

University of Groningen

Country differences in past trends in alcohol-attributable mortality in Europe

Trias Llimós, Sergi; Janssen, Fanny

Published in:
European Journal of Public Health

DOI:
[10.1093/eurpub/ckx189.147](https://doi.org/10.1093/eurpub/ckx189.147)

IMPORTANT NOTE: You are advised to consult the publisher's version (publisher's PDF) if you wish to cite from it. Please check the document version below.

Document Version
Publisher's PDF, also known as Version of record

Publication date:
2017

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):
Trias Llimós, S., & Janssen, F. (2017). Country differences in past trends in alcohol-attributable mortality in Europe. *European Journal of Public Health*, 27(suppl. 3), 359-359.
<https://doi.org/10.1093/eurpub/ckx189.147>

Copyright

Other than for strictly personal use, it is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), unless the work is under an open content license (like Creative Commons).

The publication may also be distributed here under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license. More information can be found on the University of Groningen website: <https://www.rug.nl/library/open-access/self-archiving-pure/taverne-amendment>.

Take-down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Downloaded from the University of Groningen/UMCG research database (Pure): <http://www.rug.nl/research/portal>. For technical reasons the number of authors shown on this cover page is limited to 10 maximum.

Country differences in past trends in alcohol-attributable mortality in Europe

Sergi Trias-Llimós

S Trias-Llimós, F Janssen

Population Research Centre, Faculty of Spatial Sciences, University of Groningen, Groningen & The Hague, Netherlands

Contact: s.trias.limos@rug.nl

Background

Both levels and trends in alcohol-attributable mortality have been heterogeneous across European countries, but detailed studies are lacking. We study country differences in past alcohol-attributable mortality trends in Europe by period and cohort, and assess whether differences become smaller (convergence) or bigger (divergence).

Methods

Age-standardized liver cirrhosis (from 1950 onward for 8 selected countries) and alcohol-attributable mortality (from 2000 onward for 20 European countries) were estimated using population level cause-of-death data. We assessed convergence by applying various dispersion measures and applied age-period-cohort analysis to examine country differences in cohort effects and cohort patterns.

Results

Levels and trends of alcohol-attributable mortality clearly differed across European countries and between sexes, especially for men. Western European countries had lower and more stable alcohol-attributable mortality rates, whereas countries from Central and Eastern Europe showed higher rates and more dissimilar trends across the countries. Birth cohorts made significant contributions to liver cirrhosis mortality ($P < 0.001$), but the patterns were different between most of the country pairs ($P < 0.001$). Birth cohorts at higher risk of liver cirrhosis mortality were the older cohorts in Nordic countries, as compared to the younger cohorts in Eastern and Southern countries. Divergence in alcohol-attributable mortality rates showed up until 2007 and convergence thereafter, for both men and women.

Conclusions

Clear differences between European countries in levels, time trends, and cohort patterns of alcohol-related mortality exist. Due to declines in alcohol-related mortality in Central and Eastern European countries, alcohol-related mortality is converging since 2007 in Europe.

Key messages:

- Alcohol-attributable mortality in Europe is recently turning from divergence to convergence.
- Birth cohort effects are crucial to understand alcohol-related mortality trends.