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Alcohol and the heart

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It is commonly believed that moderate drinking, of red wine in particular, reduces mortality, mostly due to decreased risk of cardiovascular diseases. This notion was supported by many epidemiological studies that compared non-drinkers with subjects consuming various alcoholic beverages in different quantities. The mechanisms responsible for the apparent cardiovascular benefits of light-to-moderate alcohol intake are uncertain. Alcohol consumption is associated with increase in serum apolipoprotein A-I and high-density lipoprotein cholesterol (HDL-cholesterol), profibrinolytic activity of plasma, and improved endothelial function, which may inhibit development of atherosclerosis. However, results of contemporary, prospective epidemiological studies do not confirm the cardioprotective effect of drinking but show an increased risk of certain types of cancer. Also, potential mechanisms of benefits of drinking are questioned, and data on the role of anti-oxidants are either not supported by clinical trials or they were based on flawed experiments. Moreover, there is clinical

evidence that even moderate drinking may adversely affect prognosis in patients with heart failure or certain arrhythmias. Therefore, despite the biologic plausibility and observational data in this regard, it should be kept in mind that these are insufficient to prove causality between drinking and cardioprotection. Because there has been no large-scale, randomised, clinical end-point trial of alcohol consumption, there is little current justification to recommend alcohol (or wine specifically) as a cardioprotective strategy. Recommendations of scientific societies and regulatory agencies advise that people who do not drink any alcohol at all should not be recommended to start drinking in the interest of their health. Patients should be informed that in certain cardiovascular disorders abstaining from alcohol should be observed.

Key words: alcohol, cardiovascular diseases, mortality.

DISCLOSURE

The author reports no conflict of interest.