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Signs of risky alcohol use often missed in Manitobans, U of M study finds

June 25, 2018 – Manitobans who drink alcohol to excess are much heavier users of the health-care system and have far more contact with social services and the justice system than those who don't over-imbibe, a new study by the Manitoba Centre for Health Policy (MCHP) at the University of Manitoba shows.

The unique U of M study is the first in the world to show that these contacts with government services increase well before a high-risk drinker is diagnosed with an alcohol use disorder.

For example, starting four years before diagnosis, there tends to be a gradual increase in a high-risk drinker's use of income assistance and social housing, as well as involvement with Child and Family Services. One year before diagnosis, there tends to be a "spike" in a person's justice-system charges for crimes such as impaired driving and family violence.

This groundbreaking evidence, the researchers say, suggests that the health, social service and justice systems are missing opportunities to spot the warning signs and intervene to treat Manitobans with alcohol-related illnesses.

"Our study is the first that's been able to look back in time and track individuals from five years before their diagnosis to as long as 20 years after," said the study's lead author, Dr. Nathan Nickel, assistant professor of community health sciences at the Max Rady College of Medicine in the U of M's Rady Faculty of Health Sciences.

"Our results show that our systems are doing too little, too late for people suffering from alcohol use disorders. From these individuals' heavy, ongoing use of health and social services over decades – which, of course, incurs substantial costs to these systems – to the tragic fact that many die within a year of their diagnosis, these are signs of a serious public health issue."

Manitoba Health commissioned the study, *Health and Social Outcomes Associated with High-Risk Alcohol Use*, from MCHP. Researchers conducted it by analyzing anonymous data from a 25-year period (1990-2015). They focused on the more than 53,000 Manitobans (64 per cent of them men, 36 per cent women) who were diagnosed with an alcohol use disorder during this period.

The findings reveal that people who are diagnosed with a physical disorder (such as liver damage) or a mental disorder (such as addiction) caused by high-risk alcohol use are younger on average and more likely to live in neighbourhoods with lower socioeconomic status than the general population.

Manitobans who are high-risk drinkers access more emergency care, are hospitalized at a higher rate and are prescribed more medications than Manitobans who are not.

Women who are high-risk drinkers are four times more likely to die before the age of 75 than lighter-drinking women. Men who are high-risk drinkers are three times more likely to die before reaching 75. And, in one of the

study's most alarming findings, which is a global first, individuals with an alcohol use disorder are at their highest risk of dying within a year of their diagnosis.

People with an alcohol use disorder are more likely to live in social housing and much more likely to receive income assistance than lighter drinkers. Women with these disorders are more likely to have their children taken into care of Child and Family Services. Manitobans with an alcohol use disorder – especially men – also have far more interactions with the justice system.

“These findings reveal the stark social outcomes associated with untreated alcohol addiction,” Nickel said. “Manitoba recently released a Mental Health and Addictions Strategy which recognizes that Manitobans with an alcohol use disorder need an all-of-government approach that can identify them and provide supports to them earlier. Our findings reinforce this call for coordinated, interdepartmental strategies and services.”

To conduct the study, Nickel's team used the Manitoba Population Research Data Repository, housed at MCHP, which is unique in Canada for the richness and range of its linkable data.

The repository contains anonymized data collected from the health-care, education, social service and justice systems every time a Manitoba resident comes into contact with these systems. Though the data is anonymous, numeric codes allow each individual to be tracked across sectors and over time. That's how researchers were able to find people with alcohol use disorders and trace their use of services.

Key policy recommendations by the researchers include:

- Planners from the health, social service and justice sectors should coordinate services to identify and help Manitobans with alcohol use disorders.
- Several prescription medications can help curb alcohol dependence. Nickel's team found that fewer than two per cent of those with an alcohol use mental disorder were provided one of these medications, and that low-income patients were far less likely to receive such a prescription than higher-income patients. Greater awareness of these drugs among health-care providers could help to reduce alcohol's harms.
- Screening for heavy drinking earlier is a first step toward reducing the harmful effects.
- Because the underlying causes of excessive drinking are complex and can include factors such as racism and trauma, a holistic approach to treatment and support is needed.

The full report is available online:

http://mchp-appserv.cpe.umanitoba.ca/reference//alcohol_Report_web.pdf

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