

Secretariat, House Standing Committee on Health, Aged Care and Sport PO Box 6021 Parliament House CANBERRA Canberra ACT 2600 Registered Charity ABN 42 006 173 379 Level 7, 461 Bourke Street Melbourne VIC 3000

Telephone 03 9670 1000 StrokeLine 1800 STROKE (1800 787 653) strokefoundation.org.au

Dear Sir/Madam

Re: Standing Committee on Health, Aged Care and Sport Inquiry into the health impacts of alcohol and other drugs in Australia

Stroke Foundation is a national charity that partners with the community to prevent stroke, save lives and enhance recovery. We do this through raising awareness, empowering health professionals to deliver high quality, best-practice care to stroke patients, facilitating research, and supporting survivors of stroke. We advocate for better systems, processes and resources to help health professionals deliver world class stroke care.

Chronic health conditions such as stroke are the leading cause of illness, disability and death in Australia. An estimated 45,785 Australians experienced stroke in 2023,¹ and there were more than 440,000 survivors of stroke living in our community.¹ Unless action is taken, it is estimated by 2050, Australians will experience almost 72,000 strokes annually.¹

We know that more than 80 percent of strokes can be prevented,² and that effective primary stroke prevention remains the best means for reducing the impact of stroke in Australia.

Drinking too much alcohol can increase the risk of stroke, as alcohol consumption is linked to a number of other conditions which are risk factors for stroke. For example, evidence indicates that one of the cumulative effects of drinking too much alcohol is circulatory system damage, which increases the risk of high blood pressure, the leading modifiable risk factor for stroke.³ Excessive alcohol consumption has been shown to trigger atrial fibrillation, a condition where the heart beats fast and out of rhythm, which can lead to the formation of blood clots in the heart and an increased risk of stroke.³ Research has shown that a high alcohol consumption changes the way the body responds to insulin, making it harder to control blood sugar levels, contributing to the development of type 2 diabetes, a known risk factor for stroke. Given the relatively high energy content of alcohol, excessive alcohol consumption has been shown to cause obesity,⁴ which increases the risk of stroke. Evidence shows that alcohol can interact with prescribed medications, such as the anticoagulant warfarin,⁵ increasing the risk of bleeding in the brain and haemorrhagic stroke.

We know that the less alcohol you drink, the lower your risk of harm.⁶ Importantly, however, there is no safe level of alcohol intake with regard to alcohol-related harms.⁶ To reduce the risk of harm from alcohol-related disease or injury, including stroke, healthy men and women should drink no more than 10 standard drinks a week and no more than 4 standard drinks on any one day, in line with the Australian Guidelines to Reduce Health Risks from Drinking

Alcohol.⁶ Similarly, people who have experienced stroke or transient iscahemic attack (TIA) should avoid excessive alcohol consumption (no more than 10 standard drinks per week and no more than 4 standard drinks on any one day).^{6,7}

Stroke Foundation is committed to reducing the number of preventable strokes in this country, and as the voice of stroke in Australia, welcomes the Standing Committee on Health, Aged Care and Sport Inquiry into the health impacts of alcohol and other drugs in Australia

Reducing the number of preventable strokes in the Australian community by reducing alcohol-related harm

Stroke Foundation is focused on empowering more Australians to recognise the risk factors for stroke, including alcohol use, that can be changed, and in doing so increase their chances of preventing stroke.

Notably, less than two percent of total Government health spending in Australia goes towards public health efforts like chronic condition prevention and health promotion.⁸ Yet we know that many preventive health interventions are cost-effective – for every dollar invested in prevention there is a \$14 return.⁹

Australian Federal and State and Territory governments need to invest in evidence-based approaches to reduce the number of preventable strokes in the community, by encouraging all Australians to live healthier lives, and better identifying and managing those at risk of stroke.

Stroke Foundation recommends that Australian governments reduce alcohol-related harm in the community, by¹⁰:

- Implementing taxation reforms, such as volumetric taxation (where products are taxed based on alcohol content) for all alcoholic drinks, to establish an economic incentive to produce and consume low alcohol products in the place of higher alcohol products.
- Introducing restrictions to reduce exposure to alcohol marketing among children and younger people (including through digital media and sporting broadcasts and events).
- Banning the promotion and marketing of alcohol at train and bus stations and on public transport.
- Building consumer awareness of the 'Australian guidelines to reduce health risks from drinking alcohol' to support informed decisions about alcohol consumption.
- Developing public health campaigns that promote a better understanding of the risks and harms associated with alcohol consumption.

A number of these recommendations are also part of the World Health Organization's (WHO) Alcohol Policy 'Best Buys', evidence-based, cost-effective and high-impact public policy measures, which if implemented, can reduce alcohol-related harm.¹¹ Importantly, the actions by Australian governments to implement the WHO recommended alcohol interventions, and address the harm caused by alcohol, has been inconsistent.

Stroke Foundation strongly supports the implementation of proven, evidence-based policy measures by Australian governments, in order to address the significant impact of alcohol-related harm in our community. It is critical these policy measures are accompanied by

specific and measurable targets, such as those outlined in the Australian Government's National Preventive Health Strategy 2021-2030,¹² and that local communities and priority populations are engaged in the development and implementation of these measures to ensure they are locally responsive and culturally appropriate.

Thank you for the opportunity to provide input into this inquiry.

Yours sincerely

Lonungy

Dr Lisa Murphy Chief Executive Officer Stroke Foundation

References

- 1. Kim J, Neville E, Dalli L et al. on behalf of the Stroke Foundation. 2024. Economic Impact of Stroke Report 2024. Melbourne, Australia.
- O'Donnell MJ, Chin SL, Rangarajan S et al; INTERSTROKE investigators. 2016. Global and regional effects of potentially modifiable risk factors associated with acute stroke in 32 countries (INTERSTROKE): a case-control study. Lancet. 388:761-775.
- 3. Zakhari S. Alcohol and the cardiovascular system: molecular mechanisms for beneficial and harmful action. Alcohol Health Res World. 1997. 21:21-29.
- 4. AlKalbani SR, Murrin C. The association between alcohol intake and obesity in a sample of the Irish adult population, a cross-sectional study. BMC Public Health. 2023. 23:2075.
- 5. Roth JA et al. Alcohol misuse, genetics, and major bleeding among warfarin therapy patients in a community setting. Pharmacoepidemiol Drug Saf. 2015. 24:619-627.
- 6. Australian Guidelines to Reduce Health Risks from Drinking Alcohol. 2020. National Health and Medical Research Council, Australian Research Council and Universities Australia. Commonwealth of Australia, Canberra.
- 7. Stroke Foundation. 2024. Clinical Guidelines for Stroke Management. Melbourne, Australia.
- 8. Shiell A et al. How do we fund Public Health in Australia? How should we? Aust N Z J Public Health. 2024. 48:100187.
- 9. Masters R, Anwar E, Collins B, Cookson R. Return on investment of public health interventions: a systematic review. J Epidemiol Community Health. 2017. 71:827-834.
- 10. Stroke Foundation. 2023. Position Statement: Stroke Prevention. Available at: https://strokefoundation.org.au/media/ldiadkaf/position-statement-prevention.pdf
- 11. World Health Organisation. 2023. More ways, to save more lives, for less money: World Health Assembly adopts more Best Buys to tackle noncommunicable diseases. Available at: <u>https://www.who.int/news/item/26-05-2023-more-ways--to-save-more-lives--for-less-money----world-health-assembly-adopts-more-best-buys--to-tackle-noncommunicable-diseases</u>
- 12. Australian Government Department of Health and Aged Care. 2021. National Preventive Health Strategy 2021–2030. Commonwealth of Australia, Canberra.