Alcohol Merchandise Raises Child Drinking Risk

BY CHRISTINE KILGORE

Contributing Writer

WASHINGTON — Auden C. McClure, M.D., and her colleagues noticed some time ago that children and young teens in their New Hampshire community and pediatric practice often wore T-shirts, hats, and other merchandise bearing alcohol brand names and logos.

Now, armed with research findings showing that ownership of such mer-

chandise is associated with early-onset drinking, Dr. McClure is calling on the alcohol industry to follow the example of the tobacco industry and stop distributing the merchandise.

"The alcohol industry should institute a voluntary ban ... because of the association with early drinking and because students become a walking advertisement for alcohol consumption," Dr. McClure said at the annual meeting of the Pediatric Academic Societies.

She reported on a survey of fifth- to eighth-grade students in eight rural public schools in New Hampshire. Approximately 2,400 who said they had never used alcohol were asked by telephone 1-2 years later whether they owned an alcohol promotional item and if they had begun using alcohol.

Fourteen percent reported owning at least one alcohol promotional item (mostly clothing), and 15% reported using alcohol.

Those who owned alcohol promotional items had higher rates of alcohol use, compared with those who did not own the merchandise—approximately 25% vs. 13%, said Dr. McClure, a pediatrician at the Dartmouth-Hitchcock Medical Center in Lebanon, N.H.

Ownership of alcohol promotional items was associated with peer drinking, poor school performance, and high-risk behaviors, such as sensation seeking and rebelliousness.

Even after adjusting for these factors, Dr. McClure and her associates found that students who owned alcohol promotional items were more than 1.5 times more likely to try drinking than their peers.

Tobacco companies spent more than \$2

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billion in the 1990s on cigarette promotional items, but in 1999 they voluntarily gave up distribution and sale of the products after the practice was found to be associated with a dolescent smoking.

Tobacco companies

agreed to the ban as part of the master settlement agreement with the state attorneys general.

"Multiple studies during that time documented that tobacco promotional items are prevalent among adolescents, that ownership is associated with smoking, that it's independent of other adolescent risk factors, and also that ownership ... precedes the decision to smoke," Dr. McClure said at the meeting, sponsored by the American Pediatric Society, the Society for Pediatric Research, the Ambulatory Pediatric Association, and the American Academy of Pediatrics.

Unlike the smoking research, their study on alcohol promotional items does not prove causality, she said. The survey also did not ascertain where the items came from—whether they were purchased or received free at sporting events, for instance—and it did not ascertain alcohol brands.

The study also excluded students who, at baseline, had already begun drinking, which means "we potentially could have eliminated a higher-risk population," Dr. McClure said.

Alcohol use was assessed in the telephone survey with the question, "Have you ever had beer, wine, or another drink of alcohol that your parents didn't know about?" The other main question was: "Do you own something that has the name of a beer or alcohol brand on it like a T-shirt, or a backpack, or a hat?"

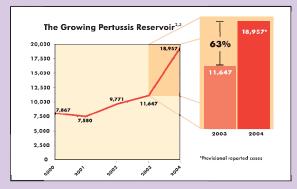
A national sample of adolescents is being surveyed currently, she said.

Until more research is completed and action is taken, "parents and schools should help ... to eliminate the ownership and display of alcohol promotional items in our schools and homes," she said.

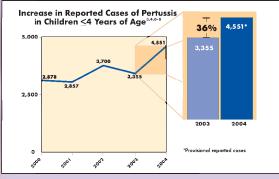
begins at home

The growing threat of pertussis — an often silent disease reservoir

Long thought to be nearly eradicated, pertussis case reports are at a 40-year high.² Today pertussis is the only communicable disease that is on the rise in all age groups for which a routine immunization is available. In 2004 there were 18,957 cases reported to the CDC, a 63% increase over 2003 and a startling 1000% increase from 20 years ago when incidence reached its nadir.^{2,3}

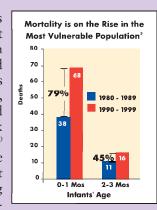


Especially troubling are two facts: first, there has been a 36% increase in reported cases among children ages 4 years or less^{3,4}; second, over the last decade, 80% of deaths attributed to pertussis occurred in infants under 6 months of age.⁵



Among the many explanations on the explosion of pertussis in the United States are better reporting, better diagnosis, and waning immunity. What they all have in common is the acknowledgment that there exists a reservoir of disease among adolescents and adults, and more importantly, from this reservoir pertussis transmission occurs. Pertussis is most contagious during

the first few weeks of illness before it is recognizable. In both adolescents and adults the disease is often mild in nature, and not associated with the trademark "whooping cough." However, studies have reported significant morbidity including pneumonia, rib frac-



tures, urinary incontinence, weight loss, otitis media, and sinusitis. People with pertussis are also at risk of hospitalization and other complications such as seizures and encephalopathy. Beyond the morbidity are the social, financial, and psychological costs of pertussis disease. One recent study reported that 70% of affected adolescents lost 5 to 10 days of school while 49% of afflicted adults were out of work for 5 to 10 days. In addition, 49% of adults reported that their sleep was disturbed for more than 21 consecutive nights with 9% reporting disturbed sleep for an astounding 60+ nights. It's no wonder the ancient Chinese called pertussis "the cough of 100 days."

Soon pertussis prevention will begin in the home too

Building on the heritage of the proven pediatric acellular DTaP vaccines, acellular Tdap vaccines for adolescents and adults will soon be available. This intervention will allow health-care providers to protect a broad spectrum of people from the morbidity of primary disease, as well as limit the morbidity and mortality in vulnerable infants by curtailing disease transmission.

You can find out more about pertussis by visiting any one of the following Web sites:

www.pertussis.com; www.cdc.gov; www.nfid.org; www.napnap.org; www.aap.org

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