Research Article

Some features of alcohol abuse in albania. which counts most?

Abstract

Introduction: Alcohol use has become really common among males in Albania. Until the late `90 - early `00, alcohol use was almost a male phenomenon. Lately, it is becoming even a female phenomenon.

Aim: The aim of this study is to highlight some socio-economic aspects of alcohol abuse in Albania.

Material and method: This is a retrospective study, which included 328 patients, hospitalized at two centers for treatment of alcohol use disorders at UHC "Mother Teresa". The diagnosis was: Alcohol abuse.

Results: 100% of the patients were male, due to the fact that alcohol abuse is mainly a male problem. It is very hard for female to accept the problem and therefore ask treatment, due to the greater stigma. The mean age of the patients was 42.9±10.8 years old (22-81 years old). 33.5% were among 31-40 years old. The category of the unemployed, married, disabled and patients with lower education level consume more alcohol. 79.3% of all patients of the study used to drink strong alcoholic beverages like "raki".

Conclusion: There are many aspects of socio-economic life of alcohol abuse that differ from those of other countries. If we could highlight these aspects just in time, we can intervene to reduce abusive alcohol consumption. .

Keywords: alcohol abuse, social aspects, economic aspects

Esmeralda Thoma (Hoxha),[1] Sonila Bitri,[2] Ergeta Ktona,[1] Enkelejda Shkurti,[1] Admir Nake,[1] Alma Nurce[1]
[1]Medical University of Tirana, Albania
[2]American Hospital of Tirana, Albania

Correspondence: Esmeralda Thoma (Hoxha), Lecturer at Faculty of Technical Medical Sciences, Medical University of Tirana, Rrugae "Dibrës" Nr. 371, AL1005-Tirane, Albania, Tel 00355699767811, Email esmeraldahoxha@yahoo.com

Abbreviations: DSM-5, diagnostic and statistical manual of mental disorders; AUDIT, army uniform data inquiry technique; UHC, united healthcare; UNICEF, united nations children's fund; UNFPA, united nations fund for population activities.

Introduction

Alcohol is a psychoactive substance that has dependence producing properties. The use of alcoholic beverages dates too early. As far as we know the first alcoholic drink was used at least in the year 6000 BC.[1] The use of alcohol is already a phenomenon of many societies. It is estimated that the total number of the population classified as alcohol consumers in the world goes up to 2 billion, while 76.3 million people develop alcohol use disorder.[2,3] According to DSM-5, alcohol use disorder is a chronic brain relapsing disease.[4] It is the use of alcohol, despite adverse effects.[5] Alcoholism and alcohol abuse is the result of the combination of many factors, including genetics, occupational and social environment, mental health and emotional state of the person. Both diagnosis are now included in one single diagnose according to DSM-5.[4]

Material and method

This is a retrospective cohort study that was conducted over the years 2012- 2013 in two clinics which treat alcohol use disorders: Center of Addictology and Clinical Toxicology and the Center of Alcohol Dependence at UHC "Mother Teresa". All the data were collected from clinical records of the patients admitted over this period in these two clinics. The sample size of this study was 328 patients admitted to these clinics. The diagnosis of patients was "alcohol use disorder". The diagnosis of patients was defined from anamnesis, clinical and laboratory findings and using AUDIT questionnaire. Patients included in the study were >22 years old and underwent treatment in these services for more than 24 hours. The category of patients excluded from the study were <22 years old, hospitalized for less than 24 hours, or the patients diagnosed with "alcoholic coma", who were initially hospitalized in the Intensive Care Service. Several data of these patients were collected and then they were compared with those of other authors.

The data that were used

a. General data : Age(of the patient at admission), Sex, place of residence(for at least the past five years)

b. Employment status (Employed, Unemployed, Disabled, Students, pensioners)

c. Civil status (Single, Married, Divorced, Widowed)

d. Type of alcoholic drink

e. Education (Elementary, High school, College degree, Other)

f. Time of abusive consumption of alcohol (is categorized <10 years and >10 years)

g. Age of onset of alcohol abuse

All the data are analyzed with SPSS 20.0 program.

Results

This study included 328 patients, whose mean age was 42.9±10.8

years old. The youngest was 22 years old and the oldest was 81, median results 42 (Table 1). As it is shown in Figure 1 age is presented in the category of 10 years. A total of 39 patients or 11.9% of the cases were ≤30 years old, a total of 110 cases or 33.5% of them were 31-40 years old (included female patients), 93 cases or 28.4% of them were 41-50 years old, a total of 64 cases or 19.5% of them were 51-60 years old and 22 patients or 6.7% of them were ≥61 years old. The results show predominance of the cases in age groups 31-40 years and 41-50 years old, with a statistically significant difference with other age groups ($\chi 2$ Goodness of fit=81.2 p<0:01). Age is not subject of normal distribution KS=0.009.

Table 1 Statistical summary of patients' age

Size of sample	328
The Youngest Age	22
The Oldest Age	81
Average	42.9
Median	42
Variance	117.7
Standard Deviation	10.8
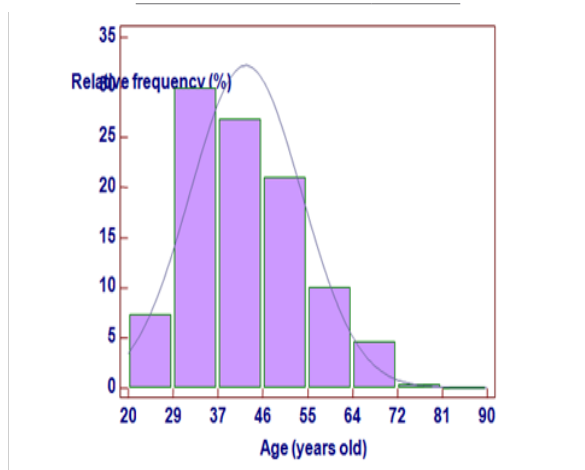
Figure 1 Histogram of patient`s age.

Sex of patients

Nearly all of the patients in this study were male: 98% vs 2%. As it is seen, the difference is statistically significant p<0.01.

## Geographical distribution of patients' residence

As it can be noticed from the graph below, the majority of the patients (39 patients or 33.2%) are from Tirana, which is the capital city of Albania with statistically significant difference from other cities. From Korca city are 20 patients (6.1%), Elbasan city 16(4.%) etc (Figure 2).

Employment status of these patients

As of the employment status shown here, a considerable number of patients in the study were unemployed -157 patients or 47.9%; 144 or 43.9%, including female patients were employed; 15 or 4.6% of the cases were pensioners; 8 or 2.4% of cases were disabled and 4 or 1.2% of the cases were students. The difference is statistically significant ($\chi 2$ Goodness of fit=368 p<0:01) (Figure 3).
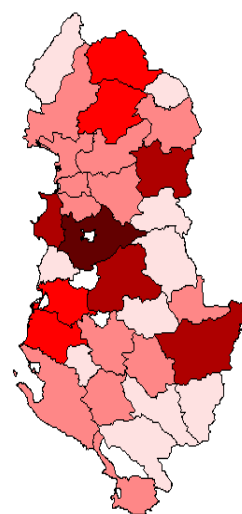
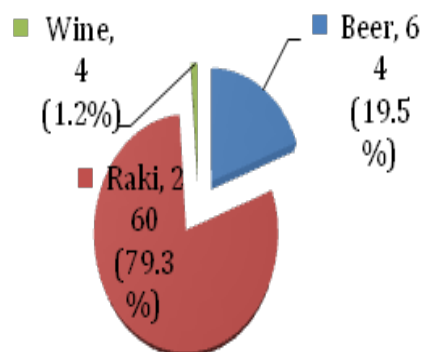**Figure 2** Geographic distribution of patients as of residence.
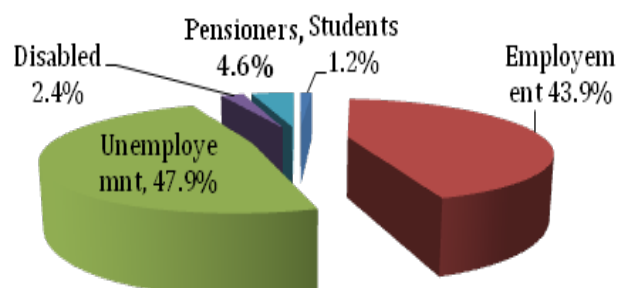
Figure 3 Patients distribution as of employment status.

Civil status

203 or 61.9% of patients were married, 83(25.3%) were single, both female patients were single, 11.0% divorced, and 0.6% were widow. The difference is statistically significant ($\chi 2$ goodness of fit=425.2 p<0.01).

Type of alcoholic drink

The most common type of drink that patients used to drink was raki, which is a traditionally kind of strong alcoholic beverage in Albania. 79.3% of all patients used to drink raki and 19.5% used to drink beer. The difference is statistically significant (($\chi 2$ goodness of fit=327.9 p<0.01) (Figure 4).

Figure 4 Type of alcoholic drink.

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Education status

Among all the patients of this study, 115 or 35.1% have elementary education, 153 or 16.8% of them have a high school graduation and 16.8% have a university degree. Female patients of the study had university degree. The difference between patients with a high school graduation is statistically significant ($\chi 2$ goodness of fit=276.6 p<0.01) as it is seen in the graphic below (Figure 5).
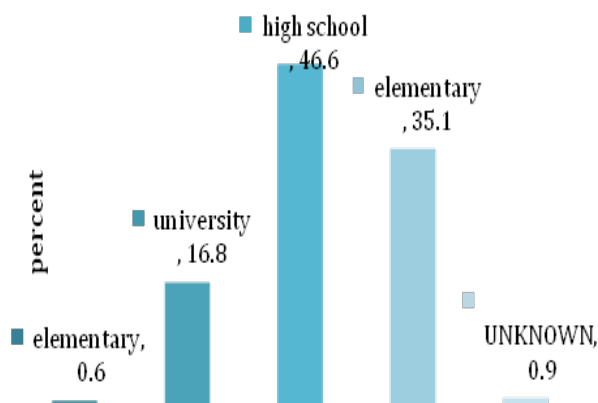

Figure 5 Education status.

Age of onset of alcohol abuse

The mean age of onset of alcohol abuse is 27.9±7.2 years old. The youngest was 13 years old and the oldest was 55 years old, median was 29 years old. Patients that started to abuse with alcoholic beverages among 21-30 years old were 58.5%. The difference is statistically significant among categories of age. ($\chi 2$ goodness of fit=359.0 p<0.01) (Table 2).

Table 2 Age of onset of alcohol abuse

Age of onset	N	%
≤20 years old	34	10.4
21-30 years old	192	58.5
31- 40 years old	82	25
41-50 years old	18	5.5
≥50 years old	2	0.6
Total	328	100

Discussion

This study observed and highlighted some aspects of alcohol use disorder patients in Albania. Some of the findings in this study are similar to those of other authors, but in our conclusions this study yielded some exceptional findings.

The findings are as follows

For example, in this study, the dominant age group is 31-40 years old (33.55), followed by the age group 41-50 years old (28.4%). In other studies, it appears that as the age is increasing, the prevalence of alcohol abuse is decreasing.[6,7] Almost all of the patients of this study were male (98%). Although the number of female that used to drink alcohol almost every day is less than 1%, according to one study performed in Albania in 2002, it is very low comparing to the number of man that drinks alcohol almost every day (41%).[8] This is mainly because the problem of alcohol abuse in our country is apparently a male phenomenon. In another study performed by INSTAT (Albania Institute of Statistics) in 2015, refers that the number of female alcohol users is almost uncountable,[9] or in an earlier study it was concluded that the ratio prevalence of alcohol use among male/female was 1:10.[10] As a matter of fact, there are no data (at least they are not published) about alcohol use, before the 2000-s, but among our population it is well known that alcohol use is a male habit inherited from the past history of our country, whereas women weren`t used to drink till lately.[8,9] This is the main reason why we actually have a few reported female abusers.[10] Female drinkers are stigmatized more, even among medical staff; women alcohol drinkers are considered as "bad girls", who will be loved or married by nobody, especially if they are single. There are no data about the number of female alcohol users being stigmatized, but in everyday talking among people, or even medical staff, this is common. Anyway, alcohol use among female is increasing lately, largely from female with higher education level, that have a good job and women living in urban areas.[8]

The majority of patients in this study live in Tirana (33.2%). We didn't calculate if this is due to the biggest population that lives here compared to other cities, or because in Tirana live the majority of alcohol abusers, or due to the fact that in Tirana is more easily to seek and to have medical assistance related to these problems (The only centers to treat alcohol abuse in Albania, are located in Tirana). Two other cities that have relatively large populations, Korca and Elbasani, have a significant number of these patients too. However these data are similar to those of other authors. Living in big cities is associated with the increase incidence of alcohol abuse and alcohol dependence.[11,12]

As for the employment status, in this study we concluded that the majority of alcohol abusers (47.9%) were unemployed. Why does this happen? First of all, we may say that this is due to the fact that the level of unemployment here in Albania is high.[13] We can easily link this finding to the fact that the most popular drinks that most of the abusers consume, raki, is much cheaper than other alcoholic beverages. Just to compare: one standard raki drink costs about 50 leke (35 cent), one standard beer 330ml costs about 100-300 leke (1-2.5 euro), not to mention that wine costs a lot more. So, unemployed people find themselves sitting for hours in coffee shops drinking and wasting time with alcohol until they become abusers, or much more dependent. A low number of patients in this study refer that they lost they job as a result of spending time with alcohol, or because of drinking.

There are too many studies that suggest the correlation between unemployment and bad habits of alcohol consumption[14–17] and have similar findings as this study. There are too many studies too, that highlight the role of marriage in drinking behaviour. Most of these studies, especially those performed in Western countries, link the marital status with the decreasing rate of alcohol consumption and there is a high number of consumers that abstain for years; on the other hand getting divorced is linked with an increasing rate of alcohol abuse[18–21] (Table 3).

The marital status in Albania doesn't seem to influence alcohol consumption in the same way it does in other countries. 61.9% of the married patients in this study had alcohol use disorders, which means that in Albania being married has a negative effect on the level of alcohol consumption. The other reason is that the rate of divorce in Albania is relatively low compared to other western countries.

Table 3 The marital status in Albania doesn't seem to influence alcohol consumption in the same way it does in other countries.

Author	Age and sex	State
Bogart et al.[19]	1,138 female aged 18-29	California and Oregon SHBA
Dar[20]	Unknown	England
Zins et al.[18]	4782 female	France

According to one report of INSTAT, the rate of divorce in Albania is increasing, but is still very low, approximately 17.8%.[22] So, if we relate the facts here, we can conclude that even though being married is negatively correlated with alcohol use and abuse, and then alcohol abuse influences a lot in domestic violence,[23] we still have low rates of divorced. Male alcohol use and abuse it is not consider a major problem from many people, mainly in rural areas, therefore it is not a reason to divorce.[22]

Meanwhile, the type of alcoholic drink that is mostly consumed differs from country to country. According to the WHO report of 2014, in Albania the most commonly alcoholic drink that is consumed and abused is raki, as is wine in France, beer in Germany, whereas in Great Britain beer, wine and strong drinks are equally consumed.[24] The reason why raki is commonly an abused alcoholic drink is due to the fact that as we mentioned above it is much cheaper than other drinks and because it is manufactured in artisanal conditions, mainly in rural areas by many people and it is used primarily for family consumption.[25]

As other studies highlighted the correlation between the educational level and alcohol use disorders, even in this study we took into account this correlation. But, differently from other western countries, where the lower the educational level is, the higher is the probability to abuse with alcohol[8,26] in our country the majority of patients had high school education 46.6%, followed by elementary school 35.1%. The mean age of onset of alcohol abuse is 27.9 years old. We couldn't compare this finding with that of other countries, because other studies are mainly focused on the time of first alcoholic drink consumed. But, this finding is almost similar to that conducted by UNICEF and UNFPA in Albania during 2008-2009.[28,29]

Conclusion

There are many aspects of socio-economic life of alcohol abusers that we were able to highlight. By taking them into consideration, we can interfere in different levels, in order to reduce abusive alcohol consumption. We highly recommend Albania needs increased awareness about education and health promotion in high schools, talking to students about the short and long term effects of alcohol. Another recommendation is that the process of manufacturing alcoholic drinks in artisanal conditions should absolutely be abandoned, because no one knows how these drinks are manufactured and in what amount. Therefore we couldn't calculate the exact amount of alcoholic beverages sold and drink as there are no statistical data for this. Beside, the conditions in which these beverages are produced in artisanal conditions are very suspicious, out of the sight of law; therefore they may contribute even more in health problems caused by unknown ingredients, or poor hygiene.

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Conflict of interest

The author declares no conflict of interest.

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