CHILE

Recorded adult per capita consumption (age 15+)

![Graph showing recorded adult per capita consumption](image)

Sources: FAO (Food and Agriculture Organization of the United Nations), World Drink Trends 2003

Last year abstainers

![Pie chart showing last year abstainers](image)

Estimates from key alcohol experts show that the proportion of adult males and females who had been abstaining (last year before the survey) was 31% (males) and 47% (females). Data is for after year 1995.  

The 1998 Third National Household Survey of Drug Abuse with a sample size of 31,665 people aged between 12 to 64 years old who were representative of the national population found the rate of lifetime abstainers to be 15.6% of the total sample population.
Problem drinkers (prevalence)

A 1996 survey found that 24% of persons who said they had consumed alcohol in the past year fall into the category of problem drinkers (35.6% of the males and 11.1% of the females surveyed), with higher percentages in the lower socioeconomic groups.5

Youth drinking (last month prevalence)

The corresponding survey in 2000 showed that last month prevalence of alcohol use among those 12–18 years old was 32.8% (males) and 28.4% (females).6

Alcohol dependence (lifetime diagnosis)

In a study of 406 patients hospitalized in the internal medicine service of a public hospital in Santiago (203 males and 203 females), it was found that 38% of males and 6% of females qualified for alcohol dependence or alcohol abuse at some point in their lives. DSM-III-R criteria was used to assess alcohol dependence and alcohol abuse.8

In a study of 406 patients (203 men and 203 women aged 11 to 90 years) hospitalized in an internal medicine service of a public hospital, the rate of current prevalence of alcohol dependence was found to be 6.6% (total), 12.3% (males) and 1% (females). The rate of lifetime prevalence of alcohol dependence was found to be 7.6% (total), 13.8% (males) and 1.5% (females).9

With regard to alcoholism, it is estimated that at present 20% of persons can be classified as problem drinkers; 15% of them are not dependent on alcohol, and 5% are dependent on alcohol. Alcoholism is more frequent among males and among persons who are unemployed or irregularly employed.5
Unrecorded alcohol consumption
The unrecorded alcohol consumption in Chile is estimated to be 2.0 litres pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).²

Mortality rates from selected death causes where alcohol is one of the underlying risk factors
The data represent all the deaths occurring in a country irrespective of whether alcohol was a direct or indirect contributor.

Chronic mortality

[Diagram showing chronic mortality time-series measured on two axes, ischaemic heart disease on right axis and the other causes on the left.]

Note: Chronic mortality time-series measured on two axes, ischaemic heart disease on right axis and the other causes on the left.

Acute mortality

[Diagram showing acute mortality data for different causes such as falls, intentional injuries, accidental poisonings, etc.]

Source: WHO Mortality Database
Morbidity, health and social problems from alcohol use

It is estimated that 20–22% of work-related accidents have a direct or indirect relationship with recent alcohol use. In a study of patients who required hospitalization for severe work-related accidents, it was found that 15% reported recent use of alcohol.\(^{10}\)

In a study to determine the prevalence of family violence against women in a population sample in Temuco, Chile, it was found that alcohol abuse was a risk factor for violence against women. Among men, alcohol abuse was also identified as a risk factor for violent behaviours.\(^{11}\)

In a survey in Temuco, Chile, it was found that parental alcohol abuse was an associated factor of child abuse.\(^{12}\)

Alcoholism is associated with 38% of hospital discharges. It is the primary cause reported in 4.5% of hospital discharges and in 7% of deaths, and it is an associated cause in 25% of deaths. Alcohol use is a factor in 48.6% of homicides, 38.6% of suicides, and 50% of traffic accidents.\(^{5}\)

Cirrhosis of the liver is the fifth cause of mortality in Chile in spite of the fact that the disease has shown a downward trend during the last decade. A significant increase in the median age of hospital discharges and deaths in men and women is noticed. The age-adjusted death rate per 100 000 people was 17.8 in 1999 (26.4 for men and 9.2 for women). In 1999, there were 2671 deaths caused by cirrhosis of the liver, representing 3.3% of total deaths recorded. The lifetime probability of hospital admission caused by cirrhosis of the liver in 1996 was 5.9% (total), 8.1% (men) and 4.4% (women). The lifetime probability of death caused by cirrhosis of the liver in 1999 was 3.6% (total), 5.7% (men) and 1% (women).\(^{13}\)

In a case-control study of 170 breast cancer cases and 340 controls (all females) in Santiago, the odds ratio for breast cancer associated with alcohol consumption was found to be 1.61.\(^{14}\)

Economic and social costs

The total cost of excessive alcohol consumption (including indirect and direct costs) to Chile is estimated to be US$ 2.969 billion. The cost per capita is estimated to be US$ 209.\(^{15}\)

Country background information

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<tr>
<td>15 805 000</td>
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<td>US$ 4260</td>
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<tr>
<td>Adult (15+)</td>
<td>11 537 650</td>
<td>Female 73.4</td>
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<tr>
<td>% under 15</td>
<td>27</td>
<td>Male 80.0</td>
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<td>Population distribution 2001 (%)</td>
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<tr>
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References


