POLICY POSITION:
ALCOHOL AND CANCER RISK

SEPTEMBER 2024

World Cancer Research Fund International

ALCOHOL CAUSES CANCER

- Consuming alcoholic drinks increases the risk of seven types of cancer
- All types of alcoholic drinks increase cancer risk
- For cancer prevention, it is best not to consume alcohol

REDUCING CANCER RISK

To reduce health harms (as well as social and economic related harms) caused by alcohol, policymakers need to implement evidence-based policies to support reducing alcohol consumption at a population level and increase public awareness of the links between alcohol and cancer. These include:

1. **Fiscal and pricing policies to make alcohol less affordable and available**
   - Including increasing excise taxes and setting minimum unit pricing
2. **Restricting physical availability of alcoholic beverages**
3. **Mandatory health warning labels on alcoholic products**
4. **Restrict or ban promotion and sponsorship of alcoholic products and brands**
   - Including marketing and advertising across media types
5. **Update national guidance on alcohol and health**

Alcohol is a human carcinogen

There is strong evidence from the World Cancer Research Fund *Diet, Nutrition, Physical Activity and Cancer: a Global Perspective* report that alcohol consumption increases the risk of seven types of cancer, including common cancers like breast and colorectal.[1]

The toxicity and carcinogenic mechanisms of alcohol are well established. Since 1988, alcohol has been classed as a Group 1 carcinogen by the International Agency for Research on Cancer (IARC)[2]; this is the highest risk group, which also includes asbestos, tobacco, radiation and processed meats.

There is no safe level of alcoholic drink consumption for cancer risk

Consuming 'light' or 'moderate' amounts of alcohol is not safe, as there is no threshold at which the cancer risk of alcohol suddenly begins, or below which the risk of at least some cancers does not increase.[3] The notion that alcohol may protect against some cardiovascular diseases or type II diabetes[3] is superseded by the clear dose-response risk it poses: the more you drink alcohol, the higher your risk of cancer. Conversely, the less you drink, the lower your cancer risk. Therefore, despite the uncertainties about the effects of moderate alcohol consumption on non-cancer outcomes, drinking alcohol is not recommended for any health benefit[1]. The risk of cancer – and potentially other health conditions – far outweighs any potential existence of protective effects. It is crucial that everyone is better informed about the serious health risks, including cancer risks, associated with alcohol consumption.

Beyond cancer: additional risks alcohol poses to health and society

In addition to cancer, alcohol poses many other health risks as well as negative social and economic impacts. Alcohol is a psychoactive, toxic, and dependence-producing substance that is causally linked to over 200 health conditions.[4] Health risks beyond cancer includes alcohol dependency syndrome, liver disease, hypertensive heart disease, haemorrhagic stroke, pancreatitis, traffic- and violence-related injury (including violence against women and girls, and children), and suicide – among others.

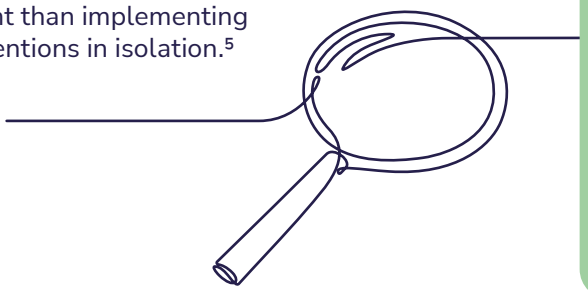
Any level of alcohol consumption is usually associated with a detrimental impact on population health and is a significantly important public health issue.[4] Factors that influence drinking patterns can include personal characteristics, such as genetics, demographics, and socioeconomic status, and environmental factors, such as social norms that shape drinking behaviours, availability and affordability of alcohol, or alcohol policies in place.[5]

These health risks are indicative of the risks alcohol also poses to society, particularly related to intentional or unintentional harm, crime and violence. The links between alcohol and economic harms can range from damage to property and negatively impacting family budgets,[6] to broader social impacts such as high costs to health care budgets and (particularly for adolescents) lower performance at school, being less likely to complete higher education, and therefore is cumulatively negatively affecting economic growth, social welfare, and worsening inequities.

Recommended policy actions

Implementing evidence-based alcohol control policies is an effective strategy to reduce alcohol consumption, decrease the negative health, social and economic impacts of alcohol, and increase public awareness of its harms. Despite their effectiveness, many countries are still reporting no progress on implementing alcohol control policies, signalling the urgent need for action.[4]

For governments, reducing alcohol consumption is an excellent investment.[7] We recommend that all countries develop, implement, and/or strengthen their alcohol policies, strategies or action plans to support population-level reduction of alcohol consumption. These policies can be implemented as a set of interventions, or ideally comprise national or subnational alcohol strategies or guidelines. All of our recommended policies are effective, and include WHO 'best buy' alcohol policies and SAFER initiative alcohol control interventions.[4,7] Combining the recommended policies into coherent policy packages will offer higher results and return on investment than implementing single interventions in isolation.[5]



World Cancer Research Fund International recommends the following policy actions to reduce alcohol consumption:

1. Fiscal and pricing policies to make alcoholic beverages less affordable and available

Reducing alcohol affordability will help reduce alcohol sales, and resultant harms. The affordability of alcohol can be reduced by introducing fiscal and pricing policies such as increasing excise taxes on alcohol and introducing minimum unit pricing (MUP) for alcoholic products, as well as reducing subsidies to alcohol production. Taxation and pricing policies are the most effective and cost-effective measures that policymakers can use to address alcohol harms,[7] but they remain underutilized by many countries.[8]

Fiscal and pricing policies have also been shown to be effective in reducing health inequities, as they are protective of groups which experience the greatest alcohol-related harms, particularly those of low socioeconomic status.[9]

Increasing Excise Taxes

Increasing alcohol excise taxes is a proven measure to reduce alcohol consumption.[10] Taxes should be reviewed regularly to compensate for inflation so that overall affordability of alcoholic beverages decreases. Governments should allocate tax revenues to fund health promotion campaigns, community programmes and health services to partly offset the harm derived from alcohol consumption.

Minimum Unit Pricing

To ensure that increased taxes are also matched with increased prices, a legal minimum price should be set per gram of alcohol, often called a minimum unit price (MUP). Like excise taxes, MUP should also be indexed to match inflation to avoid erosion of the base-price over time. These actions prevent alcohol products from becoming cheap and more easily affordable. This is an effective strategy to protect teenagers and young adults from accessing cheap alcohol[11], and for reducing alcohol intake for heavy consumers of cheap alcohol.[8] Where implemented, MUP has been shown to reduce alcohol purchased by low-income households, as well as households that purchase the largest amount of alcohol.[12]

2. Restricting physical availability and accessibility of alcoholic beverages

Strengthening restrictions on the sale and availability of alcohol reduces its accessibility.[13] Policy measures include setting a legal minimum age for drinking or purchasing alcoholic beverages; restricting hours or days of sale; prohibiting promotions or sales on alcohol; separating alcoholic beverages from other products (eg, alcohol is kept separate from food and other products); setting standards for being stored in its own containers or section, with visibility restrictions in place; regulating the density and zoning of alcohol retail outlets (including bars, restaurants, off-sale, grocery, and speciality shops); and regulating home-delivery (third party) responsibilities.

Alcohol retail monopolies are an effective way to decrease the availability and accessibility of alcohol.[14] Governments, ideally through health ministries, can regulate the physical availability of alcohol through an exclusive rights system for the retail sale of alcoholic products through state-owned and/or managed companies. This system facilitates enforcement of the legal age limit and enables restrictions on the number of sales points and hours of sale, while containing and regulating price competition, marketing and promotions effectively. It also removes profit maximisation interests from alcohol retail. Introduction or maintenance of alcohol retail monopolies has been shown to reduce and prevent harms from alcohol.[13]

3. Mandatory health warning labels on alcoholic products

Consumers have a right to know about any products' health risks and harms, including those associated with alcoholic beverages. Despite being a Group 1 carcinogen, alcohol is currently exempt from any mandatory warning labels. This is of great concern given how few people are aware of the links between alcohol and cancer, and other health harms.[16]

Introducing highly visible, clear health warning labels would provide consumers with knowledge about the risks involved with consuming alcoholic drinks and can reduce alcohol sales.[17] Health warning labels should be plain and distinct from any marketing imagery, text and colours present on product labels. Clear, specific, and strong messaging of the health risks and impacts of consuming alcohol products should be present, and avoid using vague, strategically ambiguous messages[18,19] (eg, 'consume in moderation'; see below). Health warnings should also be paired with supportive information (eg, cessation or treatment support) for consumers.

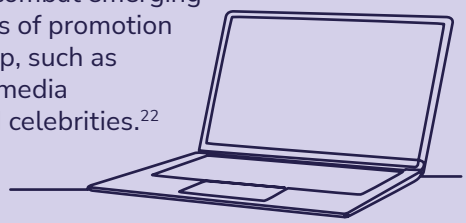
Labels with ingredient and nutrition information should also be made mandatory. In line with other food and beverage products sold, this would inform the public about an alcoholic product's composition, ingredients, and energy value. Labels that include both a health warning, as well as ingredient and nutritional information would inform consumers of the health risks, consequences, and nutritional components of alcoholic products at the point of purchase and/or prior to consumption, and help to protect them from misleading health and nutritional claims. Learnings from plain-packaging and health warning labels on tobacco products should be applied in developing the most effective alcohol labelling policies for each national context.[20]

The use of QR codes to link to health information should be prohibited. Rather than inform consumers about the risks associated with alcohol, they provide marketing opportunities for alcohol producers by redirecting consumers to their websites.

4. Restrict or ban promotion and sponsorship of alcoholic products and brands, including marketing and advertising

Marketing – especially the advertising, sponsorship and promotion – of alcohol products and brands should be either banned or comprehensively restricted across all forms of media, including traditional, digital and social platforms.[21] It is necessary to protect those most vulnerable to alcohol harms (including children, adolescents, people trying to overcome or living in recovery from alcohol use disorder and addiction, and low socioeconomic status groups) from exposure to alcohol marketing. This decreases the likelihood of starting drinking or consuming alcohol in larger quantities, developing or relapsing into alcohol use disorder and addiction, as well as reduces the normalisation of consuming alcohol.

Restrictions on alcohol marketing should also be implemented and enforced in educational buildings, workplaces, health facilities, outdoor public spaces, and at sporting and cultural events. This includes advertising, promotion and sponsorship by alcohol brands. Governments should also update their regulations to combat emerging and novel forms of promotion and sponsorship, such as through social media influencers and celebrities.[22]



5. Update national guidance on alcohol and health

National or subnational guidance on alcohol and health should reflect the latest evidence on cancer risk. Guidance should reflect that no amount or kind of alcohol is safe for health, and for cancer prevention it is best not to drink alcohol. Updated guidance (and any related reports) should target both decision-makers and the public to inform them on the risks of drinking alcohol, and the negative health, social and economic impacts of alcohol.[23]

Updates to guidance can provide opportunities for health promotion campaigns to better inform the public about the risks of drinking alcohol and offer suggestions on how to drink less. Government guidance would also support health care professionals in providing counselling to their patients, and increase awareness on the importance of screening and brief interventions in health care settings to reduce alcohol harm.[24]

Other important aspects to consider in developing and implementing alcohol-control policies and strategy:

Language

We strongly urge governments and alcohol policy advocates to discontinue use of phrases such as 'harmful use of alcohol', 'responsible drinking' and 'moderate drinking'. Evidence shows that there is no safe level of alcohol consumption for cancer prevention, and therefore there is **no such thing as harmless use of alcohol**. Language and messages about alcohol should convey scientific evidence that no level of alcohol consumption is safe for health. Messages should be that 'drinking less alcohol is better, and that none is best'. The term 'alcohol use' could be used as a neutral description for consuming alcohol products.

Expressions like 'responsible drinking' deflects attention away from alcohol producers and marketers, often to reduce the threat of regulation[18], and **places responsibility for alcohol consumption and its impacts onto individuals.** These phrases are strategically ambiguous: designed to generate different interpretations by varied audiences, with differing perceptions likely translating into positive perceptions of corporate social responsibility.[19] Governments should avoid using these phrases as part of their public health messaging, as they have been denounced as a method to placate public health bodies by alcohol industry without impacting alcohol sales.[25]

As there is no evidence to suggest a minimum-threshold beyond which alcohol consumption causes carcinogenic effects, no safe, 'moderate' or 'responsible' level of alcohol consumption for cancers and health can be established.[3] Instead of 'responsible drinking' messaging, governments should employ tools such as health warning labels, health information campaigns, and improve screening, brief intervention, and referral programmes (especially for heavy episodic drinking),[24] in combination with the high-impact above recommended policy actions to objectively inform alcohol consumers about the cancer and health risks associated with alcohol consumption.

Conflicts of interest: alcohol industry and the commercial determinants of health

Alcohol is a health-harming product. The alcohol industry has engaged in many practices to misinform, misrepresent and dissuade consumers of the health and cancer risks of consuming alcohol[26] – employing strategies similar to those used by the tobacco industry.

Alcohol industry also regularly employs a range of political, legal, and economic tactics to avoid or circumvent regulation, including obstruction through participation, coalition-building and mobilizing proxies, and extensive lobbying.[27]

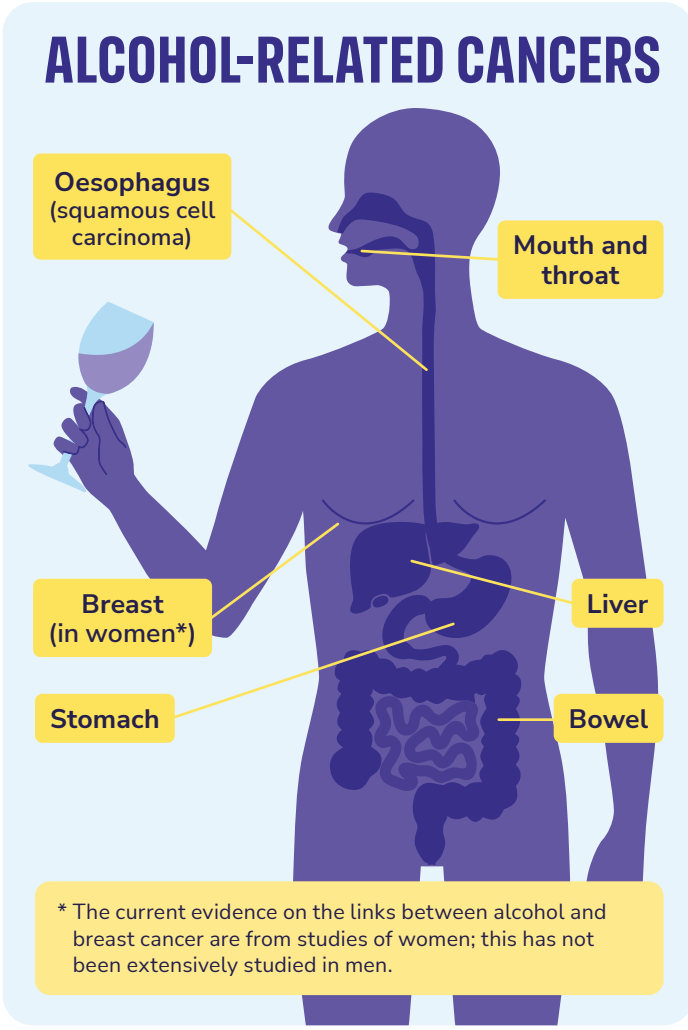
The alcohol industry's involvement in developing alcohol policy and disseminating health information is a clear conflict of interest. Governments must acknowledge this and prohibit alcohol industry involvement in these areas. Alcohol industry interference also has been clearly shown to increase in countries working towards implementing alcohol control policies.[4] Governments should plan for and prepare responses to increased industry interference as they develop their policy implementation strategies.

No and low alcohol products

The evidence as to whether no and low alcohol (NoLo) products help reduce alcohol consumption or encourage it is currently unclear. Some evidence suggests that consumers may use NoLo products as a substitution for alcoholic ones or take a hybrid approach (eg, consuming both alcoholic and NoLo products), reducing overall alcohol consumption.[28] However, NoLo products are also being used by consumers in addition to alcoholic ones, particularly by people with alcohol use disorder or heavy consumption patterns.[29] The availability of NoLos can also serve to drive consumer choice and consumption, normalising alcohol consumption and potentially serving as gateway products.[30]

Alibi and addition marketing practices are being used by the alcohol industry to encourage consumers to drink NoLos in addition to their usual alcohol consumption (usually in unexpected times and locations, such as workplaces or gyms)[28], and uses branding that is similar to NoLo parent companies' alcohol-containing products. These methods could potentially be used to thwart existing regulations on alcohol marketing, potentially mislead consumers,[30] and increase alcohol harms.

As a growing market, it is important to monitor the health and social impacts of NoLo products and whether they contribute to reducing alcohol-related harms. Definitions of NoLo products require harmonization to help differentiate between products that qualify as 'no alcohol', 'alcohol free', and 'low alcohol' products on an alcohol by volume (ABV) basis. This harmonization will assist with labelling, marketing and trade regulations, and enable clear communication to the public. Marketing should be reviewed and potentially restricted, with consideration for branding as well as ABV content, and the potential to mislead minors, pregnant women or abstainers.[30]



Acknowledgements

This brief was written by Kendra Chow, RD; with support from Kate Oldridge-Turner, Dr Giota Mitrou, Dr Helen Croker, and Prof Elio Riboli. We kindly thank Prof Annie Anderson (University of Dundee), Maik Dünnbier (Movendi International), Maisha Hutton (Healthy Caribbean Coalition), Prof Knut-Inge Klepp (Norwegian Institute of Public Health), Dr Catherine Paradis (WHO European Region), Dag Rekve (WHO), and Dr Juan Tello (WHO) for their review.

About us

World Cancer Research Fund International is a leading authority on the links between diet, nutrition, weight and physical activity and cancer. We are an international not-for-profit association that leads and unifies a network of cancer prevention charities, including the **American Institute for Cancer Research** (AICR), **World Cancer Research Fund** in the UK and **Wereld Kanker Onderzoek Fonds** in the Netherlands. World Cancer Research Fund International is in official relations with the World Health Organization (WHO).

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