ITALY

Recorded adult per capita consumption (age 15+)

![Graph showing recorded adult per capita consumption over years]

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

Last year abstainers

According to the WHO GENACIS study (2001–2002 regional survey conducted in Florence and Tuscany; sample size $n = 2630$, males $n = 1311$ and females $n = 1319$; age group 20 to 64 years), the rate of last year abstainers was 15.9% (total), 9.1% (males) and 22.7% (females).2

According to a national survey conducted in 2003 (total sample size $n = 1006$; aged 15 years and over), the average number of drinks consumed per drinking day was 1.49.3
Heavy drinkers

According to the same survey, when a more restrictive and gender-oriented definition of heavy drinkers was applied (males drinking more than 40 g of pure alcohol a day and females drinking more than 60 g of pure alcohol a day), the rate was found to be 9.3% for males and 19.2% for females.1

Data from the WHO GENACIS study. Regional survey conducted in 2001–2002 in Florence and Tuscany (age group 20 to 64 years; total sample size \(n = 2630\); males \(n = 1311\) and females \(n = 1319\)) found the rate of heavy and hazardous drinking (among drinkers) to be 12.8% (males) and 11.5% (females). Definition used: average consumption of 40 g or more of pure alcohol a day for males and 20 g or more of pure alcohol a day for females.2

Heavy episodic drinkers (among drinkers)

According to a national survey conducted in 2003 (total sample size \(n = 1006\); aged 15 years and over), the average number of times that respondents had consumed the equivalent of one bottle of wine, five pints/bottles of beer or five measures of spirits on one drinking occasion was 0.63.3

In a nationally representative sample of subjects aged 18–64 years, the annual frequency of binge drinking in the past year was 24.7 among males and 14.0 among females. Binge drinking was defined as consuming at least a bottle of wine, 25 centilitres of spirits or four cans of beer.4

Youth drinking (alcohol consumers)
According to the 1999 ESPAD survey (total sample size $n = 4106$, males $n = 1681$ and females $n = 2425$; age group 15 to 16 years), the rate of alcohol consumers was 17% (total), 23% (males) and 13% (females). Alcohol consumer was defined as lifetime use of 40 times or more.\(^5\)

**Youth drinking (drink at least weekly)**

Youth drinking (drink at least weekly)

![Data shows proportion of 15-year-olds who report drinking beer, wine or spirits at least weekly. Total sample size $n = 1229$.\(^6\)](image)

**Youth drinking in Sardinia (last month heavy episodic drinkers)**

Youth drinking in Sardinia (last month heavy episodic drinkers)

![A 1997 survey of 1911 university students in Sardinia (38.6% males and 61.4% females; age range 18 to 49 years). Heavy episodic drinking was defined as consuming five or more drinks in a row during the last 30 days.\(^7\)](image)

The same study also found that 17.8% of all students (34.6% of males and 7.3% of females) recently drove a car or other vehicles after drinking alcohol, and 7.9% (16% of males and 1.6% of females) drove after binge drinking. Binge drinking was defined as consuming five or more drinks in a row during the last 30 days.\(^7\)

Data from the 1999 ESPAD survey (total sample size $n = 4106$, males $n = 1681$ and females $n = 2425$; age group 15 to 16 years old) show that the rate of binge drinking was 9% (females). Binge drinking was defined as consuming five or more drinks in a row three times or more in the last 30 days.\(^5\)

**Youth drinking (drunkenness)**

According to the 2001/2002 HBSC survey (total sample size $n = 1229$), the proportion of 15-year-olds who reported ever having been drunk two or more times was 22.8% for boys and 16.8% for girls.\(^6\)

In the 1999 ESPAD study of subjects 15 to 16 years old (total sample size $n = 4106$; males $n = 1681$ and females $n = 2425$) the proportion of subjects who reported being drunk three times or more in the last 30 days was 3% (total), 5% (males) and 2% (females).\(^5\)

**Alcohol dependence**

The Italian Society of Alcoholology estimates that there are about 1 million individuals dependent on alcohol. In the year 2000, 99,321 individuals were discharged from hospital with a diagnosis completely attributable to alcohol. This corresponds to an overall rate of 172.2/100,000 persons.\(^8\)

**Unrecorded alcohol consumption**

The unrecorded alcohol consumption in Italy is estimated to be 1.5 litres pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).\(^9\)
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

Acute mortality

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

Morbidity, health and social problems from alcohol use
It is estimated that 30–50% of deaths due to road traffic accidents are attributable to alcohol.10

In a study of 340 fatal traffic accident cases which came under the observation of the Institute of Forensic Medicine from 1982 to 1986, positive blood alcohol levels were found in 31.2% of the cases.11

It is estimated that around 20% of emergency room hospitalizations are alcohol-related.10
A study which examined the blood alcohol concentration (BAC) in adult patients who had been injured and who were admitted to an Italian emergency department within four hours after a road accident in 1998 found that BAC exceeded 0.5 g/l in 425 subjects (18.1%), and was in a toxic range (more than 1.00 g/l) in 179 subjects (7.6%).

In a 2001 study looking at 2185 consecutive cirrhosis patients enrolled over a 6-month period in 79 hospitals located throughout Italy, a history of alcohol abuse was found in 31.9% of the cases. In another study looking at the incidence of liver cirrhosis in Italy, it was found that alcohol abuse was present in 8.7% of cases as an exclusive aetiological factor.

The SDR per 100 000 population for chronic liver disease and cirrhosis was 14.35 in 1999 and 13.89 in 2000.

The number of alcohol-related road traffic accidents per 100 000 population was 5.16 in 1999 and 5.73 in 2000.

In 1996, about 42 000 deaths were attributed to alcohol consumption, mostly from hemorrhagic stroke, liver cirrhosis, cancer and injuries. Light intake (25 g/day or less) caused about 30% of deaths attributable to any consumption in women. In men, about one half of the deaths were attributable to the highest category of intake (100 g/day or more), while a lower proportion of deaths was attributed to light intake (almost 7%).

A study looking at alcohol-attributable mortality estimated that in Italy, there were 2.6% more male deaths and 2% more female deaths due to drinking.

**Economic and social costs**

The full economic costs of alcohol abuse calculated based on the WHO European Alcohol Action Plan estimate of 2–5% of the GDP correspond to €26–66 billion in the year 2003.

The social costs of alcohol use (alcohol-attributable mortality, productivity loss, absenteeism, hospitalizations, etc.) is estimated to be around 5–6% of the GDP of Italy.

**Country background information**

<table>
<thead>
<tr>
<th>Total population 2003</th>
<th>Life expectancy at birth (2002)</th>
<th>Male</th>
<th>Female</th>
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<tbody>
<tr>
<td>57 423 000</td>
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<td>76.8</td>
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<tr>
<td>Adult (15+)</td>
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<td>% under 15</td>
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<tr>
<td>Probability of dying under age 5 per 1000 (2002)</td>
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<td>Female</td>
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<td>US$</td>
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</tbody>
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**References**

2. Preliminary results from the Gender, Alcohol and Culture: An International Study (GENACIS Project). International Research Group on Gender and Alcohol (for more information please see http://www.med.und.nodak.edu/depts/irgga/GENACISProject.html).


