



Public Health
England

Local Alcohol Profiles for England 2017 user guide

About Public Health England

Public Health England's mission is to protect and improve the nation's health and to address inequalities through working with national and local government, the NHS, industry and the voluntary and community sector. PHE is an operationally autonomous executive agency of the Department of Health.

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1. Background

This document outlines the methods used by the Risk Factors Intelligence (RFI) team, to produce a national alcohol dataset, the Local Alcohol Profiles for England (LAPE).

Alcohol use has health and social consequences borne by individuals, their families, and the wider community. In 2006, the former North West Public Health Observatory gathered routine data and intelligence from a range of sources (including the Department of Health and the Home Office), to provide a national indicator set intended to inform and support local, sub-national and national alcohol policies. These indicators provided measures to help prioritise and target local areas of concern.

The profiles (<http://fingertips.phe.org.uk/profile/local-alcohol-profiles>) contain 20+ alcohol-related indicators for the following area types/geographies where possible: lower tier local authorities (district and unitary authority), upper tier local authorities (county and unitary authority), Public Health England centre, government office region, England, lower tier deprivation decile, upper tier deprivation decile, Office for National Statistics (ONS) group and ONS sub group.

2. Key changes to the Local Alcohol Profiles for England 2017

There have been several key changes to the methodologies used to calculate indicators presented in the Local Alcohol Profiles for England 2017. These are summarised in this section; more detailed descriptions of the methodologies used to create individual indicators are available within the Definitions tab present within each indicator on the Local Alcohol Profiles for England section of Fingertips (<https://fingertips.phe.org.uk/profile/local-alcohol-profiles>).

2.1 Years of life lost due to alcohol-related conditions

In Feb 2017 a new measure '1.02 Years of life lost due to alcohol-related conditions' replaced '1.01 Months of life lost due to alcohol'. The new indicator uses a method which is consistent with other Public Health England indicators based on premature mortality (such as those in the Public Health Outcomes Framework).

2.2 Measuring alcohol sales and consumption

In March 2017 eight new indicators measuring alcohol sales and consumption were added under a new domain named 'Availability and Consumption'. The eight new indicators are as follows:

- off-trade sales of alcohol per head (all alcohol sales, wine sales, beer sales, spirits sales)
- density of licensed premises per km²
- % Drinking above CMO guidelines (Upper Tier only)
- % binge drinkers (Upper Tier only)
- % abstainers (Upper Tier only).

2.3 Data correction applicable to 3 indicators

An error was discovered in the age-group data which was published in May 2016: '10.06 Admission episodes for alcohol-related conditions (Narrow) - Under 40s', '10.07 Admission episodes for alcohol-related conditions (Narrow) - 40-64 yrs', '10.08 Admission episodes for alcohol-related conditions (Narrow) - Over 65s'. In May 2017 a fully revised back-series was produced replacing all previously published data. The error was caused by incorrectly standardising the calculated values from the filtered age-groups against all-age denominators. Therefore the revised values are significantly higher than the May 2016 values.

2.4 Replacing person-based indicators with admission-based indicators

In May 2017, two new indicators were added: '5.02 - Admission episodes for alcohol-specific conditions - Under 18s' & '6.02 - Admission episodes for alcohol-specific conditions'. These indicators had previously been expressed in terms of the number of people that were admitted to hospital. In response to user feedback ([Results of the LAPE User Survey 2016](#)), the LAPE indicators have been simplified and are now all expressed in terms of the number of admissions (where individuals may be counted more than once per year).

Correspondingly, indicators '7.01 Persons admitted to hospital for alcohol-related conditions (Broad)' & '8.01 Persons admitted to hospital for alcohol-related conditions (Narrow)' have been dropped from the profiles.

2.5 Minor revision to hospital admission indicators

In May 2017, a number of revisions were made to the hospital admission indicators leading to minor changes in the resulting values. For each indicator a fully revised back-series has been produced. More specifically, the following indicators have been revised to remove admissions with an 'Unknown' Government Office Region of residence which has led to a slight decrease in the England total values. In addition, more recent geographic boundaries have been applied (updated to 2013 lower / upper tier local authority boundaries):

- 9.01 Admission episodes for alcohol-related conditions (Broad)
- 9.03 Admission episodes for alcohol-related cardiovascular disease conditions (Broad)
- 9.04 Admission episodes for alcohol-related mental and behavioural disorders due to use of alcohol condition (Broad)
- 9.05 Admission episodes for alcohol-related alcoholic liver disease condition (Broad)
- 10.01 Admission episodes for alcohol-related conditions (Narrow)
- 10.03 Admission episodes for alcohol-related unintentional injuries conditions (Narrow)
- 10.04 Admission episodes for alcohol-related mental and behavioural disorders due to use of alcohol condition (Narrow)
- 10.05 Admission episodes for alcohol-related intentional self-poisoning by and exposure to alcohol condition (Narrow)

In addition to updating the local authority boundaries, the Incidence rate of alcohol-related cancer indicator (13.01) has been revised to include retrospective updates to the underlying dataset.

2.6 Change to alcohol-specific deaths involving alcohol poisonings

Until 2017 all deaths where alcohol poisoning was mentioned on the death certificate have been included in both PHE's alcohol-specific mortality measure and the alcohol-related mortality measure. The alcohol-specific measure is designed to count all deaths which have been wholly and exclusively caused by alcohol consumption whereas the alcohol related measure includes a proportion of deaths from conditions which are known to be partially attributable to alcohol.

New analysis from the Office for National Statistics (ONS) has revealed that, in the majority of cases where alcohol poisoning is mentioned on the death certificate, drug poisoning is also mentioned. Hence it is not possible to conclude that all deaths involving alcohol poisoning have exclusively been caused by alcohol consumption. As a result of this new finding, and to align the PHE definition of alcohol-specific mortality with the ONS definition, deaths involving alcohol poisoning have been removed from the alcohol-specific measure.

Since the alcohol-related measure is designed to estimate the total number of deaths which could be attributed to alcohol, the alcohol poisoning deaths have not been removed from this measure. With other partially attributable conditions, it is not possible to know which specific deaths are related to alcohol and so a fraction is applied to the total (known as the alcohol attributable fraction). However, with the alcohol poisoning deaths, we know that each of these deaths involved alcohol to some extent. As a result all these deaths are included in the alcohol-related measure and there is no need to apply a fraction.

3. Alcohol-attributable fractions

3.1 Alcohol-attributable fractions used to calculate alcohol-related mortality and hospital admissions

Attributable fraction values, or population attributable fractions, are the proportion of a health condition or external cause that is attributable to the exposure of a specific risk factor (such as alcohol) in a given population. Local Alcohol Profiles for England use attributable fractions to estimate the number of deaths and hospital admissions that are related to alcohol consumption. Attributable fractions may be estimated directly, for example, by assigning specific attributable fractions to external causes of morbidity and mortality. Alternatively, indirectly estimated attributable fractions can be derived from the relative risk associated with the exposure of interest, in combination with information about the prevalence of the exposure in the target population. The population attributable fraction calculation assumes a causal association between risk factor and outcome, meaning that the attributable fraction can also be viewed as the expected proportional reduction in cases of an outcome arising in the population as a result of removing the exposure, in this case, alcohol.

Appendix 1 shows the attributable fractions used to estimate the number of alcohol-related deaths and hospital admissions reported in Local Alcohol Profiles for England 2015. These alcohol-attributable fractions were updated in 2014 and are taken from Jones et al. (2014).¹ Sex and age specific alcohol-attributable fractions reflect the difference in exposure, prevalence and physiological differences between males and females and between age groups. The table includes outcomes with a negative attributable fraction where low levels of alcohol consumption were found to have a protective effect, such as diabetes mellitus type II (Appendix 1). Outcomes where alcohol has a protective effect are not included when the alcohol-attributable fractions are applied to mortality and Hospital Episode Statistics data.

3.2 Alcohol-specific conditions

Alcohol-specific conditions include those conditions where alcohol is causally implicated in all cases of the condition; for example, alcohol-induced behavioural disorders and alcohol-related liver cirrhosis. The alcohol-attributable fraction is 1.0 because all cases (100%) are caused by alcohol.

¹ Jones L and Bellis MA (2014). *Updating England-specific alcohol-attributable fractions*. Liverpool: Centre for Public Health, Liverpool John Moores University. Available at: <http://www.cph.org.uk/wp-content/uploads/2014/03/24892-ALCOHOL-FRACTIONS-REPORT-A4-singles-24.3.14.pdf> [Accessed 06. Oct 2017]

3.3 Alcohol-related conditions

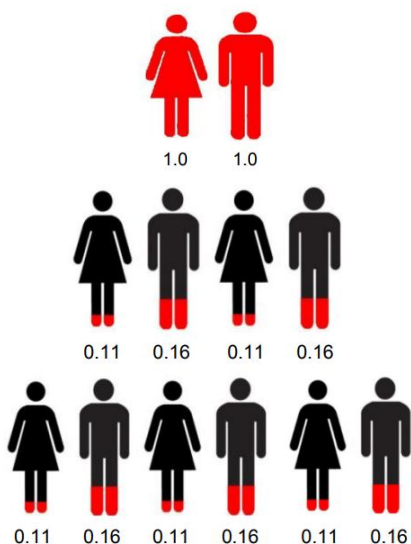
Alcohol-related conditions include all alcohol-specific conditions, plus those where alcohol is causally implicated in some but not all cases of the outcome, for example hypertensive diseases, various cancers and falls. The attributable fractions for alcohol-related outcomes used here range from between 0 and less than 1.0. For example, the alcohol-attributable fraction for mortality from pneumonia among men aged 75 and over is 0.10 because the latest epidemiological data suggest that 10% of pneumonia cases among this population are due to alcohol¹. Outcomes where alcohol has a protective effect (i.e. the fraction is less than 0) are not included when the alcohol-attributable fractions are applied to mortality and Hospital Episode Statistics data.

An alcohol-attributable fraction is the proportion of a condition caused by alcohol.

An alcohol-attributable fraction of 1.0 = 100% of cases are caused by alcohol.

An alcohol-attributable fraction of 0.25 = 25% of cases are caused by alcohol.

The total alcohol-related admission/mortality episodes for an area are the sum of episode-specific data. An illustration of this summation is given below.



The alcohol-attributable fraction for alcoholic liver disease is 1.0 (Appendix 1). Summing two people admitted for ethanol poisoning will give a total of 2.0 alcohol-related admission episodes.

The alcohol-attributable fraction for colorectal cancer for the population aged 16 to 24 years is 0.16 for males and 0.11 for females (Appendix 1). Summing five males and five females aged 16 to 24 years admitted for colorectal cancer will give a total of 1.35 alcohol-related admission episodes.

3.4 Alcohol-attributable fractions for children

Alcohol-attributable fractions for children (aged under 16 years) are included for alcohol-specific diagnoses (where the alcohol-attributable fraction is 1.0) and for low birth weight (where the alcohol-attributable fraction is 0.05, Appendix 1). For other conditions, alcohol-attributable fractions were not available for children.

4. Processing ONS Mortality Data

4.1 Adjusting for the impact of ICD-10 coding changes

Two correction factors have been applied to alcohol attributable fractions to account for changes in ICD-10 coding in 2011 and 2014. These correction factors adjust trend data to allow a proper comparison between current data and that from previous time periods. These resources from the PHE website give guidance on the application of these correction factors or 'comparability ratios':

- Using ONS mortality data – taking account of changes to cause of death coding from 2011
- Using ONS mortality data – taking account of changes to cause of death coding from 2014

| Condition | ICD10 code(s) | 0-15 | | 16-24 | | 25-34 | | 35-44 | | 45-54 | | 55-64 | | 65-74 | | 75+ | |
|---|----------------------|------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| | | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| Partially attributable conditions - chronic conditions | | | | | | | | | | | | | | | | | |
| Infectious and parasitic diseases | | | | | | | | | | | | | | | | | |
| Tuberculosis | A15-A19 | 0.00 | 0.00 | 0.30 | 0.19 | 0.33 | 0.17 | 0.34 | 0.21 | 0.35 | 0.22 | 0.35 | 0.20 | 0.31 | 0.14 | 0.22 | 0.11 |
| Malignant neoplasm of: | | | | | | | | | | | | | | | | | |
| Lip, oral cavity and pharynx | C00-C14 | 0.00 | 0.00 | 0.53 | 0.38 | 0.44 | 0.35 | 0.44 | 0.42 | 0.46 | 0.43 | 0.47 | 0.40 | 0.40 | 0.31 | 0.29 | 0.24 |
| Oesophagus | C15 | 0.00 | 0.00 | 0.58 | 0.49 | 0.61 | 0.48 | 0.61 | 0.53 | 0.63 | 0.53 | 0.63 | 0.51 | 0.60 | 0.45 | 0.52 | 0.38 |
| Colorectal | C18-C20, C21 | 0.00 | 0.00 | 0.16 | 0.11 | 0.18 | 0.12 | 0.18 | 0.13 | 0.19 | 0.14 | 0.19 | 0.13 | 0.17 | 0.11 | 0.13 | 0.11 |
| Liver and intrahepatic bile ducts | C22 | 0.00 | 0.00 | 0.15 | 0.11 | 0.17 | 0.11 | 0.17 | 0.12 | 0.18 | 0.13 | 0.18 | 0.12 | 0.16 | 0.10 | 0.12 | 0.11 |
| Larynx | C32 | 0.00 | 0.00 | 0.35 | 0.25 | 0.39 | 0.23 | 0.39 | 0.28 | 0.41 | 0.29 | 0.41 | 0.27 | 0.36 | 0.21 | 0.28 | 0.17 |
| Breast | C50 | 0.00 | 0.00 | 0.00 | 0.12 | 0.00 | 0.13 | 0.00 | 0.14 | 0.00 | 0.15 | 0.00 | 0.14 | 0.00 | 0.12 | 0.00 | 0.11 |
| Diabetes mellitus | | | | | | | | | | | | | | | | | |
| Diabetes mellitus (type II) | E11 | 0.00 | 0.00 | -0.04 | -0.20 | -0.04 | -0.21 | -0.04 | -0.22 | -0.04 | -0.22 | -0.03 | -0.22 | -0.04 | -0.20 | -0.03 | -0.15 |
| Diseases of the nervous system | | | | | | | | | | | | | | | | | |
| Epilepsy and Status epilepticus | G40-G41 | 0.00 | 0.00 | 0.32 | 0.22 | 0.35 | 0.20 | 0.35 | 0.24 | 0.37 | 0.25 | 0.37 | 0.23 | 0.33 | 0.18 | 0.24 | 0.15 |
| Cardiovascular disease | | | | | | | | | | | | | | | | | |
| Hypertensive diseases | I10-I15 | 0.00 | 0.00 | 0.22 | 0.26 | 0.25 | 0.17 | 0.25 | 0.30 | 0.27 | 0.31 | 0.27 | 0.25 | 0.23 | 0.09 | 0.15 | -0.06 |
| Ischaemic heart disease | I20-I25 | 0.00 | 0.00 | -0.10 | -0.10 | -0.10 | -0.08 | -0.10 | -0.10 | -0.10 | -0.10 | -0.10 | -0.09 | -0.11 | -0.07 | -0.10 | -0.02 |
| Cardiac arrhythmias | I47-I48 | 0.00 | 0.00 | 0.15 | 0.10 | 0.17 | 0.11 | 0.17 | 0.12 | 0.18 | 0.13 | 0.18 | 0.12 | 0.16 | 0.10 | 0.12 | 0.11 |
| Haemorrhagic stroke - mortality | I60-I62, I69.0-I69.2 | 0.00 | 0.00 | 0.18 | 0.25 | 0.20 | 0.22 | 0.20 | 0.27 | 0.21 | 0.28 | 0.22 | 0.26 | 0.19 | 0.19 | 0.15 | 0.13 |
| Haemorrhagic stroke - morbidity | I60-I62, I69.0-I69.2 | 0.00 | 0.00 | 0.20 | -0.11 | 0.22 | -0.14 | 0.23 | -0.11 | 0.24 | -0.10 | 0.24 | -0.12 | 0.21 | -0.16 | 0.17 | -0.15 |
| Ischaemic stroke - mortality | I63-I66, I69.3-I69.4 | 0.00 | 0.00 | 0.01 | -0.09 | 0.02 | -0.14 | 0.02 | -0.09 | 0.03 | -0.08 | 0.04 | -0.10 | 0.01 | -0.16 | 0.00 | -0.14 |
| Ischaemic stroke - morbidity | I63-I66, I69.3-I69.4 | 0.00 | 0.00 | 0.00 | -0.06 | 0.01 | -0.07 | 0.01 | -0.06 | 0.02 | -0.06 | 0.03 | -0.07 | 0.00 | -0.07 | -0.01 | -0.06 |
| Oesophageal varices - mortality | I85 | 0.00 | 0.00 | 0.70 | 0.64 | 0.73 | 0.62 | 0.74 | 0.68 | 0.76 | 0.69 | 0.76 | 0.66 | 0.70 | 0.58 | 0.55 | 0.57 |
| Oesophageal varices - morbidity | I85 | 0.00 | 0.00 | 0.44 | 0.31 | 0.47 | 0.41 | 0.48 | 0.38 | 0.50 | 0.40 | 0.50 | 0.41 | 0.44 | 0.42 | 0.33 | 0.51 |
| Respiratory infections | | | | | | | | | | | | | | | | | |
| Pneumonia | J10.0, J11.0, | 0.00 | 0.00 | 0.12 | 0.07 | 0.14 | 0.06 | 0.14 | 0.08 | 0.15 | 0.08 | 0.15 | 0.08 | 0.13 | 0.05 | 0.10 | 0.03 |

| Condition | ICD10 code(s) | 0-15 | | 16-24 | | 25-34 | | 35-44 | | 45-54 | | 55-64 | | 65-74 | | 75+ | |
|---|-----------------------------------|------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| | | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| | J12- J15, J18 | | | | | | | | | | | | | | | | |
| Digestive disease | | | | | | | | | | | | | | | | | |
| Unspecified liver disease - mortality | K73, | 0.00 | 0.00 | 0.70 | 0.64 | 0.73 | 0.62 | 0.74 | 0.68 | 0.76 | 0.69 | 0.76 | 0.66 | 0.70 | 0.58 | 0.55 | 0.57 |
| Unspecified liver disease - morbidity | K74 | 0.00 | 0.00 | 0.44 | 0.31 | 0.47 | 0.41 | 0.48 | 0.38 | 0.50 | 0.40 | 0.50 | 0.41 | 0.44 | 0.42 | 0.33 | 0.51 |
| Cholelithiasis (gall stones) | K80 | 0.00 | 0.00 | -0.25 | -0.17 | -0.28 | -0.17 | -0.28 | -0.19 | -0.30 | -0.19 | -0.30 | -0.18 | -0.27 | -0.16 | -0.21 | -0.14 |
| Acute and chronic pancreatitis | K85, K86.1 (excl. K85.2) | 0.00 | 0.00 | 0.35 | 0.17 | 0.39 | 0.14 | 0.40 | 0.20 | 0.43 | 0.21 | 0.43 | 0.18 | 0.35 | 0.12 | 0.20 | 0.10 |
| Pregnancy and childbirth | | | | | | | | | | | | | | | | | |
| Spontaneous abortion | O03 | 0.00 | 0.00 | 0.00 | 0.08 | 0.00 | 0.08 | 0.00 | 0.11 | 0.00 | 0.11 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Low birth weight | P05- P07 | 0.05 | 0.05 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Partially attributable conditions - acute conditions | | | | | | | | | | | | | | | | | |
| Unintentional injuries | | | | | | | | | | | | | | | | | |
| Road/pedestrian traffic accidents - mortality | § | 0.00 | 0.00 | 0.42 | 0.25 | 0.46 | 0.22 | 0.39 | 0.22 | 0.41 | 0.23 | 0.28 | 0.14 | 0.16 | 0.07 | 0.06 | 0.03 |
| Road/pedestrian traffic accidents - morbidity | | 0.00 | 0.00 | 0.28 | 0.17 | 0.31 | 0.15 | 0.26 | 0.15 | 0.27 | 0.15 | 0.19 | 0.09 | 0.11 | 0.05 | 0.04 | 0.02 |
| Poisoning - mortality | X40- X49 | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Poisoning - morbidity | (excl. X45) | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |
| Fall injuries - mortality | W00- W19 | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Fall injuries - morbidity | | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |
| Fire injuries - mortality | X00- X09 | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Fire injuries - morbidity | | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |
| Drowning - mortality | W65- W74 | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Drowning - morbidity | | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |
| Other unintentional injuries - mortality | Rest of 'V' | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Other unintentional injuries - morbidity | series §§ | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |

| Condition | ICD10 code(s) | 0-15 | | 16-24 | | 25-34 | | 35-44 | | 45-54 | | 55-64 | | 65-74 | | 75+ | |
|--|-------------------|------|------|-------|------|-------|------|-------|------|-------|------|-------|------|-------|------|------|------|
| | | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| Intentional injuries | | | | | | | | | | | | | | | | | |
| Intentional self-harm – mortality | X60-X84, | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Intentional self-harm - morbidity | Y87.0 (excl. X65) | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |
| Event of undetermined intent - mortality | Y10-Y34, | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Event of undetermined intent - morbidity | Y87.2 (excl. Y15) | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |
| Assault - mortality | X85-Y09, | 0.00 | 0.00 | 0.32 | 0.18 | 0.37 | 0.17 | 0.37 | 0.20 | 0.40 | 0.19 | 0.38 | 0.14 | 0.26 | 0.08 | 0.12 | 0.04 |
| Assault - morbidity | Y87.1 | 0.00 | 0.00 | 0.14 | 0.08 | 0.17 | 0.08 | 0.16 | 0.09 | 0.18 | 0.08 | 0.17 | 0.06 | 0.12 | 0.04 | 0.05 | 0.02 |

* ICD10 codes T51.0, T51.1 and T51.9 apply for alcohol-related mortality only

§ = V021-V029, V031-V039, V041-V049, V092, V093, V123-V129, V133-V139, V143-V149, V194-V196, V203-V209, V213-V219, V223-V229, V233-V239, V243-V249, V253-V259, V263-V269, V273-V279, V283-V289, V294-V299, V304-V309, V314-V319, V324-V329, V334-V339, V344-V349, V354-V359, V364-V369, V374-V379, V384-V389, V394-V399, V404-V409, V414-V419, V424-V429, V434-V439, V444-V449, V454-V459, V464-V469, V474-V479, V484-V489, V494-V499, V504-V509, V514-V519, V524-V529, V534-V539, V544-V549, V554-V559, V564-V569, V574-V579, V584-V589, V594-V599, V604-V609, V614-V619, V624-V629, V634-V639, V644-V649, V654-V659, V664-V669, V674-V679, V684-V689, V694-V699, V704-V709, V714-V719, V724-V729, V734-V739, V744-V749, V754-V759, V764-V769, V774-V779, V784-V789, V794-V799, V803-V805, V811, V821, V830-V833, V840-V843, V850-V853, V860-V863, V870-V878, V892.

§§ = V01, V090, V091, V099, V100-V109, V110-V119, V120-122, V130-132, V140-V142, V150-V159, V160-V169, V170-V179, V180-V189, V191-V193, V20-V28: 0.1–0.2; V290-V293, V30-V38: 0.1–0.2; V390-V393, V40-V48: 0.1–0.2; V490-V493, V50-V58: 0.1–0.2; V590-V593, V60-V68: 0.1–0.2; V690-V693, V70-V78: 0.1–0.2; V790-V793, V800, V801, V806–V809, V810, V812–V819, V820, V822–V829, V834–V839, V844–V849, V854–V859, V864–V869, V879, V88, V884–V889, V890, V891, V893–V899, V90-V94, V95-V97, V98-V99, W20-W52, W75-W84, W85–W99, X10-X19, X20-X29, X30-X33, X50-X57, X58, X59, Y40-Y84 Y85, Y86, Y88, Y89