

BEHAVIORS ASSOCIATED WITH ALCOHOL CONSUMPTION AMONG STUDENTS OF THE FACULTY OF MEDICAL SCIENCES IN STIP

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- Although we know much about alcohol, there are many unknown factors yet to be discovered to reduce its harmful effects.
- Nowadays, when we are faced with the constant increase in morbidity and mortality from diseases associated with alcohol, most success can be achieved through preventive measures to be taken much earlier, before they begin consuming alcohol before disease arises.

Alcohol is the second great evil in the world, despite the drugs, that brings many people to the edge of their life.

Alcoholism is one of the oldest described disorders, known from the time of Aristotle and Hippocrates

DEFINITION:

WHO:

Alcoholic is a person who is dependent on alcohol and because of that abuse of alcohol appears physical, mental and social decay

NIAA:

Alcoholism or alcohol dependence is a disease that includes four symptoms:

- 1. need for drinking;
- 2. loss of control;
- 3. physical dependence and
- 4. tolerance

Degrees of drinking

- Moderate drinking mostly red wine to 2 cups per day or less for men or one cup or less per day for women;
- Excessive drinking men more than 14 drinks per week or 4-5 at a time; women more than 7 drinks per week or 3 at once;
- Harmful drinking physical or mental problems, but not addicted;

Alcohol abuse one or more of the following problems within one year: irregular performance of work and personal commitments; involvement in dangerous situations; problems with the law;

Alcohol dependence
three or more of these problems within one year:
need for increased amounts of alcohol;
unsuccessful attempts to end;
cancellation of work and personal commitments;
continued drinking despite knowledge that they hurt
themselves or those around them;

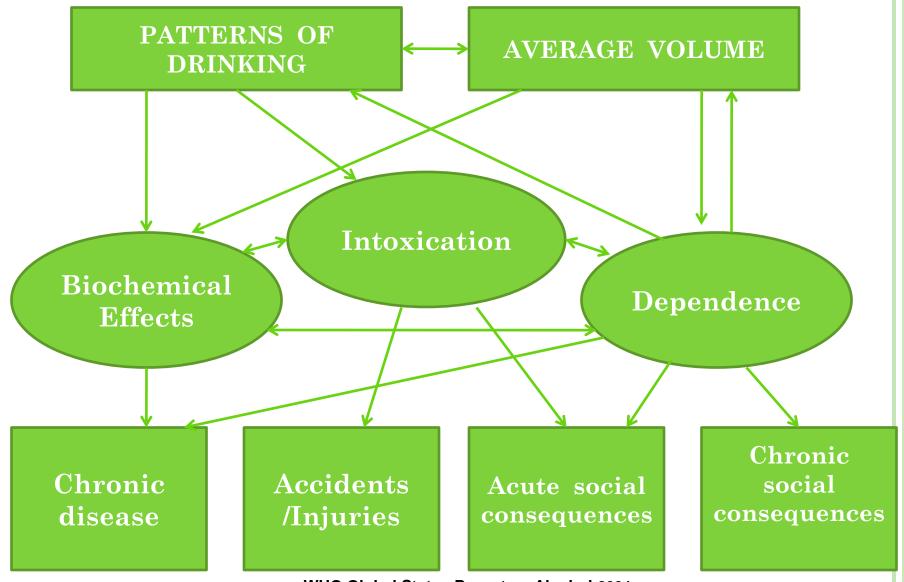
FACTORS AFFECTING THE CONSUMPTION OF ALCOHOL AND THE OCCURRENCE OF CONSEQUENCES

Individual (Gender, age, family history, health, mood, etc.)

Alcohol
(% of alcohol
consumed that
amount, price, etc..)

Environment
(Cultural norms,
socioeconomic factors,
influence of peers,
etc..)

Model of alcohol consumption



WHO Global Status Report on Alcohol 2004

Effets of alcohol

Medical problem	Moderate drinking	Occasional drinking	Chronic drinking
Liver disorders		Disturbed liver function	Alcoholic hepatitis (10-35%) Cirrhosis
Gastrointestin al problems		Diarrhea	Split between the stomach and esophagus; bleeding; hemorrhoids; ulcer; pancreatitis
Heart disorders	May reduce the risk of disease	High blood pressure Accelerated cardiac work with irregular rhythm	High blood pressure Heart failure

Stroke	May reduce the risk of ischemic stroke	Hemorrhagic stroke	Hemorrhagic stroke
Tumors	Breast cancer because of increased estrogen production or production on carcinogen growth factor by the liver		3 times greater risk of liver cancer, 4 times the esophagus, 6 times more in oral cavity;
Mental disorders	Headache Insomnia	Problems with memory and concentration Contribute a better translation	Damage to nerves due to lack of vitamins, emotional problems, psychoses
Immune system			Increased tendency to infections

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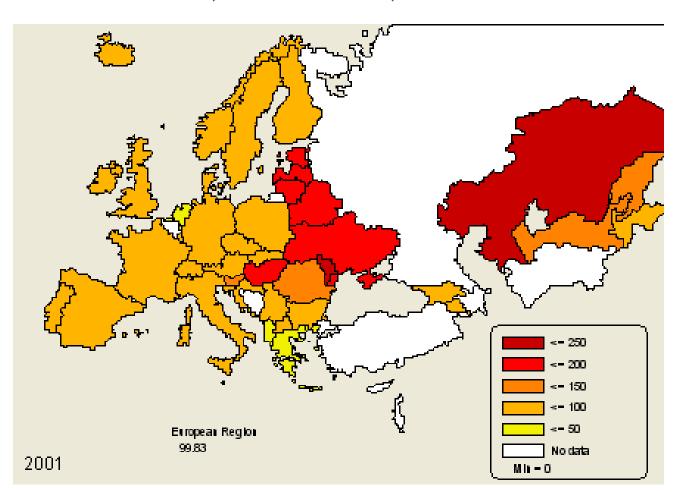
Diseases of the lungs		ARDS Pneumonia (due to reduced defense against bacteria)
Disorder of bones, skin and muscles		Osteoporosis, muscle weakness; skin and itching
Diabetes	Hypoglycemia	Hypoglycemia
Reproductive disorders	Drinking during pregnancy can lead to miscarriage, low birth weight, mental retardation	Impotence, menstrual disorders, problems of the fetus in pregnancy

Statistics

- World Health Organization in 2004 estimated that 2 billion people worldwide consumed alcoholic beverages and 76.3 million are diagnosed with alcohol related disease.
- *Alcohol causes 1.8 million deaths (3.2% of total number), of which one third are due to unintentional injuries.

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MORTALITY RATE FROM DISEASES RELATED TO ALCOHOL, PER 100,000 INHABITANTS







Behaviour Among adolescents towards alcohol in Macedonia

- ESPAD survey, conducted in R.Macedonia in 2008
- The report provides valuable information on the behaviour of 16-year-old students from most of the secondary schools around the country, towards different aspects of intake of legal and illicit drugs

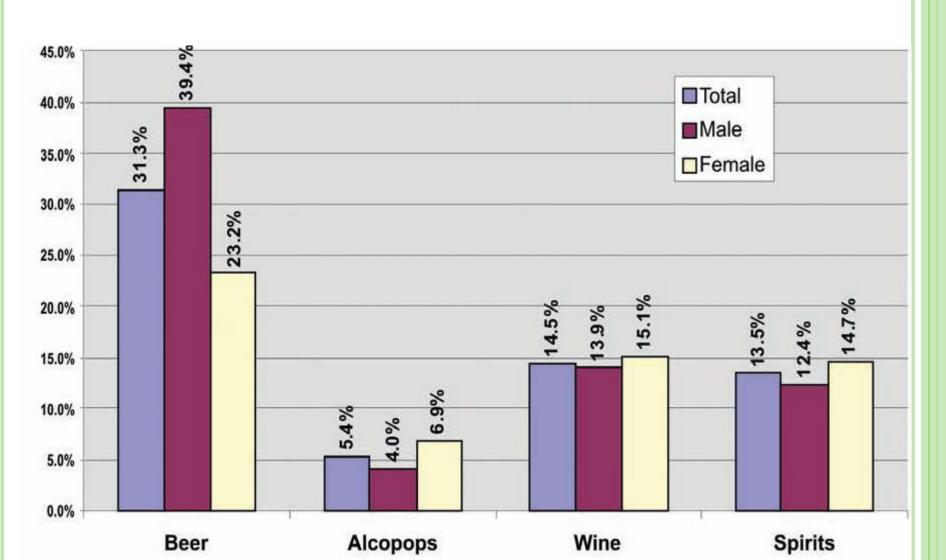
15-YEARS ADOLESCENTS WHO DID NOT CONSUME ALCOHOL, ETHNIC DISTRIBUTION

Time period	Macedonians	Albanians	Turks	Roma
Life time prevalence	23.70%	72.70%	67.40%	17.20%
Last 12 months	31.40%	77.70%	71.10%	31.00%
Last 30 days	50.80%	83.50%	80.00%	42.90%

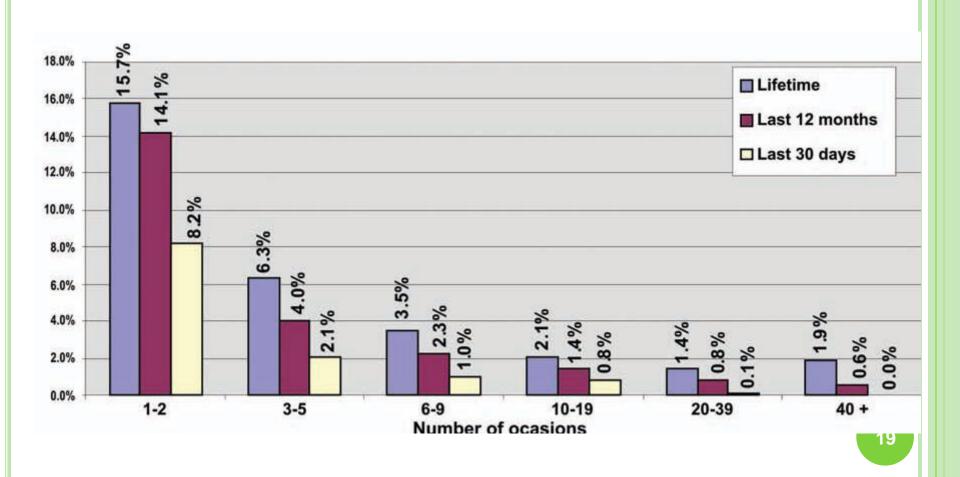
LAST TIME OF ALCOHOL INTAKE, GENDER DISTRIBUTION

Time period	Male	Female	Total
I never drink alcohol	37.40%	45.50%	41.40%
1-7 days ago	32.80%	22.90%	27.80%
8-14 days ago	8.50%	7.00%	7.70%
15-30 days ago	7.10%	7.40%	7.20%
1 month - 1 year ago	9.00%	12.70%	10.90%
More than 1 year ago	5.30%	4.60%	5.00%

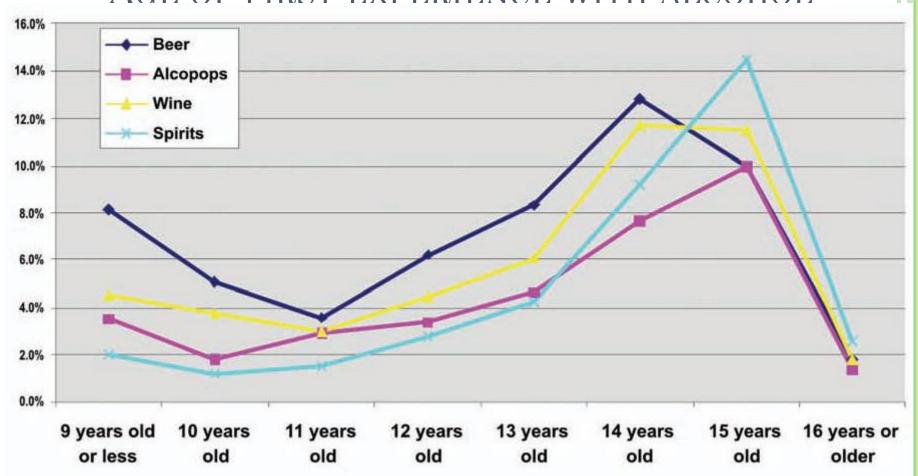
TYPE OF ALCOHOL TAKEN DURING THE LAST INTAKE OF ALCOHOL



OCCASIONS WHEN STUDENTS WERE INTOXICATED FROM DRINKING ALCOHOL



AGE OF FIRST EXPERIENCE WITH ALCOHOL



BEHAVIOUR TOWARDS ALCOHOL AMONG STUDENTS FROM MEDICAL FACULTY IN STIP

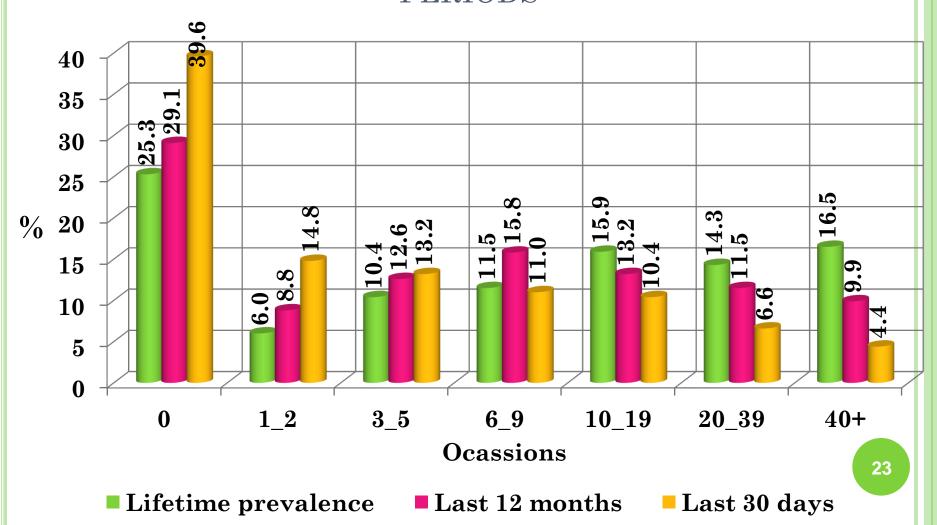
• The purpose of the survey is to provide reliable data about the behaviour among 1-year students towards alcohol

- Standardised questionnaire
- 182 students (82 male i 93 female)

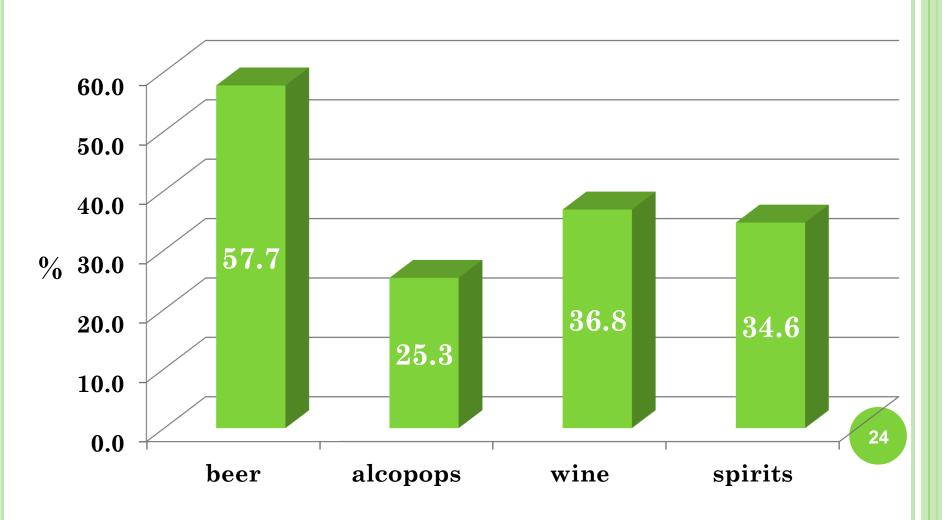
STUDENTS WHO DID NOT CONSUME ALCOHOL, GENDER DISTRIBUTION

Time period	Male	Female
Lifetime prevalence	21, 3 %	29, 0 %
Last 12 months	25,8 %	32,3 %
Last 30 days	36,o %	43,0 %

ALCOHOL INTAKE, ALL STUDENTS, DIFFERENT TIME PERIODS



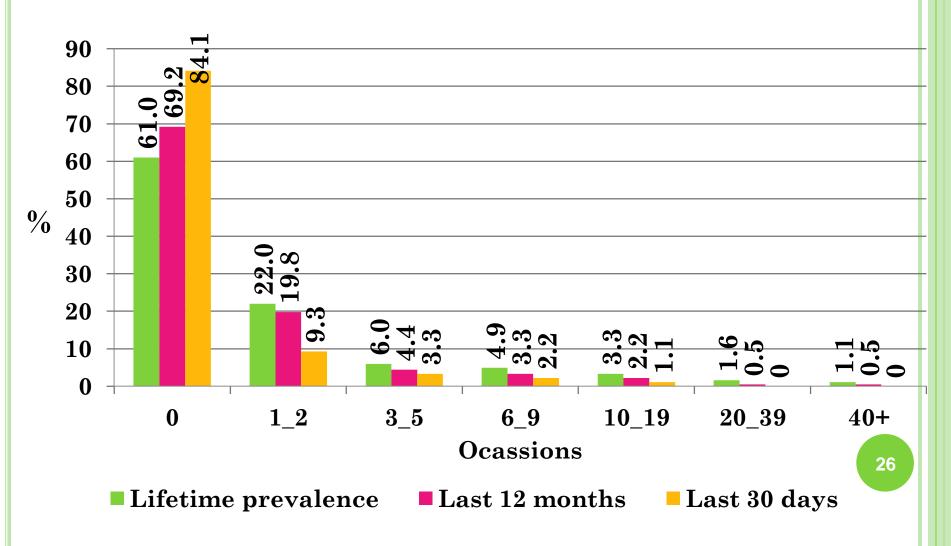
CONSUMPTION OF DIFFERENT TYPES OF ALCOHOL DURING THE LAST 30 DAYS



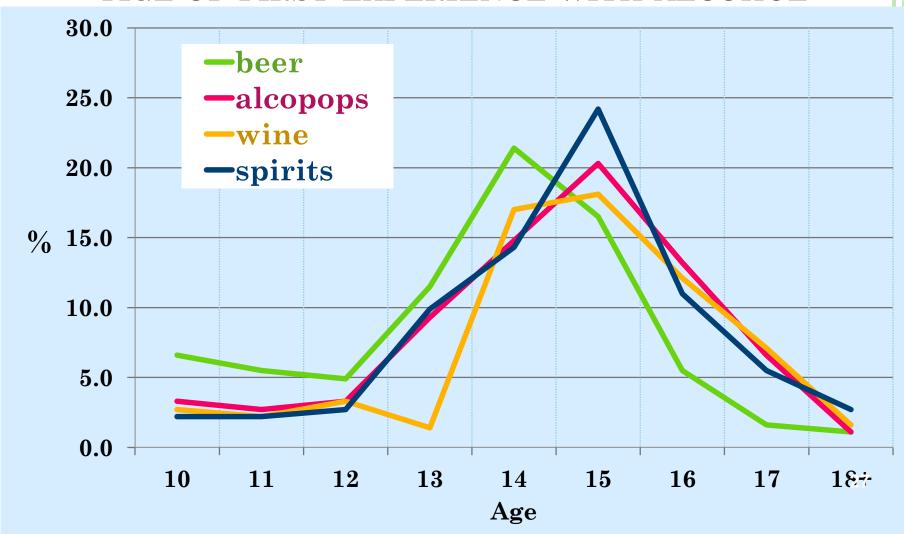
EXPERIENCE WITH FIVE OR MORE DRINKS ON ONE OCCASION (BINGE DRINKING) DURING THE LAST 30 DAYS

No of occasions	Male	Female	Total
0	52,8	67,7	60,4
1	14,6	14,0	14,3
2	10,1	8,6	9,3
3	11,2	6,5	8,8
6	6,7	2,2	4,4
10+	4,5	1,1	2,7

OCCASIONS WHEN STUDENTS WERE INTOXICATED FROM DRINKING ALCOHOL



AGE OF FIRST EXPERIENCE WITH ALCOHOL



Alcohol and young people

- Research in the EU countries showed that 5% of 11-year-old children, 12% of 13-year and 29% of 15year consumed alcohol once a week.
- •The average age of children when they first get drunk is 13.3 for males and 13.9 for female children.
- •Of those who started drinking before 14 years, 47% become alcoholics later in life, and if they begin after 21 years of age or later, only 9% show the same 28 results with the previous group

Economic costs

➤ In EU countries in 2003 were spent € 125 billion or an average of 1.3% of GDP.

➤In the same year the U.S. spent \$ 185 billion.

PREVENTION

Education

Statutory measures

CHANGE - FROM HELP TO PREVENTION

Low risk Low risk

High risk

High risk

Alcohol addicts

Alcohol addicts

Traditional approach

Modern approach

✓ National Institute of alcoholism conducted and funded programs for prevention of alcoholism in teenagers and students.

Prepares brochures to educate parents on how to prevent their children to drink and how to recognize problems.

Organizes workshops for colleges to implement prevention programs.

Within the Department of Education is Center for Education for alcohol.

Developed countries apart from education include legislative measures such as:

increasing taxes on alcohol (1% increase reduces the death rate from traffic accidents for 0.9%)

a legal minimum age (21 years in the U.S., which reduced mortality by 15% among teens)

training programs for sellers that would reduce sales of alcohol by 12%

ban on advertising and more.

STRATEGY TO REDUCE THE HARMFUL CONSEQUENCES OF ALCOHOL ABUSE IN R..MACEDONIA 2008/2012

- Protecting young children and fetus;
- Reducing injuries and death cases from accidents associated with alcohol;
- Preventing damage from alcohol abuse among adults and reduce the negative impact of the workplace;
- Information, education and increased awareness of the impact of alcohol consumption;

ACTIVITIES

- Reduction of demand and supply of alcoholic products (legislative and legal measures, economic measures, measures for education and promotion, measures to protect the health of the workplace);
- Reduce injuries and deaths from traffic accidents due to alcohol;
- Psycho-social assistance and support to persons who abuse alcohol and their families;
- International cooperation;
- Monitoring and evaluation of implementation of the strategy.

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