

Moderate drinking associated with lower risk of heart attack and death in those with CVD

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Drinking up to 105 grams of alcohol per week—equivalent to 13 UK units of alcohol, less than six pints of medium-strength beer or just over a bottle of wine—may be associated with a decreased risk of heart



attack, stroke, angina or death among those with cardiovascular disease (CVD). The findings are published in the open access journal *BMC Medicine*.

Chengyi Ding, the corresponding author, said: "Our findings suggest that people with CVD may not need to stop drinking in order to prevent additional heart attacks, strokes or angina, but that they may wish to consider lowering their weekly alcohol intake. As alcohol consumption is associated with an increased risk of developing other illnesses, those with CVD who do not drink should not be encouraged to take up drinking."

Researchers from UCL, UK found that, among people with CVD, those who drank up to 15 grams of alcohol per day—equivalent to less than two UK units, with one unit equal to half a pint of medium-strength beer or half a standard glass of wine—had a lower risk of recurrent heart attack, stroke, angina or death, compared to those who did not drink. They also found that those who drank more than 62 grams of alcohol per day—equivalent to less than eight UK units—did not have an increased risk of recurrent heart attack, stroke, angina or death, compared to those who did not drink alcohol.

While drinking up to 15 grams of alcohol per day was associated with lower risks of heart attack, stroke, angina or death, the researchers found that those with the lowest risk drank between six and eight grams of alcohol per day—equivalent to less than one UK unit. Those who drank six grams of alcohol per day had a 50% lower risk of recurrent heart attack, angina or stroke than those who did not drink. Those who drank eight grams per day had a 27% lower risk of death due to heart attack, stroke or angina, and those who drank seven grams per day had a 21% lower risk of death due to any cause, compared to those who did not drink.



The authors estimated the risk of heart attack, stroke, angina and death for 48,423 adults with CVD, utilising data obtained from the UK Biobank, the Health Survey for England, the Scottish Health Survey and from 12 previous studies. Participants reported their average alcohol consumption and data on subsequent heart attacks, strokes, angina or death, over a period of up to 20 years, were obtained from health, hospital admission and death registry records.

The authors caution that their findings may overestimate the reduced risk of recurrent heart attack, <u>stroke</u>, angina and death for moderate drinkers with CVD. This is due to the under-representation of heavy drinkers and categorisation of former drinkers who may have quit drinking due to ill health as non-drinkers in some of the datasets included in their analyses.

More information: Association of alcohol consumption with morbidity and mortality in patients with cardiovascular disease: original data and meta-analysis of 48,423 men and women, *BMC Medicine* (2021). DOI: 10.1186/s12916-021-02040-2

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