



Professor Dame Sally Davies
Chief Medical Officer
Department of Health
79 Whitehall
London SW1A 2NS

15 March 2013

Dear Dame Sally,

The UK Faculty of Public Health, the standard setting body for specialists in public health in the UK and professional home for over 3,300 public health professionals, and the Association of Directors of Public Health, the representative body for Directors of Public Health in the UK; are deeply concerned by reports that the Government intends to drop its plans to introduce a minimum unit price (MUP) for alcohol.

Each year, alcohol causes the admission of over a million people to hospital, is linked to 13,000 new cases of cancer and is associated with one in four deaths among young people aged 15 to 24. We urgently need to raise the price of cheap drink. Harmful drinkers and young people are likely to be the most responsive to price increases.

Alcohol is 45% more affordable than it was in 1980 and we are all - taxpayers, employers and families - paying the price for this. About 50% of all crime is alcohol related and the harm it causes costs the NHS £3.5 billion a year in England. Up to 17 million working days are lost annually through absences caused by drinking alcohol.

There is a wealth of evidence to show a direct correlation between alcohol affordability and levels of harm. The House of Commons Health Select Committee state: "increasing the price of alcohol is...the most powerful tool at the disposal of a government."¹

We would urge the Government to introduce an MUP of 50p in England, in line with Scotland. A recent report by more than 70 multidisciplinary organisations has called for a 50p MUP to be prioritised.² This policy is a targeted, evidence-based approach that will have the greatest impact on the heaviest drinkers and families devastated by alcoholism, but with minimal impact on moderate drinkers

Concrete results from Canada, which has led the way in successfully introducing a MUP, indicate that a 10% increase in the minimum price of some drinks has led to a 33% decrease in wholly alcohol related deaths. With death rates in the UK from liver disease rising by 65% over the past 20 years, the Government cannot afford to do nothing.³

Setting an MUP targets the price of the cheapest alcohol at point-of-sale. Prices in pubs are likely to be unaffected as most drinks sold in the on-trade are above a 50p MUP already. Even some sections of the drinks industry favour MUP, as major brewers agree with the majority of pub landlords, that MUP will help local pubs that are being undercut by cheap drink sold in supermarkets.

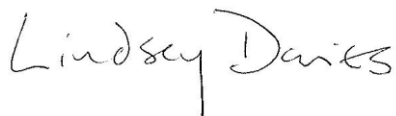
¹ <http://www.publications.parliament.uk/pa/cm200910/cmselect/cmhealth/151/15114.htm>

² Health First: An Evidence Based Alcohol Strategy for the UK <www.stir.ac.uk/media/schools/management/documents/Alcoholstrategy-updated.pdf> University of Stirling, 2013

³ The Raising of Minimum Alcohol Prices in Saskatchewan, Canada: Impacts on Consumption and implications for Public Health *The American Journal of Public Health*, Thursday 18 October 2012

We very much hope that reports about the withdrawal of minimum unit pricing for alcohol are not true, and urge the Government to act on this, especially in light of the increasing burdens on the NHS. The Prime Minister, who has previously publicly supported this life-saving measure, has the full backing of FPH and ADPH in implementing this vital measure.

Yours sincerely,



Professor Lindsey Davies CBE
President
UK Faculty of Public Health



Dr Janet Atherton
President
Association of Directors of Public Health

CC The Right Honourable Anna Soubry MP
Parliamentary Under Secretary of State for Public Health