

# Hazardous Drinking and Alcohol Use Disorder

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## Transcript

### [Introduction 0:00]

*Dr. James MacKillop:* Here's what you should know about hazardous drinking and alcohol use disorder. My name is James MacKillop, and I'm a professor at McMaster University and a clinical psychologist at St. Joseph's Healthcare Hamilton.

### [What is hazardous or risky drinking? 0:10]

*Dr. James MacKillop:* Drinking alcohol is very common globally, but when drinking exceeds certain thresholds, a person is at risk for negative health outcomes, and that's considered hazardous, or risky, drinking. These risks include both acute harms, like car accidents or injuries, and chronic harms, like cancer and liver disease. Not all people drinking at hazardous levels will experience those outcomes, but the risk is meaningfully elevated. In contrast, alcohol use disorder is the diagnosis for the medical condition in which a person's drinking is actively leading to important levels of harm or distress. Alcohol use disorder is one of the harmful outcomes for hazardous drinking. Most of the people who engage in hazardous drinking do not have alcohol use disorder, but the vast majority of individuals with alcohol use disorder drink at hazardous levels.

The exact definitions of hazardous drinking vary by public health organization. For example, Canadian guidance is the most conservative globally and recommends no more than two standard drinks per week. American guidance recommends no more than 14 drinks per week for men and seven for women. So, recommendations vary, and the precise place to draw the line changes as the science evolves.

### [How is alcohol use disorder diagnosed? 1:17]

*Dr. James MacKillop:* The diagnosis of alcohol use disorder is given by a physician or psychologist. There is no single indicator and alcohol use disorder is a syndrome with eleven symptoms, these include unsuccessfully trying to control drinking, experiencing intense alcohol cravings, or experiencing withdrawal symptoms when you stop drinking for a period. Alcoholism and alcohol addiction are not clinical diagnoses but are generally understood to reflect severe alcohol use disorder.

## [What to do if you are concerned about your alcohol consumption 1:42]

*Dr. James MacKillop:* Drinking is a major contributor to acute health consequences like car accidents, physical and sexual assaults, drownings and fires, and chronic health consequences, like liver disease and cancer. If you're concerned about drinking, a first step is to have a conversation with your family physician or another health care professional. They should have recommendations and may refer you to additional resources. There's no silver bullet for alcohol use disorder, but both behavioural and pharmaceutical treatments have been found to be effective. Best practice recommendations are to use behavioural, pharmaceutical and other strategies together to maximize success.

At McMaster, we're investigating numerous aspects of hazardous drinking and alcohol use disorder. We're using brain imaging, genomics and behavioural science to more deeply understand alcohol use disorder, and we're translating those insights into new diagnostic tests and new treatments. Moreover, we're working closely with our clinical collaborators and our patients and their families to make real progress in reducing harms and promoting recovery.

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