

Harmful drinkers would be affected 200 times more than low risk drinkers with an MUP

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A new study of liver patients by the University of Southampton shows that a Minimum Unit Price (MUP) policy for alcohol is exquisitely targeted towards the heaviest drinkers with cirrhosis.

Published today in *Clinical Medicine*, the peer review journal for the Royal College of Physicians, the researchers studied the amount and type of alcohol drunk by 404 liver patients, and also asked patients how much they paid for alcohol. They found that patients with alcohol related cirrhosis were drinking on average the equivalent of four bottles of vodka each week, and were buying the cheapest booze they could find, paying around 33p per unit, irrespective of their income. In contrast, low risk moderate drinkers were paying on average £1.10 per unit.

If the government set a MUP at 50p, it wouldn't affect pubs or bars and would have no impact on moderate drinkers; the average cost would be £4 per year and 90 per cent would not be affected at all, the research shows. The impact on heavy drinking liver patients would be at least 200 times higher.

Alcohol is the most important single cause of early death in working age. Over the last 30 years, the UK has seen a fourfold increase in liver deaths as alcohol has become less expensive and more easily available.

Reducing the affordability of alcohol is recognised internationally as the



most effective and cost effective means to reduce alcohol related harm.

MUP affects the cheapest booze and the heaviest drinkers – it is the fairest and most effective way to tackle problem drinking in the UK.

Professor Nick Sheron, from the University of Southampton, comments: "Setting a Minimum Unit Price for alcohol is an almost perfect alcohol policy because it targets cheap booze bought by very heavy drinkers and leaves moderate drinkers completely unaffected. Our research shows that an MUP set at 50p per unit would affect the liver patients killing themselves with cheap alcohol 200 times more than low risk drinkers.

"Alcohol sold to heavy drinkers provides three-quarters of the profits of the UK drinks industry, of which alcohol sold to very heavy drinkers provides one third. When the government says it is concerned about the impact of MUP on moderate drinkers, they are simply repeating propaganda which has been put out by the drinks industry to try and preserve the huge profits they are making from people drinking at really dangerous levels.

"The House of Commons Health Committee has stated in the past that they were concerned the policies were much closer to and influenced by the drinks industry and supermarkets than expert health professionals – and this is still the problem. "Unless policy makers start listening to the evidence liver deaths will rise even further."

Professor Ian Gilmore, the RCP special advisor on Alcohol and Chair of the Alcohol Health Alliance, adds: "Once again another robust study has highlighted the possible benefits a Minimum Unit Price could have on those in society who drink most heavily.

"Time and time again it has been shown that those with alcoholic liver disease consume very large quantities of alcohol, and as a result, they



purchase the cheapest alcohol, irrespective of their income. The evidence is clear from this study that a Minimum Unit Price would not have a significant effect on low risk drinkers but would target those for whom the impact of <u>alcohol</u>-related liver disease is most devastating.

"Westminster government has no credible excuse for its lamentable failure to take action on MUP."

Provided by University of Southampton

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