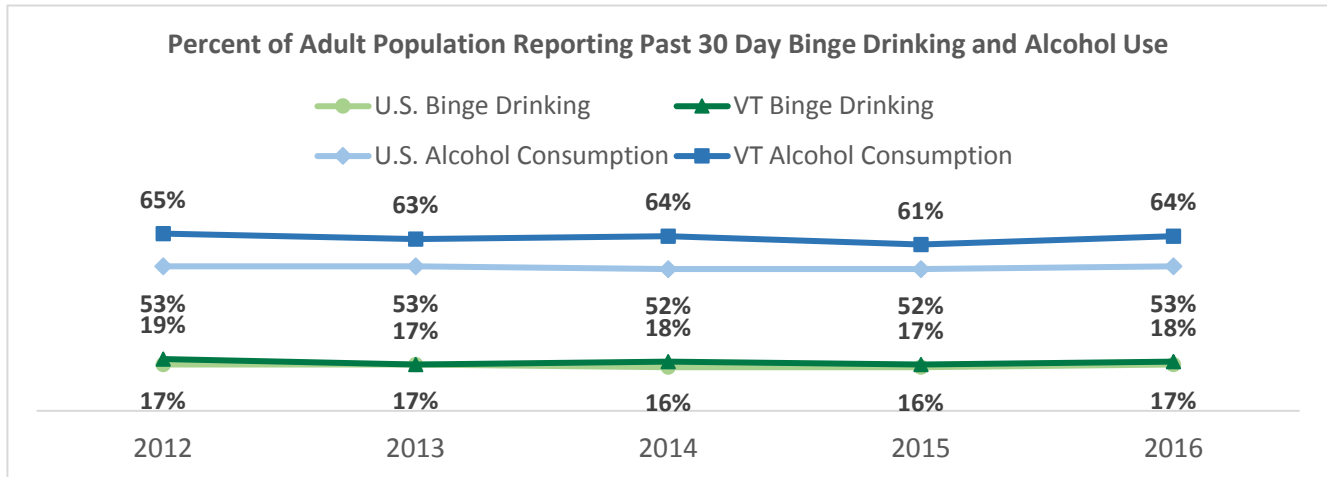


Alcohol-Attributable Deaths in Vermont

Data Brief

Alcohol Use and Treatment

The prevalence of alcohol consumption and binge drinking has remained constant in Vermont and the U.S. since 2012. Vermont's rate of consumption has consistently been significantly greater than that of the U.S. while the rate of binge drinking has been statistically similar to the national rate. Actual use may be higher than reported – research suggests that the amount of alcohol consumption estimated based on survey responses amounts to a fraction of actual state-reported alcohol sales.¹



Data Source: VT and U.S. Behavioral Risk Factor Surveillance System (BRFSS).

During this same period, there has been an 18 percent decline in the number of Vermonters receiving treatment for alcohol use disorder in the state-funded treatment system. In 2016, approximately 9 percent of Vermonters with alcohol use disorder sought treatment.²



Data Source: Vermont Substance Abuse Treatment and Information System (SATIS).

*2016 data is preliminary.

Burden of Alcohol Use

Alcohol consumption is associated with several chronic and acute health conditions. The Alcohol-Related Disease Impact (ARDI) application was developed by the Centers for Disease Control and Prevention (CDC) to approximate the negative health outcomes associated with alcohol consumption. This application estimates the number of deaths attributable to alcohol use from a variety of causes such as chronic medical conditions exacerbated by alcohol.

Alcohol-Attributable Deaths

Between 2012 and 2016 there were an average of 293 deaths attributable to alcohol consumption per year. The majority of these deaths were due to chronic conditions. This suggests that individuals who consume alcohol typically continue use long enough to develop alcohol-related chronic medical conditions. The most common chronic cause of death in the 5-year period from 2012 to 2016 was alcoholic liver disease with an average of 49 deaths per year, most of whom were men over the age of 50.

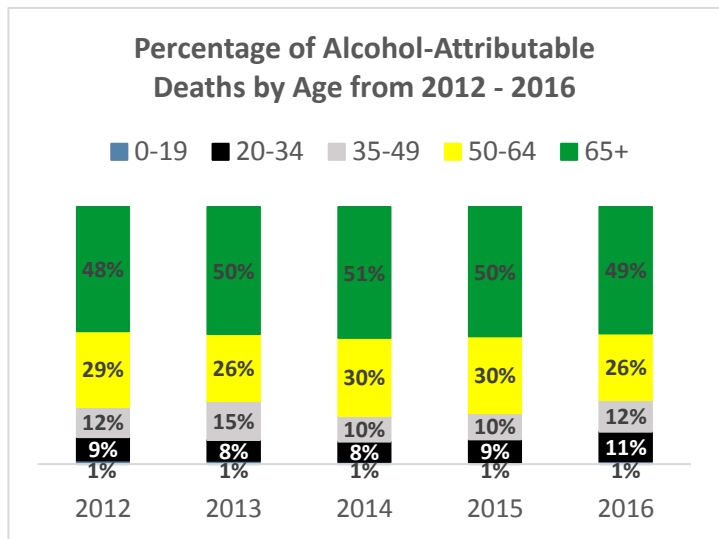
Negative health effects due to alcohol use can take a long time to manifest. Vermonters who were 65 years or older comprised the majority of alcohol-attributable deaths between 2012 and 2016.

Most individuals who died of conditions related to alcohol use were males. This difference has been roughly the same from 2012 to 2016, even as alcohol-attributable deaths increased. Of the 54 causes of death examined using the ARDI application, men had a higher rate of death for 22 of the causes (e.g. esophageal cancer, motor-vehicle traffic crashes, suicide); females were higher for only breast cancer, unspecified liver cirrhosis, supraventricular cardiac dysrhythmia, aspiration, and falls.

Although the rate of all alcohol-attributable deaths due to acute causes (e.g. falls, motor-vehicle traffic crashes, drowning) was lower than those due to chronic conditions from 2012 to 2016, alcohol-attributable deaths due to acute conditions increased by 33 percent compared to a 15 percent increase in deaths due to chronic conditions over this time frame. This is partially due to an increase in alcohol-attributable poisoning deaths which more than doubled between 2012 and 2016, from 15 to 33. Overall, poisoning deaths have increased 129 percent.

Conclusion

Alcohol use and its consequences have a substantial impact on the health of Vermonters. Although rates of consumption and binge drinking have remained constant, fewer Vermonters have been accessing treatment. This is likely due to several factors such as the current emphasis on treatment for opioid use disorder and lower public focus and perception of risk of alcohol consumption. Vermont has seen an increase in alcohol-attributable deaths, especially among males and individuals 65 years and older.



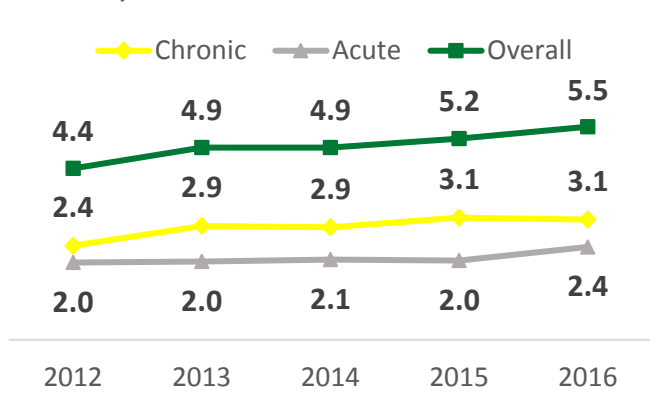
Source: CDC Alcohol-Related Disease Impact (ARDI).

Rate of Alcohol-Attributable Deaths Per 10,000 Vermonters 2012 - 2016

	Males	Females	Overall Rate	Total #
2012	5.7	3.1	4.4	275
2013	6.4	3.5	4.9	309
2014	6.3	3.6	4.9	309
2015	7.0	3.4	5.2	323
2016	7.0	3.9	5.5	342

Source: CDC Alcohol-Related Disease Impact (ARDI)

Rate of Alcohol-Attributable Deaths Per 10,000 Vermonters from 2012 - 2016



Source: CDC Alcohol-Related Disease Impact (ARDI).

For more information about this report, please contact Jeffrey Trites at Jeffrey.Trites@vermont.gov.

More information about the Alcohol-Related Disease Impact (ARDI) application can be found here:

https://nccd.cdc.gov/DPH_ARDI/Default/Default.aspx

¹ Nelson, D. E., Naimi, T. S., Brewer, R. D., & Roeber, J. (2010, September). US state alcohol sales compared to survey data, 1993-2006. <https://www.ncbi.nlm.nih.gov/pubmed/20626370>.

² 2016 National Survey on Drug Use and Health (NSDUH) and Substance Abuse Treatment and Information System (SATIS).