ALCOHOL AND CARDIOVASCULAR DISEASE

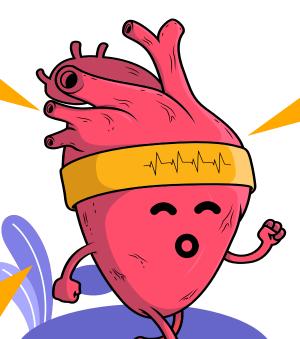
The relationship between alcohol and cardiovascular disease is complex, dependent upon many factors, and mediated by the volume and pattern of alcohol consumption.

Fact 1

Cardiovascular diseases (CVD) are the **leading cause of death in the world** and in most of the countries of the Americas, where they cause 1.9 million deaths per year.

Fact 2

Alcohol use can lead to high blood pressure, heart failure, or stroke, while there is much debate in the scientific literature about the effects of low levels of drinking.



Fact 3

Alcohol consumption can increase the risk of CVD, including:

- Cardiomyopathy
- Hypertension
- Atrial fibrillation
- Hemorrhagic stroke
- Ischemic heart disease
- Ischemic stroke



Low levels of alcohol consumption, as low as 5 g of alcohol (half a drink a day), may provide a small protective effect against ischemic heart disease. **However:**

- Most people drink above these levels. In the Americas, most drinkers on average drink above the levels that can offer any protection, and 25% report heavy episodic drinking.¹
- Low-level drinkers who engage in heavy episodic drinking have an increased risk of CVD.
- The greater a person's average alcohol consumption, the higher the risk of CVD.
- The effects of alcohol on CVD per standard drink of beer, spirits, and wine consumed are similar. No additional benefit is associated with red wine.





DO NOT START
DRINKING
ALCOHOL FOR
BETTER HEART
HEALTH. Protection
and health benefits
can be achieved
through healthy diet
and exercise.

To improve your heart health, **REDUCE YOUR DRINKING**.



If you are concerned about how your alcohol use is affecting your health, TALK TO YOUR PRIMARY HEALTH CARE PROFESSIONAL.

1 * Heavy episodic drinking is defined as 60+ grams of pure alcohol for men, and 40+ grams for women, on at least one occasion monthly. Given that one standard drink contains 10 g of pure alcohol, that is roughly 6 standard drinks for men, and 4 standard drinks for women.

SOURCES

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