



## FDI POLICY STATEMENT

### Alcohol as a risk for oral health

Adopted by the FDI General Assembly: September 2023, Sydney, Australia

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#### 2 **CONTEXT**

3 Alcohol is a psychoactive substance (affecting mental processes like moods,  
4 emotions and perceptions) with addictive properties. The use of alcohol contributes  
5 to approximately 3 million deaths annually.<sup>1</sup> Excessive alcohol consumption is  
6 associated with the risk of developing malignancies such as breast cancer,  
7 colorectal cancer and cancer associated with the oral cavity, oropharynx, larynx and  
8 oesophagus<sup>2</sup> as well as chronic non-communicable conditions such as  
9 cardiovascular disease and liver cirrhosis.<sup>1</sup> In addition, oral health impacts may  
10 include an increased likelihood of the occurrence of dental caries, periodontal  
11 disease, tooth wear, staining, halitosis and trauma.<sup>3</sup> Drinking alcohol to excess  
12 increases the risk of facial and oral injuries from falls, traffic accidents and violent  
13 confrontations. Non-communicable diseases (NCDs) or their treatments can impact  
14 the delivery of dental care to patients. Brief interventions from healthcare  
15 practitioners can reduce alcohol consumption among hazardous and harmful  
16 drinkers<sup>4</sup>, indicating the important role of all oral health practitioners in delivering  
17 these educational interventions.

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#### 19 **SCOPE**

20 This policy statement seeks to outline the oral health impacts of alcohol consumption  
21 and to highlight the important role of oral healthcare practitioners in the provision of  
22 alcohol brief interventions.

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#### 24 **DEFINITIONS**

25 **Alcohol dependence:** A combination of behavioural, cognitive and physiological  
26 factors that often include a marked desire to drink alcohol and difficulties in  
27 controlling its use. Someone who is alcohol-dependent may persist in drinking,  
28 despite harmful consequences. They will also give alcohol a higher priority than  
29 other activities and obligations.

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31 **Harmful drinking:** A pattern of alcohol consumption that is causing mental or  
32 physical damage.

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34 **Excessive drinking:** The level of consumption that minimises health loss is zero.  
35 Even so, if the consumption habit is already installed, an ingestion greater than 15-  
36 40 grams per day is considered excessive for a healthy adult man.<sup>5</sup>

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38 **Hazardous Drinking:** A pattern of alcohol consumption that increases someone's  
39 risk of harm. Some would limit this definition to the physical or mental health  
40 consequences (as in harmful use). Others would include the social consequences.

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42 **Brief Intervention:** A brief and structured advice session aimed either at helping  
43 someone to reduce their alcohol consumption or to abstain from alcohol.<sup>4</sup>

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## 45 **PRINCIPLES**

46 Alcohol is one of the most commonly used drugs worldwide with dependence-  
47 producing properties.<sup>6</sup> There is a trifold impact of alcohol on oral health:

- 48 • A direct impact on oral tissues, including a possible increase in dental  
49 caries, periodontal disease, tooth wear (may be due to the diminished  
50 saliva production as well as the sugar and acid content of many alcoholic  
51 beverages) and oral cancer;<sup>3</sup>
- 52 • The impact on the delivery of dental care to patients with alcohol-  
53 associated systemic conditions such as liver cirrhosis and colorectal and  
54 breast malignancies as well as foetal pathologies;
- 55 • The social impact may be harmful, for example, in the case of domestic  
56 violence (facial injuries and dental trauma) and there may be economic  
57 implications of alcohol abuse including self-neglect and loss of  
58 employment.<sup>7</sup>

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## 60 **POLICY**

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62 FDI recommends:

- 63 • increasing the awareness among patients and the dental team about the  
64 negative impact of alcohol consumption on oral and general health;
- 65 • ascertaining and recording the level of alcohol consumption for all patients;
- 66 • promoting early detection and prevention of alcohol-related negative health  
67 outcomes worldwide;
- 68 • engaging with the delivery of consistent brief alcohol interventions to  
69 encourage the reduction or cessation of alcohol consumption.

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71 FDI supports:

- 72 • integration of oral health and non-communicable diseases;
- 73 • raising concerns about industry interference, asking for more resources,  
74 monitoring of action plans using the common risk factor approach, and

- 75 stronger policies on alcohol taxation and cross-border marketing;  
76 • training of the dental team to deliver brief alcohol interventions;  
77 • collaboration with other healthcare professionals, such as physicians and  
78 psychologists, to ensure comprehensive care.

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## 80 **KEYWORDS**

81 alcohol, counselling, cancer, oral health, rehabilitation

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## 83 **DISCLAIMER**

84 The information in this policy was based on the best available scientific evidence at  
85 the time. It may be interpreted to reflect prevailing cultural sensitivities and socio-  
86 economic factors.

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