

The use of alcohol can have significant health and social costs. Public Health England estimate alcohol misuse costs approximately £21 billion a year in crime, lost productivity and NHS costs. There are many long-term health risks associated with alcohol misuse such as high blood pressure, some cancers, strokes and depression, in addition to this it is a known factor in increased domestic abuse, homelessness and financial problems. It is the responsibility of Local Government Public Health Teams to “improve the take up of, and outcomes from, its drug and alcohol services”. Reducing alcohol-related harm has been outlined in the NHS Long-Term Plan where the comment is that “Action by the NHS is a complement to, but cannot be a substitute for, the important role of local government”. Only by these organisations working closely together in the funding and commissioning of services will this help to negate the impact of alcohol.

Why is this important?



Alcohol consumption can blight individuals and communities. There are significant financial and social costs to alcohol misuse.

What is the local context?



Rates of alcohol admissions and levels of adults in structured alcohol treatment are significantly above the national and regional average.

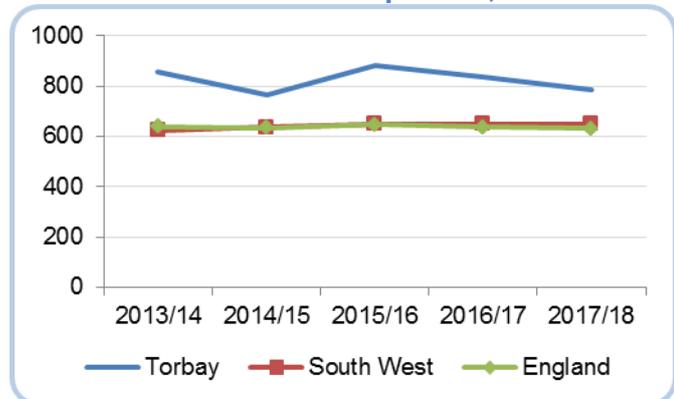
What should we do?



Commission alcohol services that help those drinking excessively and people affected by that behaviour.

Over the previous five years Torbay has been significantly above national & regional averages in the number of admissions for alcohol-related conditions (Fig 1). This measure looks for admissions where the primary diagnosis is an alcohol-attributable code or there is a relevant cause code. It will then attribute a fraction of that admission to alcohol. Neoplasms (Cancer) account for 24% of this measure in relation to Torbay followed by Diseases of the digestive system (14%) and Accidents (13%). There is also a significant relationship to deprivation.

Fig 1: Rate of admission episodes for alcohol-related conditions per 100,000

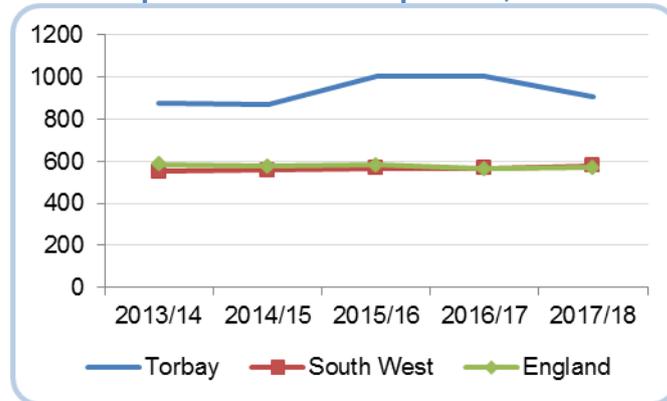


Source: Public Health Outcomes Framework (PHOF) – Narrow definition (Age Standardised)

There is also a measure which deals with alcohol specific conditions such as alcoholic liver disease where the admission code is wholly attributable to alcohol (Fig 2). On this measure Torbay has

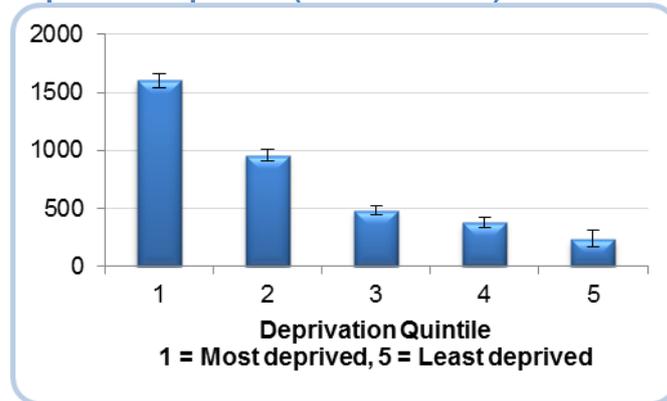
been significantly above national and regional averages to a greater extent than the alcohol-related conditions. 70% of these admissions have a first relevant diagnosis code related to mental & behavioural disorders due to the use of alcohol, the majority of which relate to a pattern of harmful use and acute intoxication. Rates of admissions for males are more than twice that of females which is broadly in line with national trends. There is also a very significant relationship to deprivation (Fig 3). Torbay has consistently had a statistically higher rate of admissions for alcohol specific conditions amongst its under 18 population, however, the general trend is downwards (Fig 4).

Fig 2: Rate of admission episodes for alcohol-specific conditions per 100,000



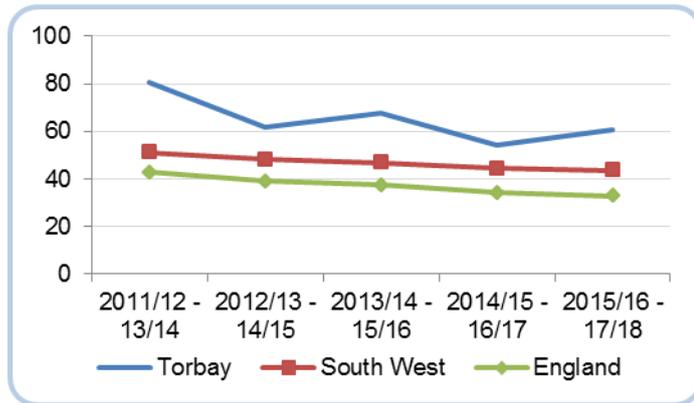
Source: Public Health Outcomes Framework (PHOF) – (Age Standardised)

Fig 3: Rate of admission episodes for alcohol-specific conditions per 100,000 by deprivation quintile (14/15 to 17/18)



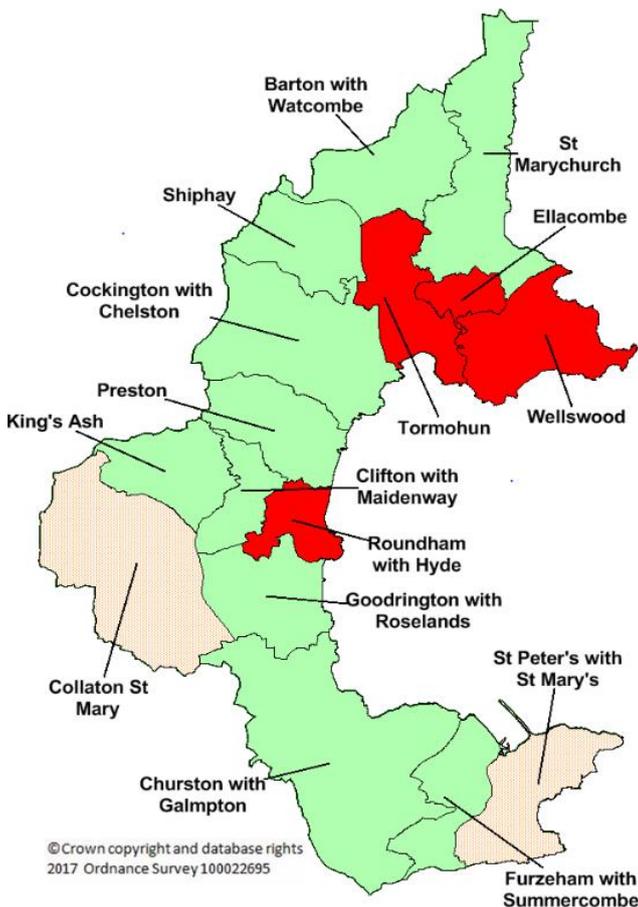
Source: Public Health Outcomes Framework (PHOF) – (Age Standardised)

Fig 4: Rate of admission episodes for alcohol-specific conditions per 100,000 – Under 18s



Source: Public Health Outcomes Framework (PHOF)

Fig 5: Rate of admission episodes for alcohol-specific conditions by ward – All ages (14/15 to 17/18)



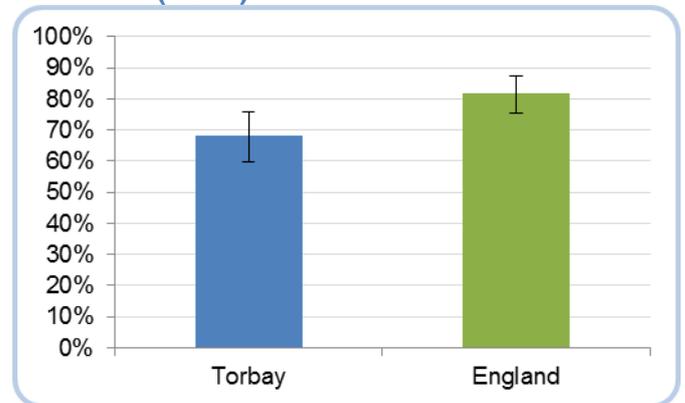
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Source: Public Health Outcomes Framework (PHOF) – (Age Standardised)

Alcohol related and specific mortality rates for Torbay have not been significantly higher than national figures in any of the previous 6 years. Of the Alcohol Specific mortality numbers over the last 6 years 80 are male and 32 are female.

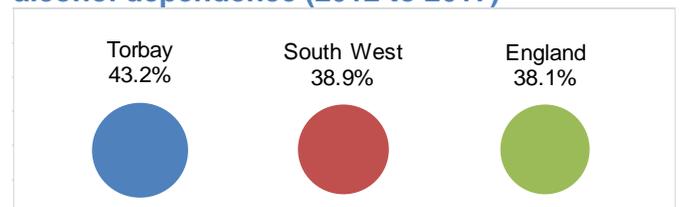
For some people, over consumption of alcohol can lead to a dependence on it, in these scenarios individuals need guidance, support and treatment. Successful treatment can generate many positive outcomes including reducing hospital admissions, improving general health and reducing harms to others affected by dependent drinking. Torbay has a higher rate of successful completions of structured treatment for alcohol dependence than the national or regional average (Fig 7). Success means successful completion of the treatment (free of alcohol dependence) and they do not re-present themselves to treatment within 6 months. It is estimated that 2/3 of dependent drinkers within Torbay are not in treatment during 2016/17 compared to 4/5 in England (Fig 6).

Fig 6: Estimates for dependent drinkers not in treatment (16/17)



Source: Public Health Outcomes Framework (PHOF)

Fig 7: Successful completion of treatment for alcohol dependence (2012 to 2017)



Source: Fingertips – Local Alcohol Profile

References and further information:

- Local Alcohol Profiles - <https://fingertips.phe.org.uk/profile/local-alcohol-profiles>
- Public Health Outcomes Framework - <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework>
- Torbay Drug and Alcohol Services - <https://www.torbayandsouthdevon.nhs.uk/service/s/drug-and-alcohol-service/>