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The Secretary
Senate Community Affairs Committee
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Mr Humphery

Inquiry into Ready-to-Drink Alcohol Beverages

Thank you for the opportunity to provide a submission to the Inquiry into Ready-to-Drink Alcohol Beverages.

The National Health and Medical Research Council (NHMRC) is Australia's peak body for supporting health and medical research; for developing health advice for the Australian community, health professionals and governments; and for providing advice on ethical behaviour in health care and in the conduct of health and medical research.

Alcohol is the most commonly used recreational drug in Australia. People drink alcohol for a number of reasons, including the relaxing and socialising effects of small to moderate amounts. However, drinking alcohol can have harmful consequences, both in the short term after each drinking occasion and in the longer term from regular drinking. In addition to the potential harm to the drinker, alcohol consumption can cause substantial health and social costs to others — to families, bystanders and communities.

The 2001 NHMRC Australian alcohol guidelines: health risks and benefits (the current guidelines) were written to provide Australians with knowledge and understanding that would enable them to enjoy alcohol, if they choose to drink, while minimising harmful consequences. In the current guidelines, the NHMRC advises that people who drink regularly at high levels place themselves at increased risk of chronic ill health and premature death, and that an episode of heavy drinking places the drinker and others at risk of injury and death.

These guidelines are currently being reviewed by the NHMRC to reflect new evidence regarding health effects of alcohol. The approach in revising the guidelines, now titled the *Australian alcohol guidelines for low-risk drinking* (the draft guidelines), was to show the level of lifetime risk of injury and chronic-disease associated with drinking alcohol. This new approach has led to a proposed guideline for "low-risk drinking" that is lower than the levels recommended in the 2001 edition. The draft guidelines continue to advise that drinking at higher levels is associated with increased risks of alcohol-related accidents, injuries, disease and death.

The draft guidelines were released for public consultation between October and December 2007, and are currently being revised according to the submissions received. These draft guidelines provide an overarching guideline of two standard drinks or less for men and women in any one day for low-risk of both immediate and long term harm from drinking. This guideline also covers young people from 18-25 years of age. The draft guidelines also have a specific guideline for young people under 18 years of age stating that not drinking is the safest option. This proposed guideline is based on evidence about developmental damage, particularly to the brain, and long-term harm to young people as a result of alcohol.

The draft guidelines state that both young people under 18 years of age and young adults up to the age of 25 continue to be greater risk takers than older adults, but still have poorly developed decisions-making skills, which are reflected in the high levels of injuries sustained in these groups. Alcohol affects brain development in young people thus drinking, particularly "binge-drinking", at any time before brain development is complete (which is not until around 25 years of age) may adversely affect later brain function.

The draft guidelines state that young adults up to the age of 25 should be aware that they are at particular risk of harm from alcohol consumption due to a greater risk of accidents and injuries; a lower alcohol tolerance than older adults; and an increased risk of cognitive impairment and alcohol dependence in later life. Young adults are advised to drink within the low-risk guideline levels, and to take steps to minimise their risk of accidents and injury.

The NHMRC supports the dissemination of evidence-based advice regarding health risks associated with alcohol consumption and supports reduced alcohol consumption in younger people.

The NHMRC would be pleased to meet with the Committee to provide more detailed information or discuss other aspects of the effects of alcohol consumption. Please contact Mrs Cathy Clutton, Executive Director of the Health Evidence and Advice Branch, on 02 6217 9030 or by email at cathy.clutton@nhmrc.gov.au if you would like to follow up our submission.

Yours sincerely

Professor Warwick Anderson Chief Executive Officer

30 May 2008