

Commentary on Editorial “Towards an evidence based alcohol policy”

Mahesh Rajasuriya

Editors' note:

We received a detailed response on the editorial of the previous issue “Towards an evidence based alcohol policy”. Instead of publishing it as a Letter to the Editor, which would have limited the length of the response, we decided to publish it as a commentary. We have also invited the author of the editorial to respond to the commentary. Correspondence on this topic is now closed.

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I read with interest the editorial titled ‘Towards an evidence based alcohol policy’ by Ranil Abeyasinghe (1) and wish to respond with the following observations:

Failure to give the source of important observations/ facts

At the outset, an attempt is made to build a case against ‘no-alcohol’ policies. In support of this, it is stated that there is such a policy in Pakistan, enacted in 1977 by the then president; and a current legislator has made an attempt to overturn this, with support of politicians and the media in Pakistan who blame the no-alcohol policy for the emergence of high heroin use in that country.

Similarly, another series of historical observations are cited about the Russian Revolution where Czar Nicholas II banned the manufacture and sale of vodka in Russia and how his alcohol supplies were ransacked during the Russian revolution.

There is also mention of an ‘economic downturn during the civil unrest in 2007-09’ in Sri Lanka.

None of these observations are verifiable due to the lack of relevant references. The only source cited in support of these arguments is a report that reveals the number of heroin users in Pakistan. This reference is further discussed.

Apparent erroneous interpretation of original sources

The only reference in the opening paragraph of the editorial, which is to a report on illicit drug trends in Pakistan is used to substantiate the argument that Pakistani youth are turning to substances such as heroin in the absence of alcohol (2). There is a claim that Pakistan ‘has an estimated population of 500,000 chronic heroin users, one of the highest heroin use rates per population in the world’ citing the report. However the original report highlights somewhat different issues, apparently failing to draw the conclusion reached in the editorial (2).

In contrast the report asserts that the number of opiate abusers has not increased in the previous six years, although the number of injectors has. An excerpt from the report states:

“A UNODC survey completed in 2000 estimated that there were 500,000 chronic heroin users in Pakistan. The 2006 National Assessment Report on Problem Drug Use in Pakistan estimates that there are 628,000 opiate users. Of these, around 482,000 (77%) are heroin users. Given the massive increase of opium and heroin production in Afghanistan, the relative stability in the numbers of the opiate abusing population over the past six years is a notable achievement. However, the number of injecting drug users (IDUs) in 2006 is estimated at 125,000, double the estimated figure for 2000. This is a cause for concern particularly in terms of the HIV/AIDS transmission risk”(2).

Citation of sub-optimal sources while neglecting widely-accepted well-respected sources

In support of an evidence based alcohol policy, seven sources have been cited as belonging to the ‘highest tier’ of evidence. Clearly, five of them are of lower quality as far as the well-respected ‘Oxford Centre for Evidence-based Medicine’ is concerned (3). One was a time-series analysis, another was a cross-sectional study, and the other was an essay in the form of a ‘debate’ (4, 5, 6).

Not citing well-known alcohol policy documents has deprived this editorial the opportunity to introduce its reader to sources such as the World Health Organisation (WHO)’s Global Status Report: Alcohol Policy and guidelines published by American Medical Association (AMA) on alcohol policy.

It is noteworthy that the former has concluded that ‘heavy drinkers have been shown to be affected by policy measures, including price, availability and alcohol regulation’ while the latter states that ‘it is the policy of the AMA to actively support and work for a total statutory prohibition of advertising of alcoholic beverages except for inside retail or wholesale outlets’ (7, 8).

Lack of scientific soundness in certain arguments

The primary argument in the editorial is that people seek more 'dangerous' substances when alcohol is banned. This argument is not supported by any evidence, observations or theory. The evidence cited has no reference to this argument. The related reported observation in Pakistan that the media and politicians blame the ban on alcohol for the emergence of high heroin use is not verifiable as references are not cited. The author appears to have concluded that heroin and other drugs are 'more dangerous' than alcohol. Alcohol and heroin could be compared on harmful health effects of the substance, impact on social life and financial implications etc. However it is not stated why heroin is deemed to be more dangerous.

Declaration of interest

None

Mahesh Rajasuriya Senior Lecturer, Department of Psychological Medicine, Faculty of Medicine, University of Colombo, Kynsey Road, Colombo 08, Sri Lanka
E mail: mahesh.rajasuriya@gmail.com

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