



## HEALTH AND ALCOHOL

### The Copenhagen Symposium by Dr Erik Skovenborg

The Scandinavian Medical Alcohol Board invited a group of the world's leading scientists to Copenhagen on 8 November 1996 to discuss important health and alcohol questions.

The morning session was opened by **Professor Serge Renaud** from Bordeaux. With over 200 scientific publications about nutrition, wine and cardio-vascular diseases to his name, Professor Renaud is in an excellent position to speak on the Mediterranean Diet. He and his colleagues recently completed a 12-year prospective study on 36,250 middle-aged men in Nancy. Seventy-seven percent of the subjects drank wine, and wine represented over 75% of their alcohol consumption with little difference between social classes. Compared with non-drinkers, all cause mortality was reduced by 30% for 1-4 glasses of wine per day, due only in part to a reduction in cardio-vascular diseases.

According to Professor Renaud, the Mediterranean Diet is based on a high consumption of bread, legumes, vegetables, fruit and a small amount of meat, cooking with vegetable oil, and a reasonable amount of wine with meals. A simple diet - cheap, enjoyable; typically associated with conviviality and a healthy long life. Other societies might profit by learning from the Mediterranean experience.

**Professor Jean-Marc Orgogozo**, Head of the Department of Neurology at Bordeaux University, demonstrated that risk of haemorrhagic stroke increases linearly with average alcohol consumption, whereas the relation with ischaemic stroke is more complex; mild to moderate alcohol consumption is associated with a definite risk reduction, but heavy consumption is associated with either increased risk or no change. Professor Orgogozo revealed sensational results from a prospective study of elderly people in Bordeaux. He and his colleagues had been able to show a 40% reduction of the risk of dementia and Alzheimer's disease in a

group of men drinking wine in moderation compared with non-drinkers. These promising results made the headlines of the leading Copenhagen newspapers next morning.



*Professor Jean-Marc Orgogozo  
Member of AIM's Editorial Board*

Alcohol may exert protection against coronary heart disease through its effect on fibrinolysis, explained senior scientist, **Henk Hendriks**, of the TNO Nutrition and Food Research Institute, Netherlands. By increasing clot dissolving capacity early in the morning, when a high percentage of heart attacks occur, alcohol may reduce the risk of thrombus formation. And moderate consumption of wine with dinner induces changes that are consistent with an HDL-mediated beneficial reverse cholesterol transport.

**Morten Grønbaek PhD**, of the Institute of Preventative Medicine, Copenhagen, was catapulted to prominence by the results of the Copenhagen City Heart Study. He and his associates found that daily drinkers of wine had half the risk of dying compared with those who never drank wine, while drinkers of beer and spirits experienced no such advantages. However, a systematic review of ecological, case-control and cohort studies, provide strong evidence that all alcoholic drinks are linked with lower risk, stated **Diederick Grobbee**, Professor of Clinical Epidemiology,

Utrecht University Medical School. In the panel discussion which followed, the issue of antioxidant activity of phenolic substances in red wine was raised. Wine may well be just another alcoholic beverage, but the discussion on this matter is bound to continue for some time.

Since 1974, **Lennart Welin PhD**, Sweden, has been an active member of the research group, 'Study of Men Born in 1913'. He had the difficult task of explaining about the confounders, with examples from the cohort study of 60-year old men in Gothenburg. A confounder is a factor or attribute which relates to risk factors or causative factors in the disease being studied. In the 'Study of Men Born in 1913', the relation between moderate wine consumption and a decreased risk of coronary heart disease, may be partly explained by a low prevalence of smoking among moderate wine consumers, while the increased risk among those who seldom or never drank might be partly the result of traditional risk factors such as hypertension, obesity, and an increased level of serum cholesterol. Confounders present a serious drawback in observational studies. The panel discussion pointed to the need for random clinical trials of healthy abstainers willing to consume moderate amounts of alcohol. Healthy middle-aged Norwegians with a family history of coronary heart disease, but not alcoholism, would be a well-justified target group. However, such a trial is not without ethical and practical problems and was not planned by any scientists on the panel.

The afternoon was devoted to the drinking habits and alcohol policies of Norway, Sweden and Denmark. The contributions from the Scandinavian health officials made it clear that the restrictive alcohol monopoly in Norway and Sweden is under severe pressure from the lower alcohol taxes in most of the European Union.

*Further information about the symposium is available from: SMAB Vandværksvej 11, DK5690 Tommerup Denmark Fax: +45 64 75 28 44*