A number of recent news stories have reported that drinking alcoholic beverages has health benefits—some even imply that one or two drinks a day is a government-endorsed route to better health. Other stories say that alcohol abuse is related to many of the major causes of death in America. What’s the real story?

For authoritative, reliable information on what we should eat to be healthy, turn to the Dietary Guidelines for Americans. The Dietary Guidelines have been published by the U.S. Departments of Agriculture and Health and Human Services every 5 years since 1980. They are developed with the advice of leading experts in the fields of nutrition and health based on the latest scientific knowledge. Since the 1st edition of the Dietary Guidelines in 1980, they have addressed the issue of alcohol.

The 1995 Dietary Guidelines advise If You Drink Alcoholic Beverages, Do So In Moderation. This is virtually the same advice that has been given since 1980. The 1995 Dietary Guidelines added the comment that many individuals throughout the ages have drunk alcoholic beverages in moderation to enhance the enjoyment of meals. The Guidelines also note that there is some recent scientific evidence that for some individuals moderate alcohol consumption may reduce the risk of heart disease.

However, alcohol also has undisputed drug effects, which can be harmful under many circumstances. Some people, in particular, should not drink at all, as the Dietary Guidelines caution (see box). Alcohol carries with it the risk of dependency and excess consumption, which can cause serious health problems. Therefore, the Dietary Guidelines recommend only that those who do drink alcoholic beverages do so in moderation. They do not recommend that those who do not consume alcohol begin drinking.

What is Moderation?

Moderation for a man means no more than two standard drinks per day; for a woman, no more than one drink per day. The recommended amount is smaller for women than for men because women have less activity of an enzyme that helps metabolize alcohol in the body. These amounts may be less than many Americans think (see figure). If you drink alcoholic beverages, it’s also a good idea to drink them with meals, since food slows absorption of alcohol.

Who Should NOT Drink?

The Dietary Guidelines for Americans note that some people should not drink.

- Children and adolescents.
- Women who are pregnant or trying to conceive. Major birth defects, including fetal alcohol syndrome, have been attributed to heavy drinking by the mother while pregnant. While there is no conclusive evidence that an occasional drink is harmful during pregnancy, a safe level of alcohol intake during pregnancy has not been established. Unfortunately, reported rates of alcohol use during pregnancy have recently increased, especially for frequency of drinking.
- Individuals who cannot restrict their drinking to moderate levels.
- Individuals who plan to drive or take part in activities that require attention or skill. Most people retain some alcohol in the blood up to 2 or 3 hours after a single drink.
- Individuals using certain prescriptions or over-the-counter medications.

What’s Moderate Drinking?

<table>
<thead>
<tr>
<th>Women:</th>
<th>Men:</th>
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<tbody>
<tr>
<td>No more than 1 drink a day</td>
<td>No more than 2 drinks a day</td>
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Count as a drink...

- 12 ounces of regular beer
- 5 ounces of wine
- 1.5 ounces of 80-proof distilled spirits
How Many Americans Drink Alcohol?

USDA conducts national surveys of what Americans eat on a regular basis. The most recent of these is the Continuing Survey of Food Intakes by Individuals, conducted in 1994-96. Data from the 1994-95 CSFII are currently available. In 1994-95, 67 percent of adult Americans (21 and over) reported using alcohol in the past year. Beer was the most popular alcoholic beverage—50 percent of adults reported drinking beer sometime in the year, compared with 45 percent for wine and 44 percent for distilled spirits.

Different demographic groups vary in their use of alcohol. Women are less likely to drink alcohol than men. Alcohol use was also more common among higher-income individuals—this was especially true for wine and distilled spirits. Alcohol use was more common among whites compared with blacks. The amount of alcohol usually consumed by individuals is difficult to estimate, but data on trends in per capita consumption of alcohol are estimated by the U.S. Department of Health and Human Services’ Alcohol Epidemiologic Data System. These data show a steady decline in the amount of alcohol consumed per capita between 1980 and 1991. This was especially true for distilled spirits.

What’s the Bottom Line?

The Dietary Guidelines for Americans present information on the pros and cons of alcohol consumption.* While there may be some health benefits with moderate alcohol consumption, the Dietary Guidelines clearly emphasize that dependency and excess can cause serious health problems.

While moderate alcohol consumption may have some effects that reduce the risk of heart disease, there are other ways of achieving reduction in risk. There are many factors that reduce the risk of heart disease, including a healthy diet, moderate exercise, avoidance of smoking, and maintenance of a healthy weight. These behavior changes carry less potential for negative consequences. As one person put it, “people don’t get addicted to fruits and vegetables and don’t get into accidents after eating too many apples.” Thus, the correct interpretation of the Dietary Guideline on alcohol is, if you don’t drink, this guideline is not a reason to start; however, if you drink alcoholic beverages, do so in moderation, with meals, and when consumption does not put you or others at risk.

* For more information on the risks and benefits of moderate alcohol consumption, contact NIAAA Alcohol Alert on Moderate Drinking—http://www.nia.nih.gov/publications/aa16.htm

Based on remarks by Eileen Kennedy, D.Sc., R.D., Executive Director of USDA’s Center for Nutrition Policy and Promotion. Data on consumer usage of alcohol prepared by Joanne Guthrie, Ph.D., R.D. and Julia Dinkins, Ph.D.