

Predictors of Binge Drinking in Elderly Americans

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BACKGROUND

The increasing trend in elderly binge drinking in the U.S. is cause for alarm. Alcohol consumption in seniors can be associated with cognitive decline and worsening of comorbidities, including hypertension, stroke, and osteoporosis. We sought to describe the demographic and clinical characteristics of elderly Americans reporting binge drinking and determine the independent predictors of binge drinking in this population.

METHODS

The 2008 Centers for Disease Control's Behavioral Risk Factor Surveillance Survey was utilized to identify a cohort of 4,815 individuals in the U.S. of age 65 or older. Demographic data and clinical history were recorded in these patients. The primary outcome of interest was self-reported binge drinking, defined as an affirmative response to the question: "How many times in the past 30 days have you had more than 5 drinks (in men) or more than 4 drinks (in women) on an occasion?"

	No Binge Drinking (n=4,349)	Binge Drinking (n=466)	p value
<i>Demographics</i>			
Age (years)	74 ± 7	71 ± 6	<0.001
Male	45.3%	64.4%	<0.001
Hispanic	2.2%	5.2%	<0.001
Veteran Status	29.0%	34.5%	0.014
Married	54.7%	52.9%	0.452
College Education	66.0%	58.3%	0.001
Employed	18.0%	22.2%	0.028
Income < \$25,000	25.6%	32.0%	0.005
Health Insurance	98.8%	98.5%	0.594
Financial Barriers to Care	2.6%	4.3%	0.041
Medical checkup within the past 2 years	91.4%	88.6%	0.046
<i>Medical History</i>			
Smoking	15.7%	24.0%	<0.001
Body Mass Index			0.005
Normal	41.9%	34.4%	
Overweight	40.1%	46.8%	
Obese	17.9%	18.8%	
Coronary artery disease	12.0%	7.8%	0.008
Diabetes mellitus	11.4%	12.2%	0.593
Prior stroke	5.8%	4.9%	0.466
Prior myocardial infarction	10.4%	7.7%	0.067
Anxiety disorder	7.3%	6.0%	0.315
Depressive disorder	10.7%	12.4%	0.254

RESULTS

Among 4,815 elderly patients studied, a total of 466 (9.7%) patients reported binge drinking while 4,349 (90.3%) patients reported no history of binge drinking. Elderly patients reporting binge drinking were younger and were more often male, of Hispanic ethnicity, and with veteran status. They were less likely to be college educated and more likely to be employed with lower salaries. While no difference in health insurance was noted between the two groups, binge drinkers reported more financial barriers to medical with lower rates of medical checkup within the past two years. Elderly patients reporting binge drinking had higher rates of smoking, higher rates of obesity and overweight body mass index, lower rates of coronary artery disease, and no difference in rates of diabetes mellitus, prior stroke, and prior myocardial infarction. Binge drinking was not associated with anxiety or depressive disorders in this population.

Multivariate Analysis of Predictors of Binge Drinking in Elderly Americans

In multivariate analysis, independent predictors of binge drinking in elderly patients included age, male gender, smoking, college education, annual income < \$25,000, and coronary artery disease.

	OR	95%CI
Age (per year)	0.94	0.92-0.96
Male gender	2.16	1.59-2.93
Smoking	1.54	1.14-2.07
College Education	0.72	0.56-0.93
Annual income < \$25,000	1.43	1.08-1.89
Coronary artery Disease	0.56	0.37-0.85

CONCLUSIONS

Older age, male gender, smoking, lack of college education, lower income, and absence of coronary artery disease are independently associated with higher rates of binge drinking among elderly adults in the United States.

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