Alcohol could boost heart health: Glass of wine could stave off ANGINA and heart failure

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The study showed that enjoying one alcoholic drink a day - a pint of beer, a double whisky or gin, or a small glass of wine - was linked to a lower risk of some - but not all - heart conditions or stroke.

Researchers found that moderate drinking reduced the risk of several heart conditions more than not drinking alcohol at all.

The Cambridge University-led team, whose findings were published in The Lancet, said their findings suggest a more subtle approach to the role of alcohol in heart health is needed.

The large-scale study of British adults was to investigate the theory that moderate drinking is thought to be associated with a lower risk of developing cardiovascular disease compared with being teetotal or heavy drinking.

In Britain, moderate drinking is defined as no more than 14 units (112 grams) of alcohol a week.

One unit of alcohol is about equal to half a pint of ordinary strength beer, lager or cider (3.6 per cent alcohol by volume) or a small pub measure (25 ml) of spirits.

There are one and a half units of alcohol in small glass (125 ml) of ordinary strength wine (12 per cent alcohol by volume).

Researchers from Cambridge University and University College London set out to investigate the association between alcohol consumption and 12 cardiovascular diseases by analysing electronic health records of 1.93 million healthy British adults.

All the participants were free from cardiovascular disease at the start of the study, and non-drinkers were separated from former and occasional drinkers to provide additional clarity.

After several influential factors were accounted for, moderate drinking was associated with a lower risk of first presenting to a doctor with several, but not all, cardiovascular conditions, including angina, heart failure and ischaemic stroke, compared with abstaining from alcohol all together.

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But the researchers said that it would be 'unwise' to encourage people to take up drinking as a means of lowering their cardiovascular risk over safer and more effective ways, such as increasing physical activity and stopping smoking.

They said heavy drinking - defined as exceeding recommended limits - conferred an increased risk of first presenting with a range of such diseases, including heart failure, cardiac arrest and ischaemic stroke compared with moderate drinking, but carried a lower risk of heart attack and angina.

Again, the researchers emphasised that the findings don't mean that heavy drinkers will not go on to experience a heart attack in the future, just that they were less likely to present with this as their first diagnosis compared with moderate drinkers.

Dr James Nicholls, Director of Research and Policy Development at Alcohol Research UK, said: “This large-scale study provides strong evidence that the so-called ‘J-curve’ exists: meaning that, in most cases, moderate drinkers are less likely to suffer a heart condition than either heavy drinkers or people who don’t drink at all.

"It is an important contribution to the evidence on a controversial subject and its findings should be taken seriously."

Unbelievable facts about alcohol

Dr Steven Bell, a genetic epidemiologist at Cambridge University, said: "This is an observational study, so no firm conclusions can be drawn about cause and effect."

He said it was the first time the association has been investigated on such a large scale and their findings have implications for patient counselling, public health communication, and disease prediction tools.

But Doctor Kenneth Mukamal, Associate Professor of medicine at Harvard Medical School in the US, said the study 'does not offer a materially new view of the associations between alcohol consumed within recommended limits and risk of cardiovascular disease'.

Dr Mukamal added: "This work, however, sets the stage for ever larger and more sophisticated studies that will attempt to harness the flood of big data into a stream of useful, reliable, and unbiased findings that can inform public health, clinical care, and the direction of future research."