

Summary of Comments:

The Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD), Alcohol Intake & Health (AIH) study Request For Information

July 3, 2024, through August 2, 2024

On July 3, 2024, the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) issued a <u>request for public comment</u> in the Federal Register on the <u>scientific methodology</u> of the Alcohol Intake and Health (AIH) study. The comment period was open for 30 days and closed on August 2, 2024. A total of 66 comments from a range of interested parties were received by the ICCPUD. Below is a summary of the public comments.

Please note that these comments are the opinions of individuals and organizations and do not reflect the AIH study team, ICCPUD, or the federal government at large. The accuracy or correctness of the comments is not addressed; the information is simply summarized and provided for transparency.

Comments on the Scientific Methodology of the AIH Study

- Numerous comments spoke to the scientific rigor, merit, and value of the AIH
 methodology and protocol, citing the clearly articulated study aims and methods
 and the attention to scientific rigor throughout the protocol.
- Some commentors suggested that moderate drinking may have a benefit on cardiovascular health outcomes that should be taken into consideration for the AIH study. Other commentors noted that this stands in contrast to the World Health Organization's argument that there is no safe limit of alcohol consumption.
- There were comments on epidemiological considerations of how "abstainer" was defined, particularly allowing the misclassification of former drinkers as lifetime abstainers. This was related to discussions around whether the "sick quitter" hypothesis was grounded in the science.
- There were questions about whether the recommendations on alcohol contained in the Dietary Guidelines for Americans (DGA) would switch from daily consumption recommendations to weekly thresholds.
- Commentors felt that it wasn't clear why the exposure of interest was on average volume of alcohol use rather than focusing on the patterns of alcohol use.

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- There were some concerns expressed about if the methods proposed were being used to determine a causal relationship between the health outcomes and alcohol consumption.
- There were comments about whether certain research or data would be cherry picked for inclusion in the modelling. The comments noted that the quality of the research/data is cited as high-quality, but "quality" is never defined.
- Some comments sought additional information on how risk thresholds were going to be developed by the study and ultimately communicated to the public.
 Additionally, there were questions about whether the risk thresholds should be absolute or relative risks.
- A series of comments inquired as to why different beverage types (e.g., beer, wine, or distilled spirits) were not being assessed individually as they may have differential impacts on health outcomes. The repeated concern was that distilled spirits have greater health harms than beer or wine and lumping them together may lead to confounding health risks.
- Clarification was requested concerning the Delphi panel, specifically, how the
 independent reviewers would be selected, whether the names of Delphi panelists
 and their potential conflicts of interest would be disclosed, and how the information
 obtained from the Delphi panel would be included in the AIH study.
- Criteria for study selection was questioned, specifically the timeframe of studies considered for inclusion and the language that studies are published in.
 Additionally, there were questions about whether starting study inclusion in 2010 would exclude critical studies. Comments suggested that the inclusion of articles that are published in a language other than English is a deviation from typical DGA protocols.
- Comments inquired about the inclusion of injury measures in the study, suggesting that injury is not a health or physiological outcome and thus does not belong in the DGA.



Additional Comments

- ICCPUD was recognized as a useful and appropriate body to conduct this research, given the expertise of ICCPUD members on alcohol use. Additionally, the relationship between adult drinking and underage drinking was mentioned as a key reason that ICCPUD serves as the right body to oversee this research.
- Some commentors felt that this study was much needed given the substance use
 disorders and harms that they experienced or saw around them. Others suggested
 that it was not necessary to focus on alcohol given what we already know about its
 harm as well as it's perceived value to individuals and society.
- Comments suggested that there is a sufficient amount of observational data related to components of the DGA and thus a new study is not needed. Additionally, comments noted that the AIH study is replicating existing, rigorous studies, and this is unprecedented for any topic included in the DGA.
- There was interest in how the Dietary Guidelines Advisory Committee will consider the AIH study data for review and inclusion in the Scientific Report to prepare the final DGA.
- Some comments questioned the role of ICCPUD in conducting a study that they
 deemed focused on adult drinking, and how this study fits into the authority
 legislated in the STOP Act.
- Comments were made on the composition of the Scientific Review Panel. Some
 comments were very supportive of the experts named, citing their scientific
 expertise and international renown in their field. Others expressed concern about
 the citizenship of panel members and that key health outcomes were not listed as
 areas of expertise among the panel.
- Commentors requested that conflicts of interest for all involved researchers be made public, are transparent, and do not represent a conflict that would influence the research.

In addition to the Request for Information, interested parties were able to provide public comment on August 7, 2024, when ICCPUD held its Annual Stakeholder Meeting and provided an opportunity for public comments. A total of 181 individuals registered for the meeting, and 146 attended. During the public comment period, 15 individuals signed up to provide comments with 10 individuals ultimately provided comments. The feedback

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provided during this public comment period was consistent with the feedback received during the Request for Information public comment period.

As a result of these public comment opportunities, the ICCPUD Technical Review Subcommittee and Scientific Review Panel are making modifications to the scientific methodology of the AIH study. In addition, there will be another opportunity for public comment on the draft study findings in late 2024 before the study findings are finalized.