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The role of public health in controlling the burden of alcohol-related harm

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An important period in Lithuania can be identified in 2017 and 2018 when all 3 WHO ‘best buy’ alcohol control policies were implemented in a short period of time. One such example was the implementation of availability restrictions on alcohol, when the retail takeaway alcohol sale time was reduced to 10 a.m. until 8 p.m. Monday to Saturday, and to 10 a.m. to 3 p.m. on Sunday (65 hours per week vs. 98 hours per week before the policy implementation).

Even though the policy of more significant reduction of alcohol sale hours was justified using past research arguments showing that alcohol could be associated with higher mortality burden during the weekends, this policy was widely criticized. The opposing interest groups described it as “ineffective” or “illogical”; however, the independent analysis led by Dr. Daumantas Stumbrys [1] demonstrated a positive effect of the alcohol control policy in reducing the alcohol-related mortality in men. After comparing mortality cases from external causes and cardiovascular disease it was demonstrated that the mortality has been reduced on Sundays (for external causes) and Mondays (for cardiovascular disease). The second example of the value of the public health policies demonstrates that the major increase of alcohol excise taxes in Lithuania since March 2017 led to a one-quarter increase of the revenue collected from alcohol excise tax (260 million Euro in 2016 vs. 319 million Euro in 2017) over one year, and a continuous revenue increase during the following years. Even though revenue excise tax may

be demonstrated as a “win-win” public health policy for a country, it is also criticized by interest groups as “increasing shadow economy”. The classical arguments and critiques of the effective public health policies may be observed from one country to another, as was also demonstrated in an example from Poland when Mateusz Zatonski *et al.* [2] demonstrated how the policy debate was framed when the same argument of shadow economy was used to criticize the increase of alcohol excise taxes.

The evidence from Lithuania shows that imposing limits on hours of alcohol off-premise sale in Lithuania in 2018 was followed by a change in the weekly pattern of alcohol-attributable male mortality. Also, public health is often presented as being in conflict with economic arguments, while in reality it is not.

DISCLOSURE

The authors report no conflict of interest.

References

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