



Consumer Federation of America

Dec. 5, 2023

Dr. Katrina Stone, Ph.D.
Senior Program Officer
National Academies of Sciences, Engineering and Medicine
Washington, D.C. 20001

Re: National Academies of Sciences, Engineering, and Medicine expert committee on the relationship between consumption of alcohol and health outcomes

Dear Dr. Stone:

Consumer Federation of America appreciates the opportunity to comment on the provisional appointments to the National Academies' expert committee on the relationship between consumption of alcohol and health outcomes. While CFA commends the National Academies for removing two researchers with alcohol industry ties from the committee following public outcry,¹ the remaining committee members fall short of meeting Congress' mandate to assemble "a balanced representation of individuals who have expertise in the health effects of alcohol consumption."² We urge the National Academies to make the nomination process more transparent, and to add experts in fields including cancer epidemiology and injury control.

Delivering accurate information about alcohol's health effects is more urgent than ever. According to the most recent sales data, "per capita consumption" of alcohol has increased steadily over the past two decades, and shot up 5.5 percent from 2019 to 2021, "the largest two-year increase since 1969."³ During the same time period, estimates of alcohol-related deaths skyrocketed, with a 25.5% spike during the first year of the pandemic followed by a 9.9% increase in deaths during 2021.⁴ Self-reported alcohol consumption and risky drinking patterns increased in particular among women,

¹ Rabin, Roni C. (2023, December 1). Scientists in Discredited Alcohol Study Will Not Advise U.S. on Drinking Guidelines. *The New York Times*. <https://www.nytimes.com/2023/12/01/health/alcohol-health-guidelines.html?searchResultPosition=2>

² Publ. L. No. 117–328, 136 STAT. 4509 (2022). <https://www.congress.gov/117/plaws/publ328/PLAW-117publ328.pdf>

³ National Institute on Alcohol Abuse and Alcoholism. Apparent Per Capita Alcohol Consumption: National, State, and Regional Trends, 1977–2021. Bethesda, MD: US Department of Health and Human Services, Public Health Service, National Institutes of Health. <https://pubs.niaaa.nih.gov/publications/surveillance120/surveillance-report120.pdf> (2023).

⁴ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) [Internet]. National Center for Health Statistics Mortality Data on CDC WONDER. Multiple cause of death, 2018–2021. 2023. Available from: <https://wonder.cdc.gov/controller/saved/D157/D324F825>.

Black consumers, and consumers with minor children in the home.⁵ According to the CDC, alcohol-related harms, such as increased deaths from chronic liver disease and cirrhosis, contributed significantly to the unprecedented decline in life expectancy in the United States over two consecutive years.⁶

Popular perceptions that “light” or “moderate” alcohol consumption confers cardiovascular and other health benefits—perceptions that the alcohol industry has gone to great lengths to support⁷—have helped to fuel the rise in drinking. The Dietary Guidelines for Americans, in turn, have reinforced these perceptions, stating as recently as 2010 that “Strong evidence from observational studies has shown that moderate alcohol consumption is associated with a lower risk of cardiovascular disease.”⁸ More recent authorities, however, including the 2020 Dietary Guidelines Advisory Committee (DGAC), have noted that the evidence in support of alcohol’s health benefits appears increasingly shaky, and new techniques, such as Mendelian Randomization (MR) studies, have cast doubt on the notion that any level of alcohol consumption will benefit health.

This shifting body of evidence led the 2020 DGAC to advise new drinking guidelines emphasizing that, at all levels of consumption, “drinking less is better for health,” and specifically lowering the recommended daily limit for men from two drinks to one.⁹ However, the alcohol industry succeeded in convincing Trump Administration officials to disregard much of these advised changes.¹⁰ The industry also apparently convinced Congress to remove alcohol from the 2025 DGAC’s consideration altogether, and instead direct the National Academies to conduct this review. The make-up of the expert committee betrays a disturbingly pervasive industry influence in this process.

Again, the Academies deserve credit for heeding calls to remove from the list of proposed committee members two researchers with a history of troublesome ties to the alcohol industry. But even assuming that the other proposed members have no such conflicts, their lack of expertise in areas critical to fully evaluating the relationship between alcohol consumption and health outcomes

⁵ Barbosa, Carolina PhD; Dowd, William N. BA; Barnosky, Alan MA; Karriker-Jaffe, Katherine J. PhD. Alcohol Consumption During the First Year of the COVID-19 Pandemic in the United States: Results From a Nationally Representative Longitudinal Survey. *Journal of Addiction Medicine* 17(1);p e11-e17, 1/2 2023. | DOI: 10.1097/ADM.0000000000001018

⁶ Press release, Centers for Disease Control & Prevention. “Life Expectancy in the U.S. Dropped for the Second Year in a Row in 2021,” (Aug. 31, 2022), https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2022/20220831.htm

⁷ Golder, S., Garry, J., McCambridge, J. (2020). Declared funding and authorship by alcohol industry actors in the scientific literature: a bibliometric study, *European Journal of Public Health*, 30(6), 1193–1200. <https://doi.org/10.1093/eurpub/ckaa172>

⁸ U.S. Departments of Agriculture and Health and Human Services. (2010). *Dietary Guidelines for Americans*. p.31 <https://health.gov/sites/default/files/2020-01/DietaryGuidelines2010.pdf>

⁹ Dietary Guidelines Advisory Committee. 2020. Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC. Available at: <https://doi.org/10.52570/DGAC2020> (Ch. 11, p. 18).

¹⁰ As a result of this political influence, the 2020-2025 Guidelines offer the contradictory advice that “drinking less is better for health than drinking more,” and yet “limiting intakes to 2 drinks or less in a day for men” will “minimize risks associated with drinking.” Accessed at: U.S. Departments of Agriculture and Health and Human Services. (2010). *Dietary Guidelines for Americans*. p.49 https://www.dietaryguidelines.gov/sites/default/files/2021-03/Dietary_Guidelines_for_Americans-2020-2025.pdf

raises serious concerns. Out of the eight committee members, only two—Kathryn Coakley and Susan Smith—appear to have specialized in researching the effects of alcohol on health, with that research limited to alcohol’s impacts on mental health and complications related to Fetal Alcohol Syndrome, respectively. Specialists in other areas specifically related to alcohol’s health effects would help to legitimize the panel.

For example, the National Academies should seek out one or more experts—without ties to the alcohol industry—who have published on the topic of MR studies related to alcohol consumption. This is a very concerning omission in the present panel make-up given the capacity of these studies to reduce the effect of confounding variables and selection bias that has plagued past observational studies.¹¹ MR studies of alcohol consumption, which compare the disease outcomes of drinkers, including “light” or “moderate” drinkers, with those of individuals who have certain genetic variants that make them allergic or intolerant to alcohol, were an important factor supporting the 2020 DGAC’s conclusion in favor of revising recommended drinking limits downward. As the 2020 DGAC report noted, “MR studies do not find reduced associations for coronary heart disease and ischemic stroke among low average consumers compared with non-drinkers of alcohol, which is inconsistent with findings from observational studies.” By contrast, the committee noted that MR studies on alcohol consumption and cancer “indicate that alcohol consumption is positively associated with certain types of cancer, and are consistent with evidence from prospective cohort studies.” In other words, MR studies indicate that alcohol consumption, including “light” and “moderate” consumption, does not appear to cause cardiovascular disease risk to decline, but it does appear to raise cancer risk.

Since the DGAC report, several new MR studies have confirmed the association between alcohol and cancer and shed light on the specific mechanisms, such as DNA methylation, by which alcohol causes colon and breast cancers.¹² The National Academies should reopen the nomination process for the expert panel members, and invite researchers associated with such studies to serve on this expert committee, as well as researchers on various other topics related to alcohol-related harms.

Finally, the National Academies should publish the nomination letters that led to the appointments of the various panel members, along with any nominations made in the future, and consider other ways to make the evaluation process as transparent as possible. Given the history of

¹¹ See, e.g., I Chikritzhs T, Fillmore K, Stockwell T. [A healthy dose of skepticism: four good reasons to think again about protective effects of alcohol on coronary heart disease](#)External. *Drug Alcohol Rev* 2009;28:441–4.

¹² Li Y, Ye D, Zhou W, Liu B, Mao Y, Sun X. Alcohol consumption and colorectal cancer risk: A mendelian randomization study. *Front Genet.* 2022 Sep 23;13:967229. doi: 10.3389/fgene.2022.967229. <https://pubmed.ncbi.nlm.nih.gov/36212149/> (colorectal cancer); Zhou X, Wang L, Xiao J, Sun J, Yu L, Zhang H, Meng X, Yuan S, Timofeeva M, Law PJ, Houlston RS, Ding K, Dunlop MG, Theodoratou E, Li X. Alcohol consumption, DNA methylation and colorectal cancer risk: Results from pooled cohort studies and Mendelian randomization analysis. *Int J Cancer.* 2022 Jul 1;151(1):83-94. doi: 10.1002/ijc.33945. <https://pubmed.ncbi.nlm.nih.gov/35102554/> (colorectal cancer); Zhou, X., Yu, L., Wang, L. et al. Alcohol consumption, blood DNA methylation and breast cancer: a Mendelian randomisation study. *Eur J Epidemiol* 37, 701–712 (2022). <https://doi.org/10.1007/s10654-022-00886-1> (breast cancer); Yoo JE, Han K, Shin DW, et al. Association Between Changes in Alcohol Consumption and Cancer Risk. *JAMA Netw Open.* 2022;5(8):e2228544. doi:10.1001/jamanetworkopen.2022.28544, <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2795595> (alcohol-related cancers and all cancers).

the DGAC's treatment of alcohol, and the alcohol industry's response to the 2020 DGAC's report, the National Academies has the burden of persuading the public that this process is legitimate. It should begin by demonstrating that the make-up of the expert panel reflects the judgment of a diverse and disinterested body of stakeholders.

Thank you for your consideration of these comments.

Sincerely,

Thomas Gremillion
Director of Food Policy
Consumer Federation of America