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Addressing a deadly epidemic

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This year, thousands of Wisconsin families will be devastated by the loss of a child, parent, spouse, or close friend to a horrible epidemic. Every county in the state will be affected. There is no immunization protocol currently available. While we are not alone in facing this crisis, our state is particularly vulnerable, and we can expect to experience more than our proportional share of the burden of this deadly disease.

This epidemic will not be transmitted via microbes. Instead, it will be transmitted via cans and bottles.

We expect at least 1600 people in Wisconsin to perish this year from alcohol-related illnesses and trauma. This includes many automobile passengers who will be killed without a moment's warning by drunk drivers. Our state leads the nation with the highest rates of alcohol consumption, binge drinking, and alcohol abuse.

This epidemic is getting worse rather than better. While the rest of the country experienced a 4% decline in alcohol-related driving fatalities in the most recent year for which data are available, Wisconsin had a 2% increase. At a time when our nation is struggling with an economic crisis that threatens our most important social institutions,

we in the Badger State will spend more than \$935 million covering the costs of alcohol-related diseases and accidents.

As part of our school's historic transformation into the first school of medicine and public health, we are developing new models for our academic missions that integrate traditional medical and population health/prevention approaches. But perhaps the most significant component of our transformation is our commitment to engagement with the entire state on important health issues. This includes strong non-partisan advocacy for changes in public policy that can improve the health of the people of Wisconsin.

About a year ago, the 3 University of Wisconsin (UW) Health partners—the UW School of Medicine and Public Health, UW Hospital and Clinics, and the UW Medical Foundation—launched AWARE (All Wisconsin Alcohol Risk Education). AWARE was created to build a statewide coalition that would push for new public policy to address the epidemic of alcohol abuse and increase public education and awareness on this vital topic.

To date, the response has been overwhelming. More than 50 health, law enforcement, community, education, and local government agencies have joined the organization. AWARE has developed a public policy agenda that has the potential to tackle some of the most difficult aspects of our alcohol abuse epidemic. Following are some highlights from this agenda:

Minimally Increased Beer Tax

One approach is to create additional resources for strengthening enforcement and funding programs to treat and prevent alcohol abuse via a modest increase in our state beer tax, which has not been raised in 40 years and is the third lowest in the country. State Representative Terese Berceau (D-Madison) and State Senator Fred Risser (D-Madison) have introduced a bill (A.B. 287, S.B. 209) increasing the cost of a bottle of beer by approximately 2.5 cents. This would generate nearly \$40 million annually. Earlier this year, a statewide poll, commissioned by UW Health, of 500 likely Wisconsin voters showed that a majority, 58%, support raising the beer tax.

A small increase in the beer tax would help remedy the substantial treatment gap we experience here in Wisconsin. A recent survey by the federal Substance Abuse and Mental Health Services Administration showed that in 2005-2006, 21% of Wisconsinites between ages 18 and 25 needed—but did not receive—treatment for alcohol use, compared to 17% nationally. It was the fourth consecutive year that Wisconsin's results were higher than the national average.

Stricter Drunk Driving Laws

Wisconsin must also bring its drunk-driving laws up to national standards. We are the only state in which the first operating-while-intoxicated (OWI) citation is not a criminal offense, and 1 of only 2 states to not issue a felony charge

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until the fifth OWI. We need to do more to prevent individuals from ever getting behind the wheel if they are drunk. According to the Wisconsin Department of Transportation, more than two-thirds of serious and fatal alcohol crashes are committed by individuals who have had no prior OWIs.

Sobriety Checkpoints

National research shows that the No. 1 deterrent to driving drunk is the fear of being caught. AWARE also supports legislation legalizing sobriety checkpoints. We are 1 of 12 states that currently do not allow sobriety checkpoints. These checkpoints would simply be another tool local law enforcement could decide to use.

Curbing Underage Drinking

Finally, we must focus on young people. Wisconsin had the highest rates of alcohol use in the country (49%) among high school students

in 2007 and the third highest rate of binge drinking (32%). Recent studies have shown that nearly half of those who begin drinking alcohol before age 14 become alcohol dependent at some time in their lives, compared with 9% of those who wait until age 21 to start drinking. Furthermore, medical research has shown that alcohol affects the teen brain differently. AWARE is also committed to changing the current state law that allows children at any age to drink alcohol in taverns and restaurants when their parents are present.

We encourage all of you to join AWARE and support its activities. Please remember to screen all of your patients for this deadly epidemic illness. Make sure that your patients and their families are aware of the need to do all that they can to help prevent, detect, and treat this life-threatening disease. For further information, please visit uwhealth.org/aware.

Wisconsin Medical Journal

The mission of the *Wisconsin Medical Journal* is to provide a vehicle for professional communication and continuing education of Wisconsin physicians.

The *Wisconsin Medical Journal* (ISSN 1098-1861) is the official publication of the Wisconsin Medical Society and is devoted to the interests of the medical profession and health care in Wisconsin. The managing editor is responsible for overseeing the production, business operation and contents of *Wisconsin Medical Journal*. The editorial board, chaired by the medical editor, solicits and peer reviews all scientific articles; it does not screen public health, socioeconomic or organizational articles. Although letters to the editor are reviewed by the medical editor, all signed expressions of opinion belong to the author(s) for which neither the *Wisconsin Medical Journal* nor the Society take responsibility. The *Wisconsin Medical Journal* is indexed in Index Medicus, Hospital Literature Index and Cambridge Scientific Abstracts.

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