

Minimum Unit Pricing for Alcohol:

A view from Scotland

Prof Ewan Forrest
Glasgow Royal Infirmary
University of Glasgow

No conflicts of interest





Sunday Mail 15<sup>th</sup> Jan 2006



#### The aim of MUP

"The policy aim of MUP is to reduce health harms caused by alcohol consumption...It aims to reduce both the consumption of alcohol at population level and, in particular, among those who drink at hazardous and harmful levels."

Scottish Government (Interim BRIA of MUP Continuation and Future Pricing, 2023).

MUP establishes a 'floor' price for a unit of alcohol (10ml or 8g)

Minimum price for a product = Price per unit x Strength of alcohol x Volume (litres)

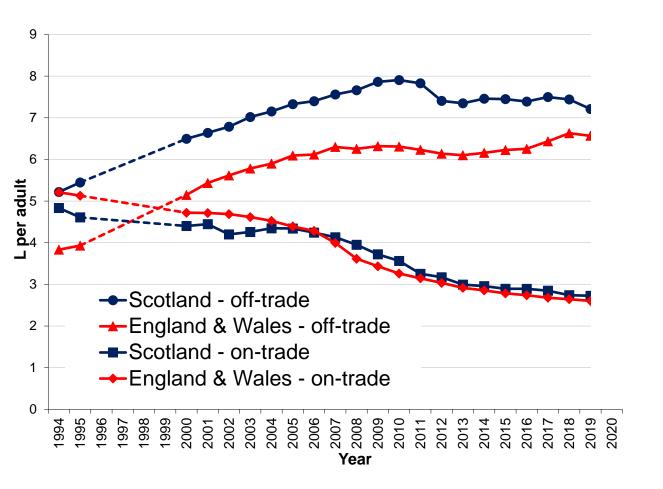
Part of a **PACKAGE** of Measures:

The Alcohol etc (Scotland) Act 2010:

- The multi-buy discount ban, which led to a decline in total per adult off-trade alcohol sales, mostly driven by falls in wine sales.
- Increased investment in alcohol treatment and care services, with access now at a level considered high by international standards.
- Increased delivery of Alcohol Brief Interventions.
- Legislation to ban irresponsible promotions in the on-trade.
- Introduction of the lower drink drive limit to 50mg per 100ml of blood.

# Impact of MUP on Alcohol sold

Volume of pure alcohol (litres) sold per adult (16+), by trade sector, 1994-2020



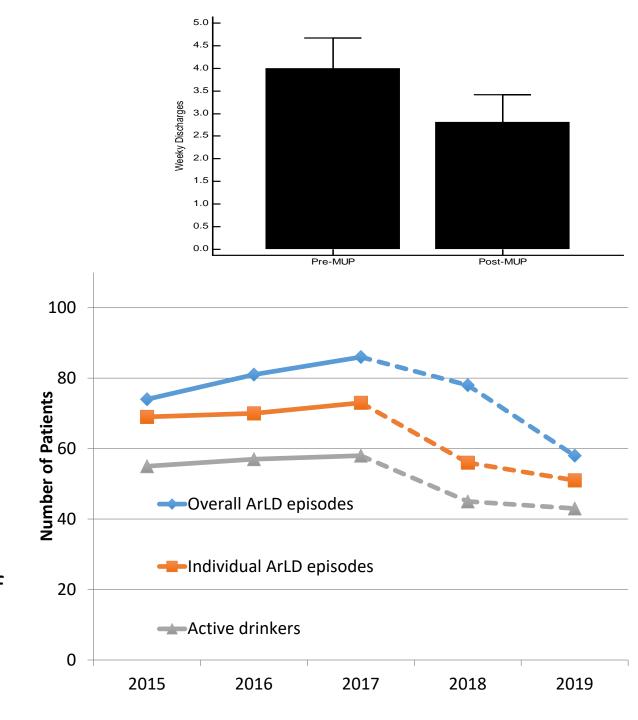
# Estimated change % in alcohol sales in Scotland, with England and Wales as control

	Total (on- and off-trade combined) after three years % change (CI)	Off-trade after three years % change (CI)	
All alcohol	-3.0 (-4.2 to -1.8)	-3.6 (-4.8 to -2.5)	
Beer	-2.3 (-3.9 to -0.7)	-1.6 (-3.7 to 0.5)	
Spirits	-4.9 (-6.6 to -3.1)	-5.5 (-7.5 to -3.4)	
Wine	0.6 (-0.6 to 1.7)	1.8 (0.8 to 2.8)	
Cider	-13.5 (-16.9 to -10.0)	-21.5 (-24.6 to 18.3)	
FW	13.5 (7.5 to 19.8)	13.8 (8.6 to 19.3)	
RTD	-0.5 (-6.9 to 6.3)	3.6 (-3.4 to 11.1)	
Perry	-31.6 (-38.4 to -24.1)	-31.3 (-37.7 to -24.2)	

Note: FW = fortified wine; RTD = ready-to-drink beverages

#### Patterns of ArLD: effect of MUP

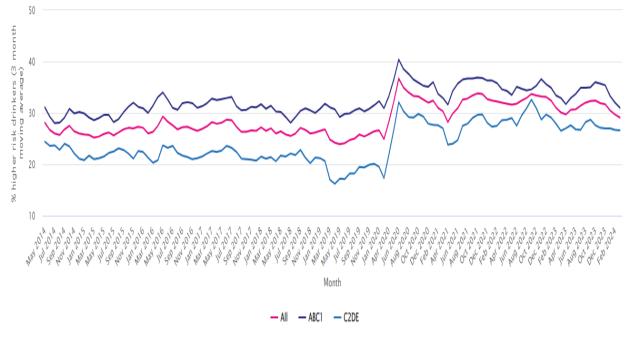
- Discharges from Gastroenterology/Liver Wards 8/9 Glasgow Royal Infirmary
  - October December: 2015 2019 (MUP introduced May 2018)
- Alcohol-related liver disease (ArLD) admissions noted
  - No change in clinical presentations: similar proportions of patients with ascites, alcoholic hepatitis, encephalopathy and variceal haemorrhage
  - Reductions in weekly discharge numbers of patients with ArLD
  - Fewer individual patients with ArLD
  - Fewer patients actively drinking at time of admission (<8 weeks)</li>



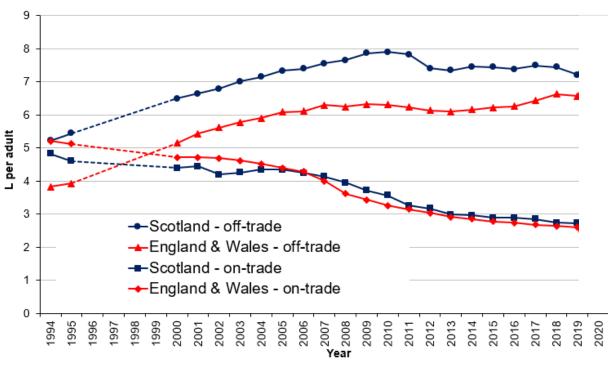
#### Impact of COVID-19: pandemic: drinking behaviour and deaths

- Increased drinking in those with higher pre-COVID AUDIT scores
- England and Wales: in 2020, there was a 20.0% increase in total alcohol specific deaths compared to 2019 (33.0% of deaths in the most deprived group).





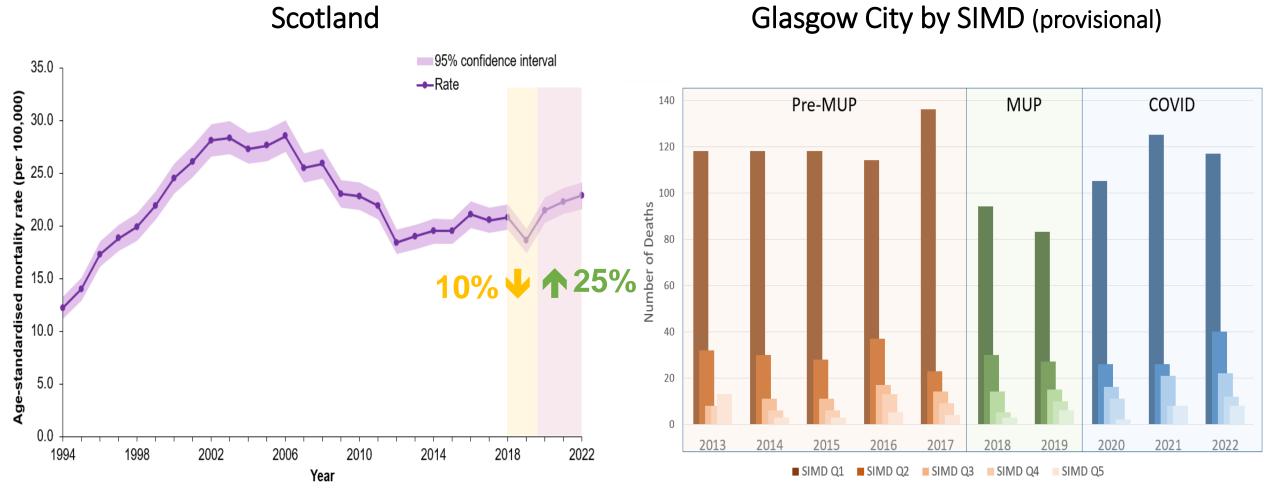
### Volume of pure alcohol (litres) sold per adult (16+), by trade sector, 1994-2020



# Impact of MUP... followed by the Impact of COVID-19

• Initial fall in alcohol-specific deaths after introduction of MUP

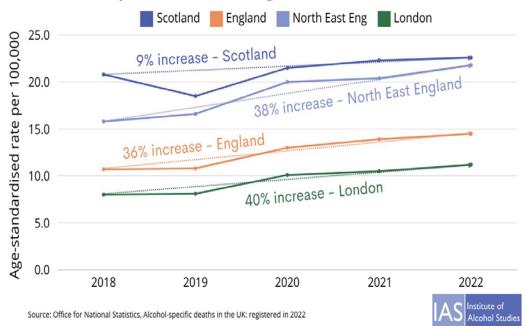
Alcohol-specific Deaths in:

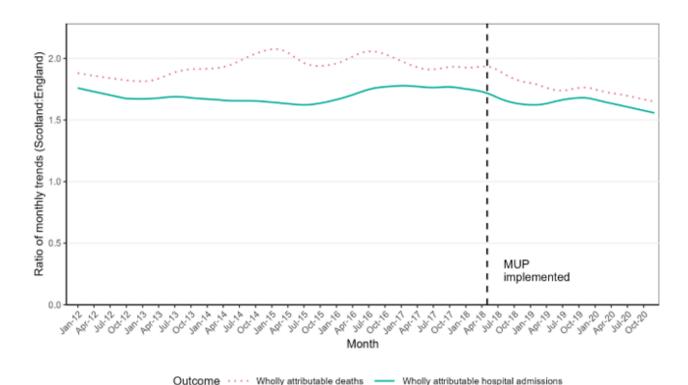


#### MUP: blunting the COVID driven increase in alcohol harm

Wyper et al, 2023		Effect estimate, % (95% CI)	Effect estimate, N per year (95% CI)	p value
Deaths	All deaths	-13·4% (-18·4 to -8·3)	−156 (−243 to −69)	0.0004
	Alcoholic liver disease	−11·7% (−16·7 to −6·4)	Not estimated	<0.0001
Hospitalisations	All hospitalisations	-4·1% (-8·3 to 0·3)	-411 (-908 to 86)	0.064
	Alcoholic liver disease	-9·8% (−17·5 to −1·3)	Not estimated	0.023

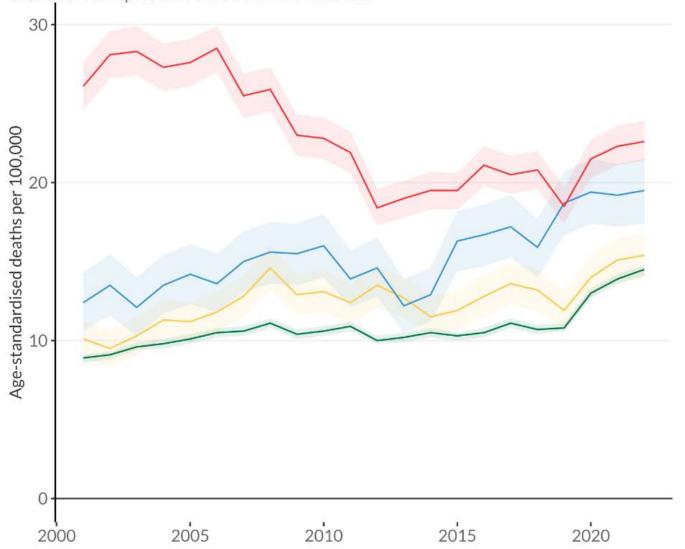
#### Alcohol-specific death rate England and Scotland, 2018-2022





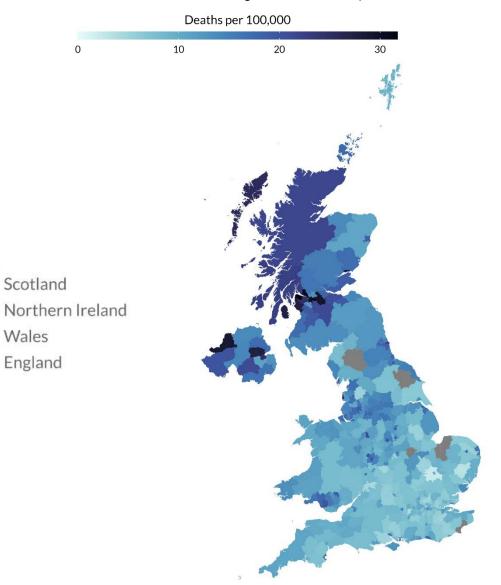
#### Scotland: a world apart?

Age-standardised mortality rates from conditions caused only by alcohol. Shaded areas represent 95% Confidence Intervals.

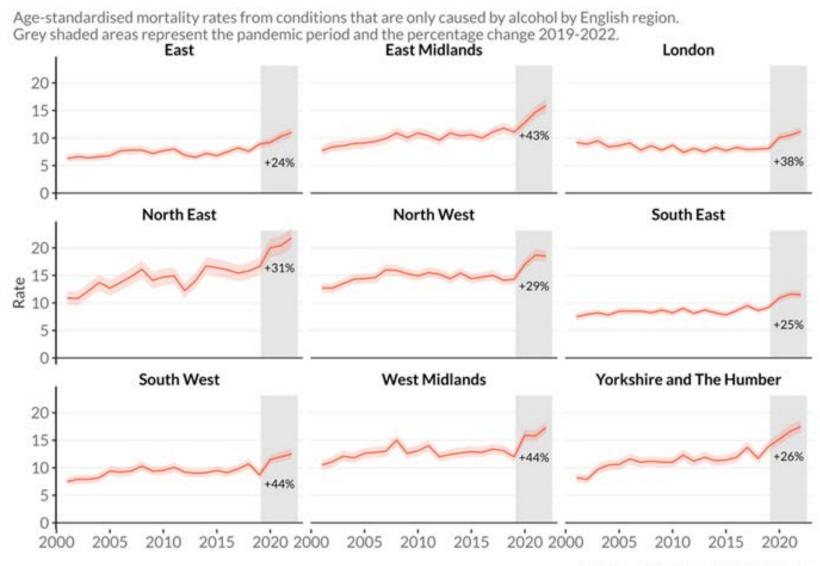


#### Alcohol-specific deaths in the UK

Age-standardised mortality rates for causes that are 100% attributable to alcohol. Grey areas have too few deaths to robustly calculate these rates. Data reflects latest available figures for each country



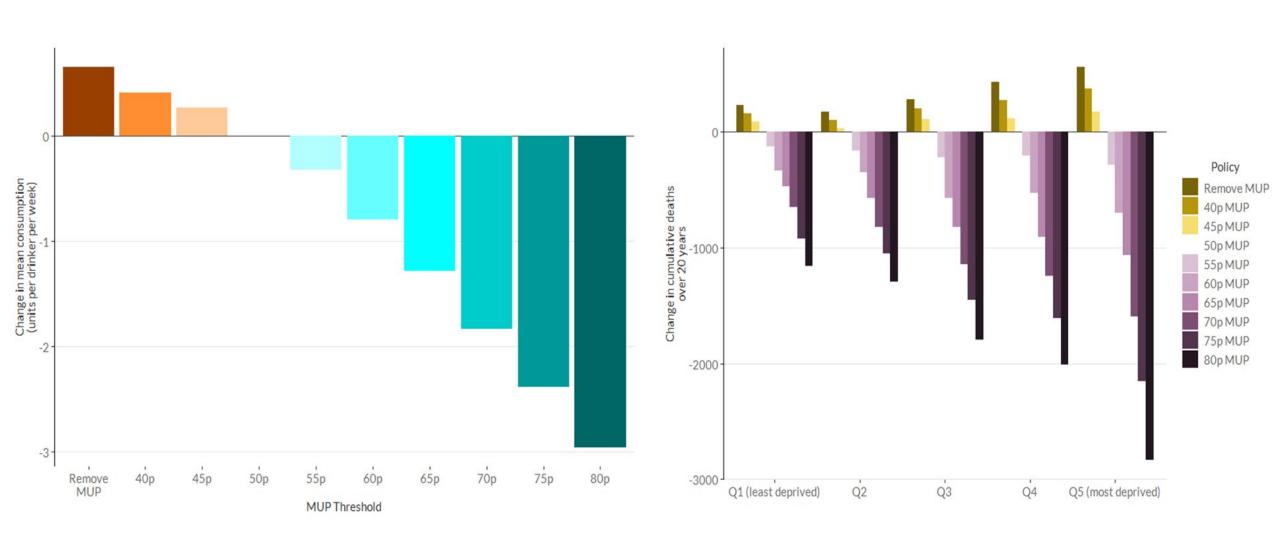
# There maybe trouble ahead...



### Impacts of Different Thresholds of MUP

Change in drinking behaviour

Change in alcohol deaths



## MUP must be uprated to at least 65p

- The effect of MUP has also been eroded by inflation
- Anything less than 60p = increase
- The Scottish Parliament votes to both maintain the MUP ne scottish ramament votes to both maintain the Mariament votes the level from Sop to 65p. consumption by an estimated 2.7%, around ~14,000 fewer hospital admissions, MUP incr Spital costs of £16.4m over 20 years (vs. 60p). aı

Research

Group

Lase to at least 65p now, AFS, SHAAP + over 30 other organisations calling As١ anatic measure for price review in the future with indexing to a measure of inflation or affordability