



Public consultation: draft *Australian guidelines to reduce health risks from drinking alcohol*

Personal details

Full name NSW Ministry of Health

[NHMRC has removed personal information]

Submission reflects

Organisation / Individual An organisation

Organisation Name NSW Ministry of Health

Please identify the best term to describe the Organisation Government department or agency – State or territory

Questions

1. Please indicate which format you read the guideline in.
No comment
2. The draft guidelines are presented in a new IT platform, MAGICapp. Please indicate how strongly you agree with the following statement: *The draft Australian Guidelines to Reduce Health Risks from Drinking Alcohol are easy to navigate in MAGICapp.*
No comment
3. Please indicate how strongly you agree with the following statement: *The Plain English summary is clear, simple and easy to understand.*
Agree
4. Do you have any comments on how the *Plain English summary* could be improved?
Page 1. Plain English Summary Comment:
NSW Health considers that it would be useful to have the main messages from these plain English guidelines visually described using images such as infographics. This would then sit well next to the standard drinks graphics (p72). The benefit of NHMRC developing these visual elements is that they could be freely available by download and could be used by organisations across Australia to provide consistent messaging to the public. The images could be hyperlinked to the more detailed descriptions and evidence. For an example see UK alcohol unit guidance on www.drinkaware.co.uk for their Chief Medical Officer’s Low risk drinking guidelines.
Page 1 – Plain English Summary
NSW Health suggests considering a fourth paragraph to the introduction section describing risk: “Risk refers to a probability (or chance) that an outcome may occur (it is not certain that it will occur). For example, if you toss a coin there is one chance in two that the coin will land heads up. An average person’s risk of experiencing an

adverse health outcome due to drinking alcohol is the probability (or chance) that the person will develop that outcome in a specified time period (e.g. across a lifetime).”

Page 3 – Guideline Three, second paragraph

Guideline text: “It also indicates that alcohol exposure throughout pregnancy (including before pregnancy is confirmed) can have consequences for the developing fetus.”

Comment

Given that the impacts of FASD can be lifelong, NSW Health suggests that this sentence is strengthened. For example: “It also indicates that alcohol exposure throughout pregnancy (including before pregnancy is confirmed) can have consequences for the developing fetus, including potential lifelong physical, cognitive and behavioural impairment.”

OR that the summary specifically mentions FASD. This text from page 15 could be included: “Drinking alcohol while pregnant increases the risk of a range of birth defects and growth, brain development from 0-3 years, and developmental problems, comprising Fetal Alcohol Spectrum Disorder, the effects of which may persist into adulthood.”

Page 3 – Guideline Three, third paragraph

Guideline text: “However, while the risk of harm to the fetus is likely to be slight when the mother drinks small amounts of alcohol (less than 1 standard drink per day), there is not enough evidence to know for sure whether the fetus will be safe from harm, even at this low amount of alcohol”.

Comment

NSW Health recognises that this links to the evidence further on in the guidelines, however it sends a message that it is acceptable to drink daily as long as it is less than 1 standard drink. This is contrary to the message that no amount of alcohol is safe. NSW Health recommends removing the information in the brackets (“less than 1 standard drink per day”).

Page 3 – Guideline Three, fifth paragraph

Guideline text: “When a breastfeeding woman drinks alcohol, the alcohol passes into the breastmilk and may affect the baby’s sleep and ability to feed.”

Comment

The following limitation stated on page 56 is noted: “There is a lack of good quality evidence on the effect of maternal alcohol consumption while breastfeeding on babies’ breastfeeding, interaction and behaviour, and all areas of development. There is, however, considerable evidence regarding the effect of alcohol in breast milk on infant sleep”.

However, only mentioning impact on baby's sleep and ability to feed may not provide the reader with sufficient information about the potential harm of alcohol exposure to the developing infant's brain. It is noted that the review by Giglia and Binns (2006) reported that drinking two standard drinks of alcohol or more per day whilst breastfeeding was associated with deficits in infant psychomotor development (p. 56).

NSW Health suggests that the Plain English summary (and the latter sections on breastfeeding) include information about the significant period of brain development from 0-3 years and the potentially harmful effects of alcohol exposure during this period.

5. Do you have any comments on how the *Introduction* could be improved?

Page 4 - Introduction, second paragraph

Guideline Text: “Alcohol consumption is linked with increased risk of injury, chronic disease and premature death.”

Comment

NSW Health suggests consider editing to include impact on fetus: “Alcohol consumption is linked with increased risk of injury, chronic disease, risk of harm to a fetus during pregnancy and premature death.”

Page 4 - Introduction, second paragraph

Guideline text: “Moreover, excessive intake of alcohol not only affects the drinker’s health but can have effects on other members of the community (Callinan and Livingston 2019).”

Comment

NSW Health suggests consider editing to: “Moreover, excessive intake of alcohol not only affects the drinker’s health but can have effects on other family members, loved ones and members of the community (Callinan and Livingston 2019).”

Page 4 - following paragraph 2, and before ‘Aim’:

Comment

To reiterate the key messages about risks from drinking alcohol, NSW Health suggests considering to include a table with the three guidelines, and possibly the infographics as suggested above. To introduce the table the following sentence could be considered “To reduce your health harms from drinking alcohol, there are three guidelines.”

6. Do you have any comments on how the *Background* could be improved?

Page 8 - Burden of disease

General comment

The use of informing statements as headings may make more engaging reading, for example consider changing ‘Burden of disease’ to ‘Alcohol causes a burden of disease in Australia’. This could be applied across the whole document.

Page 11 - Pregnant and breastfeeding women, third paragraph

Guideline text: ‘Pregnant and breastfeeding women’: third paragraph: “A similar trend for breastfeeding women was seen, with 41.9% of breastfeeding women abstaining from alcohol in 2016, compared with 25.0% in 2007 (Australian Institute of Health and Welfare 2017).”

Comment

NSW Health suggests this information from later in the Guidelines be included after the text above: “Available studies have indicated that many women who abstain from alcohol during pregnancy resume drinking alcohol after giving birth (Tay et al 2017; Tearne et al 2017), with most drinking alcohol at low levels and infrequently (Giglia 2010).”

Page 13 – Immediate and cumulative effects of alcohol – first sentence

Guideline text: “At the individual level, the effects of alcohol consumption include:”

Comment

NSW Health suggests adding an additional bullet point:

- Increased risk of physical, cognitive and behavioural impairments for the developing fetus.

Page 14 – Cumulative effects, final dot point

Guideline text: “Diabetes: The Evidence Evaluation Report reported a decreased risk of type 2 diabetes with alcohol consumption at levels less than six standard drinks per day but the risk increases at higher levels, compared with current and lifetime abstainers (The University of Sydney 2018).”

Comment

NSW Health recommends this be reframed to: “there is an increased risk of type 2 diabetes with alcohol consumption of more than 5 standard drinks per day’

Page 15 – Cumulative effects (cont.) third dot point on page 15

Guideline text: “Risks to babies during pregnancy and after birth: Alcohol crosses the placenta and readily enters the bloodstream of the fetus. Drinking alcohol while pregnant increases the risk of a range of birth defects and growth and developmental problems, comprising Fetal Alcohol Spectrum Disorder, the effects of which may persist into adulthood. Alcohol also enters the breast milk, and can interfere with breastfeeding and infant behaviour.”

Comment

NSW Health suggests the NHMRC considers including in the text information about the significant period of brain development from 0-3 years and the potentially harmful effects of alcohol exposure during this period.

Suggested amendment:

“Risks to babies during pregnancy and after birth: Alcohol crosses the placenta and readily enters the bloodstream of the fetus. Drinking alcohol while pregnant increases the risk of a range of birth defects and growth, brain development from 0-3 years and developmental problems, comprising Fetal Alcohol Spectrum

Disorder, the effects of which may persist into adulthood. Alcohol also enters the breast milk, and can interfere with breastfeeding and infant behaviour.”

7. Please indicate how strongly you agree with the following statement: *The Understanding risk section is clear, simple and easy to understand.*

Agree

8. Do you have any comments on how the *Understanding risk* section could be improved?

Page 18 – ‘Where do the estimates of risk of drinking alcohol come from?’ first paragraph, second sentence
Guideline text: “These reviews help determine the probability (or chance) than an average person will develop a disease or injury over a certain period of time (e.g over their lifetime) if they drink a given level of alcohol compared with drinking at a different level”

Comment

This sentence is unclear in its meaning, NSW Health suggests breaking it up, or amending to “These reviews help determine the probability (or chance) than an average person will develop a disease if they or injury over a certain period of time (e.g. over their lifetime) if they were to regularly drink alcohol above the recommended limit”
It may also be worth distinguishing between the risk of developing a disease versus the risk of injury- as injury can occur from a single occasion of ‘risky’ drinking.

Page 19 – Understanding risk

Comment

NSW Health suggests the section would benefit from a brief description on how the human brain assesses risk and also note in this section that the effects of alcohol impact on risk assessment and decision-making functions at any age (with hyperlink to the relevant section/s). The evidence about short term and long term risk is clearly outlined in the Guidelines, however decision-making, or making informed choices, about total standard drinks to be consumed on any occasion of drinking is challenging.

NSW Health suggests including a ‘Practical Info’ box for Guideline One such as Guideline Two’s – 6.7 Practical Info 2 (page 46). Such information could include new evidence, activities that require attention, concentration or psychomotor skills and considerations for special population groups.

9. Do you have any comments on how the evidence has been used to develop the recommendation for Guideline One?

No comment

10. Is there any evidence relevant for this guideline that has been missed? If so, please provide the citation(s).

No comment

11. Do you have any editorial or readability comments on the sections that make up Guideline One?

Page 20 – Guideline One – ‘blue text box’

Guideline text: “To reduce the risk of harm from alcohol-related disease or injury for healthy men and women, drink no more than 10 standard drinks per week and no more than 4 standard drinks on any one day.”

Comment

For monitoring purposes, NSW Health suggests that Guideline One includes guidance on a suitable timeframe for measuring consumption. For example, NSW Health suggests that the “drink no more than 10 standard drinks per week” measure is based on usual consumption and the “no more than 4 standard drinks on any one day” measure is based on consumption in the past 4 weeks. This will help to ensure a consistent approach between surveys.

Page 20 – Guideline One

Comment

Guideline One is not very easy to understand as currently written – “To reduce the risk of harm from alcohol related disease or injury for health men and women, drink no more than 10 standard drinks per week and no more than 4 standard drinks on any day. The less you choose to drink, the lower the risk of alcohol-related harm. For some people not drinking at all is the safest option.”

NSW Health suggests considering revising Guideline One to on actions that women and men can do: “Both men and women can reduce their risk of harm from alcohol-related disease or injury. Drink no more than 10 standard

drinks per week and no more than 4 standard drinks on any one day. The less you choose to drink, the lower your risk of alcohol-related harm. For some people not drinking at all is the safest option.”

General Comment

NSW Health (Cancer Institute) notes it is heartening to see the increased evidence of the link between alcohol consumption and a range of cancers described in the Guidelines. The Cancer Institute NSW Healthy Lifestyle Roadmap has prioritised increasing health literacy about this evidence as it is not well known by the public. The draft Guidelines, once finalised, will assist the Cancer Institute in this work.

The Cancer Institute is supportive of the change to Guideline 1. The change from a “daily limit” to advice to drink no more than 10 standard drinks a week to reduce long term risk of harm is likely to make sense to the average Australian that drinks the average three occasions a week or more. The Cancer Institute also supports the advice that “For some people not drinking at all is the safest option”, while acknowledging there is no known safe level of alcohol consumption with regards to risk of cancer.

Page 23 - ‘Key Info Benefits and harms’ text box

Comment

Guideline text: “Drinking alcohol within this guideline has substantial net benefits, as opposed to drinking above it”. NSW Health considers this statement may be interpreted as suggesting that drinking alcohol is beneficial. Consider rewording the text “Drinking alcohol within this Guideline reduces your risk of alcohol-related harm as opposed to drinking above it.”

Page 29 – 5.4 ‘Where the evidence has changed’

Comment

NSW Health considers this section is important and challenges current popular beliefs. NSW Health suggests this information could be emphasized by including in the blue text box section of Guideline One on page 20.

12. Do you have any comments on how the evidence has been used to develop the recommendation for Guideline Two?

NSW Health welcomes the clarity and strength of Guideline Two. NSW Health also notes the increased evidence of the harmful effect alcohol can have on brain development (p.45).

The strengthened guideline provides greater clarity for parents and guardians of young people under 18 in talking with their child about the short and long term risks associated with drinking alcohol. There is useful information for parents (and young people) on brain development (noted above) and cognition, and other related harms such as risky sex, mental health and self-harm.

13. Is there any evidence relevant for this guideline that has been missed? If so, please provide the citation(s).

No comment

14. Do you have any editorial or readability comments on the sections that make up Guideline Two?

Page 40 – 6.2 Key Info – Benefits and harms – first paragraph

Guideline text: “There are substantial net benefits for children and young people under 18 years of age to not drink alcohol as advised by this Guideline, as opposed to drinking above this level.”

NSW Health considers the word “net” could be better expressed as “overall” or “developmental, health and wellbeing”.

15. Do you have any comments on how the evidence has been used to develop the recommendation for Guideline Three?

Page 50 - ‘7.3 Pregnancy’

Second paragraph of topic: “Alcohol is a teratogen (an agent that causes abnormalities) that crosses the placenta resulting in the fetus being exposed to the same, or higher, alcohol concentration as the mother”.

Comment

NSW Health suggests this statement should be supported by a reference.

Page 51 - ‘7.3 Pregnancy’

Guideline text: “A pregnant woman’s partner’s drinking has also been shown to impact on the pregnant woman’s alcohol consumption (McBride and Johnson 2016).”

Comment

NSW Health considers this point could be expanded, for example offering practical information and suggesting women discussing lifestyle changes during pregnancy with their partners.

16. Is there any evidence relevant for this guideline that has been missed? If so, please provide the citation(s).

No comment

17. Do you have any editorial or readability comments on the sections that make up Guideline Three?

Page 47 – ‘Guideline Three Key Messages’ - final dot point

Guideline text: “Avoiding drinking alcohol during pregnancy prevents risk of harm to the developing fetus.”

Comment

NSW Health suggested edit: “Avoiding drinking alcohol during pregnancy and when planning pregnancy prevents risk of harm to the developing fetus.”

Page 48 – ‘7.1 Rationale - fourth paragraph

Guideline text: “A similar trend for breastfeeding women was seen, with 41.9% of breastfeeding women abstaining from alcohol in 2016, compared with 25.0% in 2007 (Australian Institute of Health and Welfare 2017).”

Comment

NSW Health suggests that this information from later in the Guidelines is included after the text above: Available studies have indicated that many women who abstain from alcohol during pregnancy resume drinking alcohol after giving birth (Tay et al 2017; Tearne et al 2017), with most drinking alcohol at low levels and infrequently (Giglia 2010).

Page 51 - ‘7.3 Pregnancy’ – paragraph 4 (top of page 51)

Guideline text: “While the risk of harm to the fetus from low levels of alcohol (e.g. less than 1 standard drink per day) is likely to be low, there is not enough evidence to accurately estimate the level of risk from small amounts of alcohol.”

Comment

Having the statement “e.g. less than 1 standard drink per day” confuses the message that no alcohol use is safe.

Suggest removing any reference to amounts to avoid implicit permission.

“While the risk of harm to the fetus from low levels of alcohol is likely to be low, there is not enough evidence to accurately estimate the level of risk from small amounts of alcohol. Not drinking alcohol is safest for their baby.”

Page 58 - ‘B. Breastfeeding’

Guideline text: Dot points following “Breastfeeding mothers should be advised that:” Comment

NSW Health suggests that the third and last dot points are ordered together, for example:

If a woman chooses to drink alcohol while breastfeeding, it is recommended that she:

plans ahead - this can allow her to express milk prior to drinking alcohol so that she has some alcohol-free milk to give the baby after drinking.

seeks professional advice to prevent the baby being exposed to alcohol.

Guideline text: Table 5. Time taken for alcohol to clear from breast milk (hours: minutes)

Comment

NSW Health suggests that the title of the table is changed to: Estimated time taken for alcohol to clear from breast milk (hours: minutes)

18. Do you have any comments on how the *Drinking frequency* section could be improved?

No comment

19. Do you have any comments on how the *Administrative report* could be improved?

No comment

20. Are there any additional terms that should be added to the *glossary*?

No comment

21. Are there any additional abbreviations or acronyms that should be added to this section?

No comment

22. Do you have any comments on how the *Australian standard drinks* section could be improved?

NSW Health considers that it would be useful to provide an infographic or other images to illustrate Guideline 1 visually to sit alongside each of the standard drink images (beer, wine, and spirits). This would assist with providing consistent advice to the public across jurisdictions.

Disclaimer I have read the security warning/disclaimer below and accept the risks and conditions outlined.

Permission to publish yes