P</sup>
<b>Both Sexes</b>							
<b>Mental &amp; Behavioural Disorders</b>	<b>16438</b>	<b>17111</b>	<b>18161</b>	<b>17312</b>	<b>18309</b>	<b>19390</b>	<b>18453</b>
<b>Due to the Use of Alcohol<sup>5</sup></b>							
of which							
Acute Intoxication	8388	8430	9148	8047	8551	8183	7183
Harmful Use	4806	5640	5991	6152	7003	8451	8631
Alcohol Dependence	3218	3214	3389	3331	3064	3061	2794
Alcohol Psychoses	2058	2085	2228	2387	2420	2728	2772
<b>Male</b>							
<b>Mental &amp; Behavioural Disorders</b>	<b>12150</b>	<b>12585</b>	<b>13417</b>	<b>12809</b>	<b>13438</b>	<b>14256</b>	<b>13782</b>
<b>Due to the Use of Alcohol<sup>5</sup></b>							
of which							
Acute Intoxication	6058	6071	6684	5847	6106	5859	5237
Harmful Use	3637	4178	4494	4608	5252	6330	6575
Alcohol Dependence	2434	2432	2596	2507	2299	2268	2087
Alcohol Psychoses	1681	1666	1762	1903	1940	2168	2185
<b>Female</b>							
<b>Mental &amp; Behavioural Disorders</b>	<b>4288</b>	<b>4526</b>	<b>4744</b>	<b>4503</b>	<b>4871</b>	<b>5134</b>	<b>4671</b>
<b>Due to the Use of Alcohol<sup>5</sup></b>							
of which							
Acute Intoxication	2330	2359	2464	2200	2445	2324	1946
Harmful Use	1169	1462	1497	1544	1751	2121	2056
Alcohol Dependence	784	782	793	824	765	793	707
Alcohol Psychoses	377	419	466	484	480	560	587

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). F10 codes used for analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>5</sup> The sum of the rows may exceed the total because the same patient may appear in more than one diagnostic group.

<sup>P</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A16: General hospital<sup>1</sup> patient discharge rates, per 100,000 population, for alcohol related diagnoses<sup>2,3,4</sup>, by age and sex: Scotland 1997/98-2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>p</sup>
<b>Both Sexes</b>							
0-15	80.3	69.5	78.8	80.6	77.6	70.7	60.2
16-24	439.1	454.3	487.4	458.2	505.3	510.5	437.8
25-44	507.3	514.3	532.9	524.8	557.2	578.5	548.8
45-64	703.5	711.0	756.5	749.9	784.7	838.5	813.6
65 and over	470.8	495.7	527.4	513.5	516.6	552.2	580.9
<b>Males</b>							
0-15	81.2	69.0	80.3	81.1	74.8	67.6	56.5
16-24	588.3	611.9	663.5	612.3	672.0	656.2	567.4
25-44	700.8	719.7	733.9	727.4	764.9	804.8	772.9
45-64	1067.1	1064.5	1130.4	1124.0	1149.3	1240.5	1209.2
65 and over	883.9	935.2	998.0	956.1	971.5	1031.4	1076.0
<b>Females</b>							
0-15	79.4	70.0	77.2	80.2	80.5	73.8	64.1
16-24	289.4	296.6	311.2	303.6	336.6	361.2	304.2
25-44	321.1	317.8	341.5	333.3	361.8	365.4	337.9
45-64	357.3	373.6	398.9	391.6	434.7	453.0	435.1
65 and over	199.3	204.7	213.1	215.2	207.3	223.2	237.4

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>p</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A17: General hospital<sup>1</sup> patient discharge rates, per 100,000 population, with an alcohol related diagnosis<sup>2,3,4</sup>, by age and deprivation quintile: Scotland 2003/04<sup>P</sup>**

	Deprivation Quintile				
	Least deprived 1	2	3	4	Most deprived 5
<b>Both Sexes</b>	<b>275.8</b>	<b>404.8</b>	<b>519.6</b>	<b>630.0</b>	<b>815.8</b>
Male	378.6	590.1	746.8	945.5	1267.6
Female	179.9	231.9	310.4	345.2	410.3

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

Please note: rates are based on counts for patients in each deprivation quintile. A small number of patients may be double counted if they moved house and changed deprivation quintile during the period.

<sup>P</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A18: General hospital<sup>1</sup> patient discharge rates, per 100,000 population, with an alcoholic liver disease diagnosis<sup>2,3,4</sup>, by age and sex: Scotland 1997/98-2003/04**

	1997/98	1998/99	1999/00	2000/01	2001/02	2002/03	2003/04 <sup>p</sup>
<b>Both Sexes</b>							
0-24	0.4	0.4	0.4	0.5	0.6	0.3	0.3
25-44	32.9	32.6	35.1	41.2	45.1	44.7	45.1
45-64	113.0	118.8	123.3	128.3	145.1	147.1	155.4
65 and over	57.9	60.9	65.7	66.0	71.0	74.3	76.6
<b>Males</b>							
0-24	0.5	0.5	0.6	0.6	0.8	0.5	0.5
25-44	47.3	45.6	46.5	54.5	60.6	60.0	61.4
45-64	151.9	161.6	163.0	179.0	196.3	203.8	213.6
65 and over	99.7	106.1	115.9	118.1	118.8	125.4	134.7
<b>Females</b>							
0-24	0.3	0.3	0.3	0.3	0.4	0.1	0.0
25-44	19.0	20.1	24.3	28.7	30.5	30.2	29.7
45-64	76.0	77.9	85.3	79.7	95.9	92.7	99.8
65 and over	30.5	31.0	32.1	31.0	38.5	39.2	36.2

<sup>1</sup> Excludes mental illness hospitals, psychiatric units and maternity hospitals, transfer cases have been excluded and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary reasons for admission to hospital.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). K70 codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>p</sup> Provisional

Source : ISD Scotland (SMR01)

**Table A19: Mental illness hospital and psychiatric unit<sup>1</sup> patients with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland 1997/98-2000/01**

	1997/98	1998/99	1999/00	2000/01
<b>Total patients discharged</b>	<b>21148</b>	<b>21100</b>	<b>20543</b>	<b>19752</b>
<i>% of which alcohol related</i>	<i>18.5</i>	<i>18.0</i>	<i>19.0</i>	<i>18.0</i>
<b>Both Sexes</b>				
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>3905</b>	<b>3804</b>	<b>3910</b>	<b>3557</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	3891	3793	3883	3534
of which				
Acute Intoxication	257	139	124	98
Harmful Use	909	870	930	886
Alcohol Dependence	2501	2489	2540	2295
Alcohol Psychoses	622	622	604	531
<b>Male</b>				
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>2710</b>	<b>2631</b>	<b>2743</b>	<b>2420</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	2704	2624	2730	2409
of which				
Acute Intoxication	165	81	69	62
Harmful Use	618	584	633	578
Alcohol Dependence	1762	1724	1815	1589
Alcohol Psychoses	441	462	450	387
<b>Female</b>				
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>1195</b>	<b>1173</b>	<b>1167</b>	<b>1137</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	1187	1169	1153	1125
of which				
Acute Intoxication	92	58	55	36
Harmful Use	291	286	297	308
Alcohol Dependence	739	765	725	706
Alcohol Psychoses	181	160	154	144

<sup>1</sup> Excludes acute hospitals and maternity hospitals and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary diagnosis.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>5</sup> The sum of the rows may exceed the total because the same patient may appear in more than one diagnostic group.

Source : ISD Scotland (SMR04)

**Table A20: Mental illness hospital and psychiatric unit<sup>1</sup> discharge episodes with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland 1997/98-2000/01**

	1997/98	1998/99	1999/00	2000/01
<b>Both Sexes</b>				
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>5307</b>	<b>5004</b>	<b>5152</b>	<b>4688</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	5292	4991	5121	4658
of which				
Acute Intoxication	287	153	129	100
Harmful Use	1077	1007	1096	1042
Alcohol Dependence	3292	3189	3281	2967
Alcohol Psychoses	745	738	680	609
<b>Male</b>				
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>3665</b>	<b>3462</b>	<b>3623</b>	<b>3200</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	3658	3454	3608	3182
of which				
Acute Intoxication	182	94	74	64
Harmful Use	717	672	749	679
Alcohol Dependence	2313	2213	2333	2052
Alcohol Psychoses	530	556	508	447
<b>Female</b>				
<b>All Alcohol Related Conditions<sup>5</sup></b>	<b>1642</b>	<b>1542</b>	<b>1529</b>	<b>1488</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	1634	1537	1513	1476
of which				
Acute Intoxication	105	59	55	36
Harmful Use	360	335	347	363
Alcohol Dependence	979	976	948	915
Alcohol Psychoses	215	182	172	162

<sup>1</sup> Excludes acute hospitals and maternity hospitals and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary diagnosis.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

<sup>5</sup> The sum of the rows may exceed the total because the same patient may appear in more than one diagnostic group.

Source : ISD Scotland (SMR04)

**Table A21: Mental illness hospital and psychiatric unit<sup>1</sup> ratio of episodes to patients with alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland 1997/98-2000/01**

	1997/98	1998/99	1999/00	2000/01
<b>Both Sexes</b>				
<b>All Alcohol Related Conditions</b>	<b>1.4</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	1.4	1.3	1.3	1.3
of which				
Acute Intoxication	1.1	1.1	1.0	1.0
Harmful Use	1.2	1.2	1.2	1.2
Alcohol Dependence	1.3	1.3	1.3	1.3
Alcohol Psychoses	1.2	1.2	1.1	1.1
<b>Male</b>				
<b>All Alcohol Related Conditions</b>	<b>1.4</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	1.4	1.3	1.3	1.3
of which				
Acute Intoxication	1.1	1.2	1.1	1.0
Harmful Use	1.2	1.2	1.2	1.2
Alcohol Dependence	1.3	1.3	1.3	1.3
Alcohol Psychoses	1.2	1.2	1.1	1.2
<b>Female</b>				
<b>All Alcohol Related Conditions</b>	<b>1.4</b>	<b>1.3</b>	<b>1.3</b>	<b>1.3</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	1.4	1.3	1.3	1.3
of which				
Acute Intoxication	1.1	1.0	1.0	1.0
Harmful Use	1.2	1.2	1.2	1.2
Alcohol Dependence	1.3	1.3	1.3	1.3
Alcohol Psychoses	1.2	1.1	1.1	1.1

<sup>1</sup> Excludes acute hospitals and maternity hospitals and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary diagnosis.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

Source : ISD Scotland (SMR04)

**Table A22: Mental illness hospital and psychiatric unit<sup>1</sup> patient discharge rates per 100,000 population with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland 1997/98-2000/01**

	1997/98	1998/99	1999/00	2000/01
<b>Both Sexes</b>				
<b>All Alcohol Related Conditions</b>	<b>76.8</b>	<b>74.9</b>	<b>77.1</b>	<b>70.3</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	76.5	74.7	76.6	69.8
of which				
Acute Intoxication	5.1	2.7	2.4	1.9
Harmful Use	17.9	17.1	18.3	17.5
Alcohol Dependence	49.2	49.0	50.1	45.3
Alcohol Psychoses	12.2	12.3	11.9	10.5
<b>Male</b>				
<b>All Alcohol Related Conditions</b>	<b>111.0</b>	<b>107.9</b>	<b>112.6</b>	<b>99.5</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	110.7	107.6	112.0	99.1
of which				
Acute Intoxication	6.8	3.3	2.8	2.5
Harmful Use	25.3	23.9	26.0	23.8
Alcohol Dependence	72.1	70.7	74.5	65.3
Alcohol Psychoses	18.1	18.9	18.5	15.9
<b>Female</b>				
<b>All Alcohol Related Conditions</b>	<b>45.2</b>	<b>44.5</b>	<b>44.3</b>	<b>43.2</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	44.9	44.3	43.8	42.8
of which				
Acute Intoxication	3.5	2.2	2.1	1.4
Harmful Use	11.0	10.8	11.3	11.7
Alcohol Dependence	28.0	29.0	27.5	26.8
Alcohol Psychoses	6.9	6.1	5.8	5.5

<sup>1</sup> Excludes acute hospitals and maternity hospitals and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary diagnosis.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

Source : ISD Scotland (SMR04)

**Table A23: Mental illness hospital and psychiatric unit<sup>1</sup> discharge episode rate per 100,000 population with an alcohol-related diagnosis<sup>2,3,4</sup>, by sex: Scotland 1997/98-2000/01**

	1997/98	1998/99	1999/00	2000/01
<b>Both Sexes</b>				
<b>All Alcohol Related Conditions</b>	<b>104.4</b>	<b>98.6</b>	<b>101.6</b>	<b>92.6</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	104.1	98.3	101.0	92.0
of which				
Acute Intoxication	5.6	3.0	2.5	2.0
Harmful Use	21.2	19.8	21.6	20.6
Alcohol Dependence	64.8	62.8	64.7	58.6
Alcohol Psychoses	14.7	14.5	13.4	12.0
<b>Male</b>				
<b>All Alcohol Related Conditions</b>	<b>150.1</b>	<b>141.9</b>	<b>148.7</b>	<b>131.6</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	149.8	141.6	148.1	130.8
of which				
Acute Intoxication	7.5	3.9	3.0	2.6
Harmful Use	29.4	27.6	30.7	27.9
Alcohol Dependence	94.7	90.7	95.8	84.4
Alcohol Psychoses	21.7	22.8	20.8	18.4
<b>Female</b>				
<b>All Alcohol Related Conditions</b>	<b>62.2</b>	<b>58.5</b>	<b>58.0</b>	<b>56.6</b>
Mental & Behavioural Disorders				
Due to the Use of Alcohol	61.9	58.3	57.4	56.1
of which				
Acute Intoxication	4.0	2.2	2.1	1.4
Harmful Use	13.6	12.7	13.2	13.8
Alcohol Dependence	37.1	37.0	36.0	34.8
Alcohol Psychoses	8.1	6.9	6.5	6.2

<sup>1</sup> Excludes acute hospitals and maternity hospitals and includes Scottish residents only.

<sup>2</sup> Discharges where alcohol-related problems are recorded as either primary or secondary diagnosis.

<sup>3</sup> Diseases recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10). See Appendix D for list of codes used in analysis.

<sup>4</sup> Caution is necessary when interpreting these figures. The recording of alcohol misuse may vary from hospital to hospital. Where alcohol misuse is suspected but unconfirmed it may not be recorded by the hospital.

Source : ISD Scotland (SMR04)

**Table A24: GP prevalence rates for alcohol problems<sup>1</sup> per 1,000 population for CMR practices, and estimated number of patients, by sex and age: Scotland, 1998-2003**

GP prevalence rates per 1,000 population						
	1998 <sup>2</sup>	1999 <sup>3</sup>	2000 <sup>4</sup>	2001 <sup>5</sup>	2002 <sup>6</sup>	2003 <sup>7</sup>
<b>Males</b>						
0 - 14	0.2	0.2	0.2	0.1	0.2	0.2
15 - 24	5.8	5.9	5.7	5.8	5.2	6.4
25 - 44	14.3	13.9	14.8	14.4	15.1	16.9
45 - 64	19.5	20.0	20.1	19.8	20.1	19.6
65 - 74	10.8	13.3	10.9	9.4	11.4	10.2
75 - 84	5.9	6.8	6.8	7.1	4.7	5.4
85 +	5.9	3.9	4.5	1.2	2.7	3.0
<b>All Ages<sup>8</sup></b>	<b>11.1</b>	<b>11.4</b>	<b>11.6</b>	<b>11.3</b>	<b>11.6</b>	<b>12.1</b>
<b>Females</b>						
0 - 14	0.0	0.1	0.1	0.2	0.1	0.1
15 - 24	1.6	1.3	3.0	2.2	2.0	2.9
25 - 44	5.6	6.3	6.4	6.1	6.7	7.7
45 - 64	7.5	7.5	8.6	7.9	8.4	8.3
65 - 74	3.9	4.1	3.5	3.0	3.4	3.0
75 - 84	1.7	1.6	2.1	1.7	2.1	2.2
85 +	1.7	1.4	1.4	1.3	0.4	0.0
<b>All Ages<sup>8</sup></b>	<b>4.1</b>	<b>4.4</b>	<b>4.8</b>	<b>4.4</b>	<b>4.7</b>	<b>5.1</b>
Estimated number of patients						
	1998 <sup>2</sup>	1999 <sup>3</sup>	2000 <sup>4</sup>	2001 <sup>5</sup>	2002 <sup>6</sup>	2003 <sup>7</sup>
<b>Males</b>						
0 - 14	99	101	89	38	96	85
15 - 24	1921	1937	1865	1837	1697	2099
25 - 44	11144	10748	11369	10302	10665	11836
45 - 64	11320	11699	11853	12041	12322	12211
65 - 74	2114	2603	2149	1879	2295	2085
75 - 84	564	661	671	736	502	588
85 +	124	84	101	27	64	68
<b>All Ages<sup>8</sup></b>	<b>27689</b>	<b>28356</b>	<b>28862</b>	<b>27518</b>	<b>28284</b>	<b>29512</b>
<b>Females</b>						
0 - 14	20	68	30	76	36	49
15 - 24	497	405	952	683	637	913
25 - 44	4347	4890	4915	4660	5014	5720
45 - 64	4574	4648	5371	4971	5356	5376
65 - 74	946	988	839	735	846	749
75 - 84	280	265	347	292	364	385
85 +	106	85	88	86	27	0
<b>All Ages<sup>8</sup></b>	<b>10811</b>	<b>11490</b>	<b>12713</b>	<b>11627</b>	<b>12395</b>	<b>13271</b>

<sup>1</sup> Appendix E includes details of Read codes used in analysis.

<sup>2</sup> Based on 48 CMR practices which collected and submitted complete GP data year ending December 1998

<sup>3</sup> Based on 52 CMR practices which collected and submitted complete GP data year ending December 1999

<sup>4</sup> Based on 57 CMR practices which collected and submitted complete GP data year ending December 2000

<sup>5</sup> Based on 65 CMR practices which collected and submitted complete GP data year ending December 2001

<sup>6</sup> Based on 70 CMR practices which collected and submitted complete GP data year ending December 2002

<sup>7</sup> Based on 63 CMR practices, population 405,592 January 2003 - December 2003

<sup>8</sup> 'All Ages' includes a small number of patients whose age is unknown. Also, figures derived from the all ages rate and population do not equal the sum of the estimated numbers for each age group, due to rounding.

Source: PTI/CMR, ISD Scotland.

**Table A25: GP contact rates for alcohol problems<sup>1</sup> per 1,000 population for CMR practices, and estimated number of contacts, by sex and age: Scotland, 1998-2003**

	GP contact rates per 1,000 population					
	1998 <sup>2</sup>	1999 <sup>3</sup>	2000 <sup>4</sup>	2001 <sup>5</sup>	2002 <sup>6</sup>	2003 <sup>7</sup>
<b>Males</b>						
0 - 14	0.3	0.2	0.2	0.1	0.2	0.2
15 - 24	11.1	14.4	11.3	11.9	8.8	11.7
25 - 44	40.4	38.7	41.8	37.9	40.8	43.3
45 - 64	51.8	53.1	55.4	53.8	54.1	51.7
65 - 74	19.8	29.2	22.5	19.4	22.8	18.8
75 - 84	8.1	8.9	12.2	11.7	7.4	8.3
85 +	6.9	6.2	8.4	1.2	3.8	3.0
<b>All Ages<sup>8</sup></b>	<b>28.7</b>	<b>29.8</b>	<b>30.9</b>	<b>29.1</b>	<b>29.8</b>	<b>29.9</b>
<b>Females</b>						
0 - 14	0.0	0.1	0.1	0.2	0.1	0.1
15 - 24	2.8	1.9	5.5	4.0	3.9	4.2
25 - 44	16.7	18.5	17.8	17.3	17.9	20.8
45 - 64	21.0	19.8	22.8	21.7	22.2	21.8
65 - 74	7.7	7.3	7.9	6.3	8.2	6.8
75 - 84	3.3	3.6	4.2	3.5	4.9	3.6
85 +	2.8	2.0	3.1	1.5	0.4	0.0
<b>All Ages<sup>8</sup></b>	<b>11.2</b>	<b>11.4</b>	<b>12.5</b>	<b>11.8</b>	<b>12.3</b>	<b>12.8</b>
<b>Estimated number of contacts</b>						
	1998 <sup>2</sup>	1999 <sup>3</sup>	2000 <sup>4</sup>	2001 <sup>5</sup>	2002 <sup>6</sup>	2003 <sup>7</sup>
<b>Males</b>						
0 - 14	139	101	89	38	96	85
15 - 24	3635	4703	3684	3791	2849	3859
25 - 44	31408	29926	32181	27135	28803	30267
45 - 64	29975	31042	32693	32720	33247	32186
65 - 74	3894	5723	4430	3893	4601	3834
75 - 84	773	864	1211	1204	778	896
85 +	145	134	188	27	89	68
<b>All Ages<sup>8</sup></b>	<b>71231</b>	<b>73989</b>	<b>76737</b>	<b>70779</b>	<b>72468</b>	<b>72812</b>
<b>Females</b>						
0 - 14	20	68	30	76	36	49
15 - 24	890	599	1723	1260	1237	1344
25 - 44	12922	14286	13673	13189	13445	15423
45 - 64	12834	12211	14193	13738	14202	14184
65 - 74	1893	1774	1926	1554	2029	1674
75 - 84	539	600	694	597	833	618
85 +	169	119	190	101	27	0
<b>All Ages<sup>8</sup></b>	<b>29476</b>	<b>30105</b>	<b>32949</b>	<b>30942</b>	<b>32154</b>	<b>33560</b>

<sup>1</sup> Appendix E includes details of Read codes used in analysis.<sup>2</sup> Based on 48 CMR practices which collected and submitted complete GP data year ending December 1998<sup>3</sup> Based on 52 CMR practices which collected and submitted complete GP data year ending December 1999<sup>4</sup> Based on 57 CMR practices which collected and submitted complete GP data year ending December 2000<sup>5</sup> Based on 65 CMR practices which collected and submitted complete GP data year ending December 2001<sup>6</sup> Based on 70 CMR practices which collected and submitted complete GP data year ending December 2002<sup>7</sup> Based on 63 CMR practices, population 405,592 January 2003 - December 2003<sup>8</sup> 'All Ages' includes a small number of patients whose age is unknown. Also, figures derived from the all ages rate and population do not equal the sum of the estimated numbers for each age group, due to rounding.

Source: PTI/CMR, ISD Scotland.

**Table A26: Percentage of new individual patients/clients<sup>1,2</sup> reporting alcohol as an illicit drug of misuse, by age and sex: Scotland, 2001/02-2003/04**

	2001/02			2002/03			2003/04		
	All cases	Male	Female	All cases	Male	Female	All cases	Male	Female
<b>All ages</b>									
Used illicit drugs	10563	7224	3339	10495	7063	3432	10994	7311	3683
% reporting alcohol	8	9	6	10	11	8	11	12	10
<b>Under 14 years</b>									
Used illicit drugs	41	22	19	47	38	9	68	45	23
% reporting alcohol	34	32	37	53	53	56	47	44	52
<b>14 - 17 years</b>									
Used illicit drugs	509	307	202	447	248	199	563	361	202
% reporting alcohol	23	27	18	30	34	26	39	41	37
<b>18 - 24 years</b>									
Used illicit drugs	3524	2181	1343	3308	2003	1305	3004	1774	1230
% reporting alcohol	6	7	4	7	9	5	8	9	6
<b>25 - 34 years</b>									
Used illicit drugs	4914	3541	1373	4917	3459	1458	5170	3549	1621
% reporting alcohol	7	7	6	8	9	6	8	8	8
<b>35 - 44 years</b>									
Used illicit drugs	1395	1041	354	1580	1172	408	1889	1363	526
% reporting alcohol	12	14	9	14	15	13	14	14	12
<b>45 - 64 years</b>									
Used illicit drugs	179	131	48	193	141	52	296	216	80
% reporting alcohol	21	20	23	18	16	23	17	19	14
<b>65 years+</b>									
Used illicit drugs	1	1	0	3	2	1	4	3	1
% reporting alcohol	-	-	n/a	-	-	-	-	-	-

<sup>1</sup> All figures in this table exclude penal establishment inmates and information received from needle exchanges.

<sup>2</sup> Percentages are expressed as a proportion of those reporting at least one illicit drug.

Source : Scottish Drug Misuse Database

**Table A27: New referrals to Alcohol Focus Scotland affiliated Local Councils on Alcohol<sup>1</sup>: Scotland 1997/98-2001/02**

	1997/98	1998/99	1999/00	2000/01	2001/02
<b>Total referrals</b>	<b>5061</b>	<b>5350</b>	<b>5136</b>	<b>5034</b>	<b>5196</b>
<b>Primary Referrals</b>					
Both Sexes	4482	4753	4611	4506	4705
Male	3285	3318	3147	3153	3297
Female	1197	1435	1464	1353	1408
<b>Secondary Referrals</b>					
Both Sexes	579	597	525	528	491
Male	105	128	120	101	117
Female	474	469	405	427	374

<sup>1</sup> Data is for those LCAs affiliated to AFS during the time period.

Source: Alcohol Focus Scotland.

**Table A28: Total number of death registrations and death registrations with an alcohol-related condition<sup>1,2,3</sup>, by sex: Scotland 1980-2003**

	All deaths			Alcohol related deaths		
	Both Sexes	Male	Female	Both Sexes	Male	Female
1980	63299	31669	31630	583	414	169
1981	63828	31700	32128	568	402	166
1982	65022	31801	33221	555	403	152
1983	63454	31196	32258	552	391	161
1984	62345	30731	31614	597	399	198
1985	63967	31147	32820	629	434	195
1986	63467	31111	32356	621	446	175
1987	62014	30384	31630	616	443	173
1988	61957	30195	31762	677	483	194
1989	65017	31025	33992	728	509	219
1990	61527	29617	31910	684	477	207
1991	61041	29312	31729	674	460	214
1992	60937	29334	31603	697	500	197
1993	64049	30504	33545	786	567	219
1994	59328	28416	30912	881	654	227
1995	60500	28791	31709	957	680	277
1996	60654	29209	31445	1176	837	339
1997	59494	28305	31189	1381	993	388
1998	59164	28132	31032	1454	1040	414
1999	60281	28605	31676	1594	1160	434
2000	57799	27511	30288	1694	1236	458
2001	57382	27324	30058	1771	1311	460
2002	58103	27743	30360	1957	1426	531
2003	58472	27832	30640	1980	1448	532

<sup>1</sup> Deaths where an alcohol-related condition is coded as either underlying or contributing cause of death.

<sup>2</sup> Deaths recorded using the World Health Organisation's International Classification of Diseases 9th and 10th Revisions (ICD9 & ICD10)

<sup>3</sup> See Appendix C for Codes used in analysis.

Source : NAIR, based on data supplied by GROS.

**Table A29: Death registration rates per 100,000 population with an alcohol-related condition<sup>1,2,3</sup>, by sex: Scotland 1980-2003**

	<b>Both Sexes</b>	<b>Male</b>	<b>Female</b>
1980	11.3	16.7	6.3
1981	11.0	16.1	6.2
1982	10.7	16.2	5.7
1983	10.7	15.8	6.0
1984	11.6	16.1	7.4
1985	12.3	17.6	7.3
1986	12.1	18.1	6.6
1987	12.1	18.0	6.5
1988	13.3	19.8	7.4
1989	14.3	20.8	8.3
1990	13.5	19.5	7.8
1991	13.3	18.8	8.1
1992	13.7	20.4	7.5
1993	15.4	23.2	8.3
1994	17.3	26.7	8.6
1995	18.8	27.7	10.5
1996	23.1	34.2	12.8
1997	27.2	40.7	14.7
1998	28.6	42.6	15.7
1999	31.4	47.6	16.5
2000	33.5	50.8	17.4
2001	35.0	53.9	17.5
2002	38.7	58.6	20.2
2003	39.2	59.5	20.3

<sup>1</sup> Deaths where an alcohol-related condition is coded as either underlying or contributing cause of death.

<sup>2</sup> Deaths recorded using the World Health Organisation's International Classification of Diseases 9th and 10th Revisions (ICD9 & ICD10)

<sup>3</sup> See Appendix C for Codes used in analysis.

Source : NAIR, based on data supplied by GROS.

**Table A30: Death registration rates per 100,000 population with an alcohol-related condition<sup>1,2,3</sup>, by sex and deprivation quintile: Scotland 2003**

	Deprivation Quintile				
	Least deprived				Most deprived
	1	2	3	4	5
<b>Both Sexes</b>	<b>19.0</b>	<b>27.0</b>	<b>38.2</b>	<b>44.2</b>	<b>69.5</b>
Male	28.1	40.1	56.1	70.6	108.5
Female	10.4	14.8	21.6	20.4	34.6

<sup>1</sup> Deaths where an alcohol-related condition is coded as either underlying or contributing cause of death.

<sup>2</sup> Deaths recorded using the World Health Organisation's International Classification of Diseases 10th Revision (ICD10)

<sup>3</sup> See Appendix C for Codes used in analysis.

Source : NAIR, based on data supplied by GROS.

**Table A31: Total number of death registrations, death registrations with an alcohol-related condition<sup>1,2,3</sup> and as a percentage of total deaths, by age and sex: Scotland 1980-2003**

	All deaths				Alcohol related deaths				Alcohol deaths as % of total deaths			
	All Ages	0-44	45-64	65+	All Ages	0-44	45-64	65+	All Ages	0-44	45-64	65+
1980	63299	3751	13042	46506	583	109	343	131	0.9	2.9	2.6	0.3
1981	63828	3607	12806	47415	568	98	333	137	0.9	2.7	2.6	0.3
1982	65022	3490	12860	48672	555	88	326	141	0.9	2.5	2.5	0.3
1983	63454	3329	12785	47340	552	81	336	135	0.9	2.4	2.6	0.3
1984	62345	3337	12533	46475	597	96	356	145	1.0	2.9	2.8	0.3
1985	63967	3272	12187	48508	629	89	368	172	1.0	2.7	3.0	0.4
1986	63467	3194	11874	48399	621	113	331	177	1.0	3.5	2.8	0.4
1987	62014	3132	11462	47420	616	109	338	169	1.0	3.5	2.9	0.4
1988	61957	3258	11277	47422	677	121	375	181	1.1	3.7	3.3	0.4
1989	65017	3203	11045	50769	728	123	415	190	1.1	3.8	3.8	0.4
1990	61527	3146	10454	47927	684	136	359	189	1.1	4.3	3.4	0.4
1991	61041	3093	10167	47781	674	130	346	198	1.1	4.2	3.4	0.4
1992	60937	3046	9954	47937	697	119	371	207	1.1	3.9	3.7	0.4
1993	64049	3024	10074	50951	786	123	415	248	1.2	4.1	4.1	0.5
1994	59328	2987	9623	46718	881	164	476	241	1.5	5.5	4.9	0.5
1995	60500	2934	9591	47975	957	149	546	262	1.6	5.1	5.7	0.5
1996	60654	3001	9672	47979	1176	194	669	313	1.9	6.5	6.9	0.7
1997	59494	2909	9278	47306	1381	251	753	377	2.3	8.6	8.1	0.8
1998	59164	3010	9146	47006	1454	255	830	369	2.5	8.5	9.1	0.8
1999	60281	2933	9152	48196	1594	289	888	417	2.6	9.9	9.7	0.9
2000	57799	2942	8915	45941	1694	266	964	464	2.9	9.0	10.8	1.0
2001	57382	2940	9043	45399	1771	291	1001	479	3.1	9.9	11.1	1.1
2002	58103	2981	9066	46054	1957	281	1151	525	3.4	9.4	12.7	1.1
2003	58472	2869	8929	46671	1980	291	1141	548	3.4	10.1	12.8	1.2

<sup>1</sup> Deaths where an alcohol-related condition is coded as either underlying or contributing cause of death.

<sup>2</sup> Deaths recorded using the World Health Organisation's International Classification of Diseases 9th and 10th Revisions

<sup>3</sup> See Appendix C for Codes used in analysis.

Source : NAIR, based on data supplied by GROS.

**Table A32: Death registrations with alcoholic liver disease<sup>1,2,3</sup> and rates per 100,000 population, by sex: Scotland 1980-2003.**

	Death registrations			Rates per 100,000 population		
	Both Sexes	Male	Female	Both Sexes	Male	Female
1980	215	147	68	4.2	5.9	2.5
1981	225	152	73	4.3	6.1	2.7
1982	229	164	65	4.4	6.6	2.4
1983	254	170	84	4.9	6.9	3.1
1984	278	175	103	5.4	7.1	3.9
1985	282	181	101	5.5	7.3	3.8
1986	243	170	73	4.8	6.9	2.8
1987	254	181	73	5.0	7.4	2.8
1988	289	193	96	5.7	7.9	3.6
1989	361	243	118	7.1	9.9	4.5
1990	345	228	117	6.8	9.3	4.4
1991	348	227	121	6.8	9.3	4.6
1992	344	227	117	6.8	9.3	4.4
1993	398	258	140	7.8	10.5	5.3
1994	449	324	125	8.8	13.2	4.7
1995	503	340	163	9.9	13.9	6.2
1996	615	419	196	12.1	17.1	7.4
1997	718	499	219	14.1	20.4	8.3
1998	733	506	227	14.4	20.7	8.6
1999	812	556	256	16.0	22.8	9.7
2000	944	657	287	18.6	27.0	10.9
2001	1056	743	313	20.9	30.5	11.9
2002	1182	829	353	23.4	34.1	13.5
2003	1170	814	356	23.1	33.4	13.6

<sup>1</sup> Deaths where alcoholic liver disease is coded as either underlying or contributing cause of death.

<sup>2</sup> Deaths recorded using the World Health Organisation's International Classification of Diseases 9th and 10th Revisions (ICD9 & ICD10)

<sup>3</sup> Alcoholic liver disease, ICD9 5710-5713 / ICD10 K70.

Source : NAIR, based on data supplied by GROS.

## Appendix B: Data sources

This appendix includes information on a number of the data sources used in the publication in order to highlight some of the technical issues to consider when interpreting the data. Fuller technical details about sources are available at the links provided.

### Surveys

#### Expenditure and Food Survey

This is an annual UK survey. The data reported is from 2 year's data, 2001/02 and 2002/03. There were 1,207 Scottish households in the sample during these 2 years. Information on the survey and reports can be found on the National Statistics website at the following link:

[www.statistics.gov.uk/StatBase/Product.asp?vlnk=361&Pos=2&ColRank=1&Rank=128](http://www.statistics.gov.uk/StatBase/Product.asp?vlnk=361&Pos=2&ColRank=1&Rank=128)

#### General Household Survey (GHS)

The GHS is a Britain wide survey covering a wide range of topics including drinking. Drinking questions were originally asked every 2 years from 1988, and they have appeared each year since 2000. Changes in government sensible drinking guidelines have changed the focus of the reporting from weekly to daily consumption. This has led to discontinuities in the reporting of some data. In 2003, the unweighted Scottish sample for daily drinking questions was 652 men and 839 women. Information about the GHS can be found at:

[www.statistics.gov.uk/StatBase/Product.asp?vlnk=5756&Pos=6&ColRank=1&Rank=272](http://www.statistics.gov.uk/StatBase/Product.asp?vlnk=5756&Pos=6&ColRank=1&Rank=272)

#### Health Education Population Survey (HEPS)

This survey was initiated by HEBS (now NHS Health Scotland) in 1995 to monitor general population trends in Scotland in adults' knowledge, awareness, attitudes and motivation to change with respect to health and health-related behaviours. The survey collects data annually from approximately 1,800 adults aged 16-74 years. A report on the survey from 1996-2003 is available at:

[www.hebs.com/services/pubs/pubfulltext.cfm?TxtTCode=1860&catnav=1&connav=0](http://www.hebs.com/services/pubs/pubfulltext.cfm?TxtTCode=1860&catnav=1&connav=0)

#### ONS Omnibus Survey

The Omnibus Survey is a multi-purpose survey carried out by the Office for National Statistics in most months of the year on behalf of a range of government departments, and other bodies. Questions on drinking are included on an ad hoc basis, usually for two months with about 1,800 sample per month. There were 3,528 respondents to the drinking module in 2004. Data collected includes: alcohol consumption by type of drink; frequency of drinking; maximum daily amount last week; drinking-related knowledge and behaviour; and places where people buy alcohol.

Website at:

[www.statistics.gov.uk/statbase/Product.asp?vlnk=6990](http://www.statistics.gov.uk/statbase/Product.asp?vlnk=6990)

#### ONS Psychiatric Morbidity Surveys

The second survey of Psychiatric Morbidity among adults in private households in Great Britain was conducted in 2000. The survey assessed hazardous drinking using AUDIT and for those scoring more than 10, alcohol dependence using SAD-Q. The Scottish sample in 2000 was approximately 920. The 2000 survey report is at the following link:

[www.statistics.gov.uk/downloads/theme\\_health/psychmorb.pdf](http://www.statistics.gov.uk/downloads/theme_health/psychmorb.pdf)

### **SALSUS - Scottish Schools Adolescent Lifestyle and Substance Use Survey**

SALSUS 2004 was the latest in a series of national school surveys of smoking, drinking and drug use. The survey collected data from pupils in years S2 and S4. For the purpose of reporting, S2 pupils are referred to as '13 year olds' and S4 pupils referred to as '15 year olds'. The SALSUS 2004 Interim report was published in October 2004 and contains a selection of data from the survey. Further results from the 2004 survey will be in the full national report due in March 2005. The achieved sample in 2004 was 7,062, and in 2002 it was 23,090. Some data from the 2002 survey is included in this publication where 2004 data was not available at time of writing. The SALSUS reports are available from:

[www.drugmisuse.isdscotland.org/publications/abstracts/salsus.htm](http://www.drugmisuse.isdscotland.org/publications/abstracts/salsus.htm)

### **Scottish Health Survey**

The Scottish Health Survey sampled approximately 9,000 people across Scotland in 1998. Within the survey, there are a number of questions about alcohol consumption. For social class data, age standardised data has been reported. Results from the 2003 Scottish Health Survey are expected in late 2005 and were not available when Alcohol Statistics Scotland was published. *The Scottish Health Survey 1998* is available at [www.show.scot.nhs.uk/scottishhealthsurvey/](http://www.show.scot.nhs.uk/scottishhealthsurvey/)

### **Scottish Crime Survey**

The Survey has a sample of approximately 5,000 people aged 16 and over. Data from both the 2000 and 2003 surveys are reported in this publication. The 2003 survey has yet to report on alcohol related violence.

Scottish Executive Criminal Justice research publications, including the Scottish Crime Survey are available at:

[www.scotland.gov.uk/about/ASD/CSU/00017534/cjr-p.aspx](http://www.scotland.gov.uk/about/ASD/CSU/00017534/cjr-p.aspx)

### **Scottish Prison Survey**

This is a regular survey of all offenders in Scottish prisons. It asks questions about a wide range of topics. The 4<sup>th</sup> Survey included questions on alcohol and to date is the only one to include such questions.

The Scottish Prison Service website is at:

[www.sps.gov.uk](http://www.sps.gov.uk)

## **Regular Statistical Publications**

### **Consumer Trends**

Consumer Trends contains detailed estimates of Household Final Consumption Expenditure for the UK. Alcohol data is based on volume of sales. Figures at current prices and seasonally adjusted have been reported in this publication. Detailed notes about the methodology used to derive the figures can be found in the publication on the National Statistics website:

[www.statistics.gov.uk/StatBase/Product.asp?vlnk=242&Pos=1&ColRank=1&Rank=422](http://www.statistics.gov.uk/StatBase/Product.asp?vlnk=242&Pos=1&ColRank=1&Rank=422)

### **Criminal Proceedings in Scottish Courts**

This publication reports statistics on criminal proceedings in Scottish courts. It includes information on the types of crimes and offences for which persons are convicted, sentencing outcomes and the characteristics of convicted offenders. Data for all but a small number of motoring offences is taken from the Scottish Criminal Record Office (SCRO).

Criminal Proceeding in Scottish Courts 2002

[www.scotland.gov.uk/stats/bulletins/00312-00.asp](http://www.scotland.gov.uk/stats/bulletins/00312-00.asp)

**Liquor Licensing data**

The Scottish Executive publish an annual bulletin of statistics on liquor licences in force in Scotland and on regular extensions to permitted hours granted, as recorded by local authority licensing boards. Statistics on the number of registered clubs are also included which are provided by Sheriff Courts. The most recent published licensing data is *Liquor Licensing in Scotland 1999-2003*, [www.scotland.gov.uk/stats/bulletins/00250-00.asp](http://www.scotland.gov.uk/stats/bulletins/00250-00.asp)

**Recorded Crime**

The statistical return from which the figures in this bulletin are taken is a count of the numbers of crimes and offences recorded by Scotland's 8 police forces. It does not include offences recorded by the British Transport Police, Ministry of Defence and UK Atomic Energy Authority. These statistics do not reveal the incidence of all crime committed. Not all crime incidents are reported to the police. In addition, a number of offences are discovered and recorded as a result of police activity rather than by being reported to the police by the public. Hence the strength and deployment of the police forces mainly determine the numbers of such offences recorded. Variations in police recording practice can also occur between areas over time. Some of the data used in this publication was supplied by Scottish Executive Criminal Justice Statistics Team. Recorded Crime in Scotland 2003:

[www.scotland.gov.uk/stats/bulletins/00338-00.asp](http://www.scotland.gov.uk/stats/bulletins/00338-00.asp)

**Road Accidents Scotland**

Road accident statistics are compiled from returns made by police forces. For each injury road accident (that is, road accidents in which one or more people are injured or killed) known to have occurred in their area, the police authorities complete a statistical return which provides details of the accident circumstances, separate information for each vehicle which was involved in the accident and separate information for each person who was injured in the accident. The data covers all motorists who were known to be involved in injury road accidents (the figures do not include, for example, those involved in "hit and run" accidents who were not traced).

Road Accidents Scotland 2003:

[www.scotland.gov.uk/library5/transport/ras03-00.asp](http://www.scotland.gov.uk/library5/transport/ras03-00.asp)

**Datasets****General Acute Inpatient / Day Case Record (SMR01)**

SMR01 forms are returned to ISD by all general and acute hospitals in Scotland. The form collects patient based data on inpatient and day case episodes in general and acute wards. An individual patient can be responsible for a number of episodes. Data is reported in this publication on both patients and episodes. Diagnoses are based on ICD10 coding. Appendix D lists codes used for analysis. The main diagnostic position plus up to five secondary positions were searched but each episode counted only once. Data for 2003/04 is currently provisional. There may be a degree of under recording of alcohol problems, which may vary from hospital to hospital. In SMR01 records, F10 (Mental and behavioural disorders due to use of alcohol) is one of most commonly omitted ICD10 codes. A recent audit of coding found it to be under-recorded by about 16%<sup>1</sup>. At present, there is no routine data collected from Accident and Emergency departments. SMR01 data used in this publication was extracted in November 2004. The SMR Data Manual can be found on the ISD website at: [www.datadictionary.scot.nhs.uk](http://www.datadictionary.scot.nhs.uk)

<sup>1</sup> NHS Scotland *Data Quality Assurance Report On Acute Inpatient / Day Case Data 2000 – 2002*. Available from [www.isdscotland.org/isd/files/SMR01%20National%20Report.pdf](http://www.isdscotland.org/isd/files/SMR01%20National%20Report.pdf)

**General Register Office for Scotland (GROS) Death data**

This dataset has all deaths in Scotland reported to the General Register Office for Scotland. The dataset includes underlying (main) and contributory (secondary) causes of death. Both types of cause were searched but each death only counted once. From 1 January 2000, deaths in Scotland have been coded using ICD10. Appendix C lists codes used for analysis. Classification of underlying cause of death is based on information collected on the medical certificate of cause of death together with any additional information provided subsequently by the certifying doctor. Changes notified to GROS by Procurators Fiscal are also taken into account. Additionally the Crown Office advises GROS of deaths that were judged to have been suicides.

The GROS website is at:

[www.gro-scotland.gov.uk](http://www.gro-scotland.gov.uk)

**Local Councils on Alcohol**

Alcohol Focus Scotland (AFS) has a network of Local Councils on Alcohol (LCAs) who provide counselling services to those affected by their own drinking (primary referrals) or another's drinking (secondary referrals). The information reported in the publication was collated nationally, by Alcohol Focus Scotland, on new referrals to LCAs who were affiliated to AFS during this time period. It does not, therefore, cover all local councils of alcohol. Data for this publication was supplied by AFS. Information about LCAs can be found on the Alcohol Focus Scotland website at:

[www.alcohol-focus-scotland.org.uk/helpandinfo/localagencies.asp](http://www.alcohol-focus-scotland.org.uk/helpandinfo/localagencies.asp)

**Mental Illness Hospital and Psychiatric Unit Inpatient Record (SMR04)**

SMR04 forms are returned to ISD by all mental illness hospitals and psychiatric units in Scotland. The form collects patient based data on day cases and inpatient episodes.

The SMR04 record provides a source of diagnostic information with details recorded both on admission to hospital and on discharge. A main diagnosis is reported, together with provision for up to three further diagnoses on admission, and five further diagnoses on discharge. Information reported on diagnosis in this publication is based on diagnosis at the time of discharge from hospital. The main diagnostic position plus up to five secondary positions were searched but each episode counted only once.

Diagnoses are based on ICD10 coding. The codes used for analysis are listed in Appendix D. An individual patient can be responsible for a number of episodes. Data is reported in this publication on both patients and episodes. Recent SMR04 data is unavailable at a national level due to processing difficulties for some localities. SMR04 data used in this publication was extracted in November 2004. The SMR Data Manual can be found on the ISD website at:

[www.datadictionary.scot.nhs.uk](http://www.datadictionary.scot.nhs.uk)

**PTI data**

Practice Team Information (PTI) is a system for the collection of primary care data from the general practice team, including General Practitioners, practice and community nurses. This system developed from Continuous Morbidity Recording (CMR) which collected data from contacts between GP and patient. Data are collected from every face-to-face contact between a member of the practice team and patient. The data are entered onto the practice GPASS (General Practice Administration System for Scotland) system and monthly extracts are sent to ISD for analysis. Currently there are around 63 practices in Scotland taking part in PTI. The practices that have been selected to be involved are broadly representative of the Scottish population in terms of age, sex, deprivation and urban/rural mix. This allows the data collected to be extrapolated for Scotland. Information about PTI data can be found at:

[www.isdscotland.org/pti](http://www.isdscotland.org/pti)

### **Scottish Children's Reporter Administration (SCRA)**

SCRA is the non-departmental public body which employs children's reporters. It is also responsible for providing and maintaining the accommodation in which children's hearings take place. Reporters are salaried professionals, usually from a social work or legal background; they receive referrals on children about whom there are welfare concerns (they have either committed offences, they have been abused, etc.) The reporter conducts an investigation to decide whether or not the child requires **compulsory measures of supervision**. If compulsory measures are thought to be necessary then the child is referred to a children's hearing. The hearing takes the ultimate decision about whether the child requires compulsory measures, if they find that they are necessary, they issue a supervision requirement.

The Children (Scotland) Act 1995 is the statutory framework, which amongst other things governs the children's hearing system and the work of reporters. Section 52 contains the twelve criteria for deciding whether compulsory measures are necessary and therefore referral to a children's hearing. These criteria are commonly known as the **grounds for referral** and one of them has to be fulfilled before a child can be referred to a hearing. Reporters categorise referrals according to these twelve criteria. NB A child can be referred on more than one ground at any one time, and can be referred multiple times on the same ground over a period of time. Section 52 sub-section (j) is defined as a child has allegedly misused alcohol or any drug, whether or not a controlled drug within the meaning of the Misuse of Drugs Act 1971. It is this ground of referral that is counted in the table reported in this publication.

Details of children referred, the investigative and administrative process undertaken for each referral is recorded by reporters and support staff on SCRA's Referrals Administration Database (RAD). All teams in Scotland were rolled-out in November 2002. The RAD is essentially a case-processing tool that is interrogated to provide information on the work of reporters and the referrals they receive. It is from this database that the figures given have been derived. The SCRA website is at: [www.scra.gov.uk](http://www.scra.gov.uk)

### **Scottish Drugs Misuse Database (SDMD) (SMR24)**

The SDMD collects a set of data from new clients entering specialist drug treatment services on a form called SMR24. As such, statistics do not reflect the total number of drug users seen by services during any period. The SMR24 allows the recording of alcohol only when reported with another problem drug. Alcohol can be recorded as the main problem drug. Data used in this publication was supplied by the Drug Misuse Information Strategy Team (DMIST) at ISD Scotland.

Information about the database and its output:

[www.drugmisuse.isdscotland.org/aboutus.htm](http://www.drugmisuse.isdscotland.org/aboutus.htm)

## **Appendix C: ICD codes used for analysing alcohol related deaths**

The following code lists were devised by ISD for looking at mortality information in Scotland. Mortality data is coded using the World Health Organization's, International Classification of Disease's Revision 9 & 10 (ICD9 & ICD10). Data for the registration period of 1980 to 1999 is coded using ICD9, whilst data from 2000 to the present day is coded using ICD10.

It should also be noted that for analysis purposes not all codes from ICD9 to ICD10 are directly comparable.

### **ICD9 Conditions and associated codes (1980 - 1999)**

291 - Alcoholic psychoses,  
303 - Alcohol dependence syndrome,  
305.0 - Nondependent abuse of alcohol,  
357.5 - Alcoholic polyneuropathy,  
425.5 - Alcoholic cardiomyopathy,  
535.3 - Alcoholic gastritis,  
571.0, 571.1, 571.2, 571.3 - Alcoholic chronic liver disease and cirrhosis,  
790.3 - Excessive blood level of alcohol,  
E860.0 - Accidental poisoning by alcohol NEC (alcoholic beverages),  
E860.9 - Accidental poisoning by alcohol NEC, (unspecified).

### **ICD10 Conditions and associated codes (2000 - 2002)**

F10 - Mental and behavioural disorders due to the use of alcohol,  
G31.2 - Degeneration of nervous system due to alcohol,  
G62.1 - Alcoholic polyneuropathy,  
I42.6 - Alcoholic cardiomyopathy,  
K29.2 - Alcoholic gastritis,  
K70 - Alcoholic liver disease,  
K86.0 - Alcohol-induced chronic pancreatitis.

## Appendix D: ICD10 codes used for analysing hospital discharges

E52 - Niacin deficiency [pellagra],  
F10 - Mental and behavioural disorders due to use of alcohol,  
G31.2 - Degeneration of nervous system due to alcohol,  
G62.1 - Alcoholic polyneuropathy,  
G72.1 - Alcoholic myopathy,  
I42.6 - Alcoholic cardiomyopathy,  
K29.2 - Alcoholic gastritis,  
K70 - Alcoholic liver disease,  
K86.0 - Alcohol-induced chronic pancreatitis,  
O35.4 - Maternal care for (suspected) damage to foetus from alcohol,  
P04.3 - Fetus and newborn affected by maternal use of alcohol,  
Q86.0 - Fetal alcohol syndrome (dysmorphic),  
R78.0 - Finding of alcohol in blood,  
T50.6 - Antidotes and chelating agents, not elsewhere classified,  
T51.0 - Toxic effect of ethanol,  
T51.9 - Toxic effect of alcohol, unspecified,  
X45 - Accidental poisoning by and exposure to alcohol,  
X65 - Intentional self-poisoning by and exposure to alcohol,  
Y15 - Poisoning by and exposure to alcohol undetermined intent,  
Y57.3 - Alcohol deterrents,  
Y90 - Evidence of alcohol involuntary determined by blood alcohol level,  
Y91 - Evidence of alcohol involvement determined by level intoxication,  
Z13.3 - Special screening exam for mental and behavioural disorders,  
Z50.2 - Alcohol rehabilitation,  
Z63.7 - Other stressful life events affecting family and household,  
Z71.4 - Alcohol abuse counselling and surveillance,  
Z72.1 - Alcohol use,  
Z81.1 - Family history of alcohol abuse,  
Z86.4 - Personal history of psychoactive substance abuse.

## Appendix E: Read codes used for analysing PTI/CMR data

1282.	FH: Alcoholism	F3941	Alcoholic myopathy
13L3.	Relative - psychotic illness	G555.	Alcoholic cardiomyopathy
13Y8.	Alcoholics anonymous	G8523	Oes varic alcohol cirr liver
1462.	H/O: alcoholism	J153.	Alcoholic gastritis
63C7.	Maternal alcohol abuse	J610.	Alcoholic fatty liver
6792.	Health ed. - alcohol	J611.	Acute alcoholic hepatitis
67A5.	Pregnancy alcohol advice	J612.	Alcoholic cirrhosis of liver
8BA8.	Alcohol detoxification	J6120	Alcoholic fibrosis and scleros
8CE1.	Alcohol leaflet given	J613.	Alcoholic liver damage unspe
8G32.	Aversion therapy - alcoholism	J6130	Alcoholic hepatic failure
8H35.	Admit to alcohol detox centre	J617.	Alcoholic hepatitis
C1505	Alchl-indc pseud-Cushing's syn	J6170	Chronic alcoholic hepatitis
E01..	Alcoholic psychoses	J6710	Alcohol-ind chron pancreatitis
E010.	Alcohol withdrawal delirium	R103.	[D]Alcohol blood level excess
E011.	Alcohol amnestic syndrome	SLH3.	Alcohol deterrent poisoning
E0110	Korsakov's alcoholic psychosis	TJH3.	AR - alcohol deterrents
E0111	Korsakov + peripheral neuritis	U209.	[X]Self poisoning by alcohol
E0112	Wernicke-Korsakov syndrome	U2090	[X]Self pois alcohol home
E011z	Alcohol amnestic syndrome NOS	U2091	[X]S/pois alcohol res instit
E012.	Other alcoholic dementia	U2092	[X]S/pois alcohol pub instit
E0120	Chronic alcoholic brain syndr.	U2093	[X]S/pois alcohol sport area
E013.	Alcohol withdrawal hallucinos.	U2094	[X]S/pois alcohol on highway
E014.	Pathological alcohol intoxic.	U2095	[X]S/pois alcohol trade area
E015.	Alcoholic paranoia	U2096	[X]S/pois alcohol indust area
E01y.	Other alcoholic psychosis	U2097	[X]S/pois alcohol on farm
E01y0	Alcohol withdrawal syndrome	U209y	[X]S/pois alcohol OS place
E01yz	Other alcoholic psychosis NOS	U209z	[X]S/pois alcohol unsp place
E01z.	Alcoholic psychosis NOS	U409.	[X]Poisoning ?intent alcohol
E23..	Alcohol dependence syndrome	U4090	[X]Poison ?intent alcohol hon
E230.	Acute alcoholic intoxication	U4091	[X]Pois ?int alcohol res ins
E2300	Acute alcoholic intoxic. unsp.	U4092	[X]Pois ?int alcohol pub inst
E2301	Acute alcoh.intox.-continuous	U4093	[X]Pois ?int alcohol sport ar
E2302	Acute alcoh.intox.-episodic	U4094	[X]Pois ?int alcohol on hway
E2303	Acute alcoh.intox.in remission	U4095	[X]Pois ?int alcohol trade ar
E230z	Acute alcoholic intoxic. NOS	U4096	[X]Pois ?int alcohol indust ar
E231.	Chronic alcoholism	U4097	[X]Pois ?intent alcoh on farm
E2310	Chronic alcoholism unspecified	U409y	[X]Pois ?int alcohol OS place
E2311	Chronic alcoholism-continuous	U409z	[X]Pois ?int alcohol unsp plc
E2312	Chronic alcoholism-episodic	U60H3	[X]Alcohol deterrents adv eff
E2313	Chronic alcohol.- in remission	U80..	[X]Evid alcoh inv by blood lev
E231z	Chronic alcoholism NOS	U800.	[X]Evidenc alc inv,<20mg/100
E23z.	Alcohol dependence syndr. NOS	U801.	[X]Evid alc inv,20-39mg/100n
E250.	Alcohol abuse - nondependent	U802.	[X]Evid alc inv,40-59mg/100n
E2500	Alcohol abuse - unspecified	U803.	[X]Evid alc inv,60-79mg/100n
E2501	Alcohol abuse - continuous	U804.	[X]Evid alc inv,80-99mg/100n
E2502	Alcohol abuse - episodic	U805.	[X]Ev alc inv,100-119mg/100i
E2503	Alcohol abuse - in remission	U806.	[X]Ev alc inv,120-199mg/100i
E250z	Nondependent alcohol abuse NOS	U807.	[X]Ev alc inv,200-239mg/100i
Eu10.	[X]Mental dis due to alcohol	U808.	[X]Evid alc inv,240mg/100ml-
Eu100	[X]Acute alcohol intoxication	U80z.	[X]Evid alc inv,level not spec
Eu101	[X]Harmful use of alcohol	U81..	[X]Evid alc inv by level intox
Eu102	[X]Alcohol dependence syndrome	U810.	[X]Evid alc inv,mild intox
Eu103	[X]Alcohol withdrawal state	U811.	[X]Evid alc inv,moder intoxic
Eu104	[X]Alcohol withdrawal delirium	U812.	[X]Evid alc inv,severe intoxic
Eu105	[X]Psychot dis due to alcohol	U813.	[X]Evid alc inv,very sev intox
Eu106	[X]Amnesic synd due to alcohol	U814.	[X]Evid alc inv,intox lev NOS
Eu107	[X]Resid psychotic due alcohol	ZV113	[V]PH - Alcoholism
Eu10y	[X]Ot ment/beh dis due alcohol	ZV1A0	[V]Family hist/alcohol abuse
Eu10z	[X]Uns ment/beh dis due alcoh	ZV4KC	[V] Alcohol use
F11x0	Cerebral degenerat.-alcoholism	ZV57A	[V]Alcohol rehabilitation
F1440	Cerebellar ataxia-alcoholism	ZV615	[V]Health problems in family
F375.	Alcoholic polyneuropathy	ZV6D6	[V]Alcohol abus counsel+surve

## Appendix F: Glossary

This Glossary provides information about some of the concepts and terms used in this publication.

### Affordability of alcohol

This provides a measure of the relative affordability of alcohol, by comparing the relative changes in the price of alcohol, with changes in Households' Disposable Income over the same period (with both allowing for inflation). It is calculated in the following way:

$(\text{Real Households' Disposable Income Index} / \text{Relative Alcohol Price Index}) * 100$

If the affordability index is above 100, then alcohol is relatively more affordable than in the base year, 1980. For example, in 2003, alcohol was 54% more affordable, as shown by the affordability index of 154.

### Alcohol related crime

Alcohol can be a direct factor in crime such as drunk driving. It can also be an indirect factor in crime such as its contribution to public disorder. There is no commonly agreed definition of what constitutes 'alcohol related crime'. Objectively quantifying this is therefore difficult. A recent report on alcohol related crime and disorder data from the Home Office defined alcohol related crime as "*instances of crime and disorder that occurred and/or occurred at that level of seriousness because alcohol consumption was a contributory factor*".<sup>2</sup>

This publication reports information on 'alcohol specific offences'. These are offences defined as specifically involving alcohol including drunkenness offences, drinking in a designated place and drunk driving. There are many other offences such as public disorder, criminal damage and violence where alcohol is likely to be a contributory factor. This is not easily quantifiable and has not been included. The figures will therefore not provide a complete picture of 'alcohol related crime'.

### Alcohol related deaths

Alcohol can cause death directly, for example alcoholic liver disease, or it can be a contributory factor, for example in diseases such as breast cancer or pancreatitis. Information on deaths is drawn from the registration of deaths administered by the General Register Office for Scotland. There is no agreed standard methodology for defining alcohol related deaths. In addition to diseases known to be a direct consequence of alcohol consumption, there are many others where alcohol may have had a role, to a greater or lesser extent, but are not recorded as such. Several countries have attempted to quantify the proportions of these deaths (aetiological fractions) from such causes that may be ascribed to alcohol; however there is no internationally agreed standard approach. The figures quoted here are based on a narrow range of causes of death where alcohol is explicitly involved. Appendix C lists the ICD codes used for analysis. The figures include deaths where alcohol was the main underlying cause of deaths as well as those in which alcohol is mentioned as being a contributory cause.

This narrow definition will almost certainly underestimate the number of alcohol related deaths because the involvement of alcohol is known to be under-reported by certifying doctors, and though not explicitly mentioned, alcohol is known to contribute in a proportion of deaths from many other causes such as stroke. Nevertheless, it is believed that this narrow definition has value for monitoring trends and comparing different geographical areas.

<sup>2</sup> *Guidance for local partnerships on alcohol-related crime and disorder data*. Home Office Development and Practice Report 6. 2003.

### **Alcohol related diagnosis**

These refer to conditions known to be a direct consequence of alcohol consumption. Codes used in analyses are in Appendices C-E.

### **Alcohol released for home consumption**

This is alcohol on which duty has been paid for consumption within the UK. This is also known as clearances of alcohol.

### **AUDIT**

The Alcohol Use Disorders Identification Test (AUDIT) is a 10-item questionnaire that was developed by the World Health Organisation to assess hazardous drinking. In the Psychiatric Morbidity Survey 2000, an AUDIT score of eight or above indicates hazardous alcohol use.

### **'Binge Drinking'**

'Binge drinking' is defined in the *Plan for action on alcohol problems* as: 'Drinking an excessive amount on any one occasion'. However, there is no agreed standard way of measuring it and in the absence of such a definition a number of approaches have been adopted. One approach is to use unit-based measures, for example the Scottish Health Survey defines binge drinking as people drinking double their daily benchmark or more on their heaviest drinking day in the past week. Furthermore, reports of consumption of five or more drinks on a single occasion has also been used as a proxy measure of binge drinking, for example in SALSUS. There has, however, been some criticism of unit-based measures because individual responses to alcohol and circumstances of drinking can be very different. It has been felt that a more subjective measure such as people reporting feeling drunk, is a better predictor of binge drinking.<sup>3</sup>

### **CAGE**

CAGE is a 4-item questionnaire designed to indicate whether a person might be alcohol dependent. A score of 2 or more indicates possible alcohol dependence.

### **Cause of death**

The '**underlying cause of death**' is defined by the World Health Organisation (WHO) as: "the disease or injury which initiated the train of events directly leading to death or the circumstances of the accident or violence which produced the fatal injury." The underlying cause of death is the principal cause of death and is that usually used in mortality statistics. Death certificates can also include **contributory causes of death** in addition to the underlying cause of death. A contributory cause of death is a significant condition that contributes to the fatal outcome.

### **Daily Benchmark**

The UK government changed its sensible drinking advice from weekly to daily benchmarks in 1995. Men are advised to drink no more than 3 to 4 units of alcohol per day and women are advised to drink no more than 2 to 3 units per day.

**Deaths see Alcohol related deaths.**

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<sup>3</sup> *Drunk and disorderly: a qualitative study of binge drinking among 18- to 24-year olds*. Home Office 2003.

**Deprivation**

The Carstairs and Morris index was used to calculate deprivation rates. The Carstairs and Morris index was originally developed in the 1980s using 1981 census data. It is composed of four indicators at postcode sector level that were judged to represent material disadvantage in the population (Lack of car ownership, Registrar General Social Class, Overcrowded households and male unemployment). The index has also been calculated based on 1991 census data, which is used for this publication. Rates are reported by quintiles. Quintiles divide the population into five equal proportions so that 20% of the population falls into each quintile. Quintile 1 is the least deprived, quintile 5 the most deprived. Deprivation rates were calculated by dividing the number of people in a deprivation quintile by the 1991 population of that deprivation quintile.

**Drinking in a designated place offence**

This is a relatively recent offence, which relies on the implementation of local byelaws to prohibit drinking in specific public places. Local authorities have since 1993 been able to submit proposals for byelaws under powers contained in the Local Government (Scotland) Act 1973. Drinking alcohol in public in these designated places is an offence. Over recent years more localities have obtained byelaws to prohibit consumption of alcohol in specified areas. This may also be a factor in the rise in the number of offences.

**Drunk driving offences**

A number of specific offences are aggregated under the term Drunk Driving Offences. These include: driving or in charge of motor vehicle while unfit through drink or drugs, blood alcohol content above limit and failing to provide breath, blood or urine specimens.

**Drunkenness offences**

A number of specific offences are aggregated under the term Drunkenness Offences. These include: drunk and incapable, drunk in charge of a child.

**Episode rate**

This refers to the number of hospital episodes during a specified time period for a given population.

**General hospital**

This term is used to describe hospitals that are non-obstetric and non-psychiatric.

**Hospital episode**

This refers to a given period of health care in a hospital setting. An individual (patient) may account for a number of episodes during a given reporting period.

**Injury road accidents**

These are road accidents in which one or more people are injured or killed.

**International Statistical Classification of Diseases and Related Health Problems (ICD)**

The International Statistical Classification of Diseases and Related Health Problems (ICD) revision is used to classify hospital admissions and deaths. Both the 9<sup>th</sup> and 10<sup>th</sup> revisions are used in analyses. Appendix C and D list ICD9 and 10 codes used by NAIR in analysis.

**Patient discharge rate**

This refers to the number of patients (individuals) discharged during a specified time period for a given population.

**Plan for action on alcohol problems**

The *Plan for action on alcohol problems* was published in January 2002 by the Scottish Executive. The key priorities in the Plan are: to reduce binge drinking, because of the harmful social and individual consequences, and to reduce harmful drinking by children and young people because of the particular health and social risks.

**Provisional data**

An indication that the data is provisional means that returns from hospitals are not yet complete and the final figure may be different to that recorded when all returns are in.

**Rates**

A rate gives the number of occurrences of an event for a given number of people in the population for a specified time period. Rates are useful in that they allow comparisons to be made between different populations. Crude rates are usually reported in this publication. A crude rate is one that applies to the population as a whole. It is calculated as:

Crude Rate=Number of Events(Numerator)/Total Population(Denominator)

This is then multiplied by a number such as 100,000 to give the number of events for a given number of people in the population e.g. 30 deaths per 100,000 people.

**SAD-Q**

The Severity of Alcohol Dependence Questionnaire (SAD-Q) is a 20-item questionnaire designed to measure the severity of dependence on alcohol.

**Sensible drinking limits**

In 1995, the UK Government set up a Working Group to review the medical and scientific evidence on the long-term effects of drinking alcohol and to consider whether the sensible drinking message should be altered. The report recommended that the sensible drinking message should be based on daily benchmarks rather than weekly limits, and the Government adopted these recommendations in December 1995. The daily benchmark for men is 3-4 units and for women 2-3 units. Up until 1995 sensible drinking guidelines had been based on weekly consumption, with up to 21 units for men and up to 14 units for women being considered low risk weekly consumption limits.

**Social Class**

Social Class data is reported from the Scottish Health Survey. "Social Class was based on the Registrar General's *Standard Occupational Classification*. Derived variables for social class were defined on two bases: the first was based on the social class of the (adult) informant's own current or last occupation; the second was based on the current or last occupation of the chief income earner within the informant's household."

(Scottish Health Survey, 1998)

**Unit of alcohol**

A unit of alcohol is 8 gms (10mls) of ethanol. In the past it was reasonably safe to say that this was equivalent to half a pint of beer or lager, a measure of spirits or a glass of wine. However, increasing strengths of alcoholic drinks and in some cases standard measures mean that it is now more difficult to know how many units are in the glass of alcohol being drunk. The number of units can be calculated using the following formula: volume in millilitres multiplied by % abv strength, divided by 1000. For example:

- Wine is now served in many establishments in 175ml glasses and 13% abv is common. This would be close to 2.5 units;
- Spirits are now often served in 35ml measures which makes a measure of 40% abv spirits about 1.5 units;
- Beer and lager was commonly 3.5% abv in the past, now it is often 5% abv, making a half pint of beer or lager almost 1.5 units.