



**RESEARCH SUMMARY**  
Date Compiled: April 2026

**Key takeaways from included research:**

- In a 2024 national survey of U.S. adults who drink alcohol, about half (52%) said they noticed the alcohol warning label and only 27% said they had read it in the past month, with very few able to correctly recall all the warning topics. The findings suggest the current warning label, unchanged since 1989, does not effectively engage consumers and needs to be updated and redesigned to ensure they are more visible and effective.
- In a Brazilian study of 4,280 parent–adolescent pairs, researchers found that substance use patterns were often similar between parents and teens, especially among families where both abstained. However, authoritative parenting reduced teens’ risk of using multiple substances, even when parents were high-risk, while permissive and neglectful parenting styles offered no protection.
- Using data from the Canadian Community Health Survey linked to national death records, researchers studied adults age 50 and older who drank at least monthly to examine the relationship between binge drinking and mortality. Most did not binge drink, but those who binge drank weekly or more had a higher risk of death, while those who did not binge drink had significantly lower mortality risk, even after accounting for demographic and health factors. The findings show that frequent binge drinking increases death risk among older adults and highlight the need for targeted screening and prevention efforts.
- Researchers studied how occasional heavy drinking affects people with fatty liver disease and whether it is linked to liver damage. They found that people with fatty liver disease who binge drink at least once a month are much more likely to have serious liver scarring, and counting these people differently would greatly increase the number classified as having alcohol-related liver disease.

## **CONSUMER ENGAGEMENT WITH THE US ALCOHOL HEALTH WARNING: A NATIONALLY REPRESENTATIVE STUDY**

April 2026

**Background:** The US has had the same health warning on alcohol containers since 1989. We sought to estimate consumer noticing, reading, and recall of the current US alcohol health warning.

**Methods:** We recruited a nationally representative sample of 1,036 US alcohol consumers ages 21 + years. Participants completed an online survey in 2024 that assessed whether they had noticed or read the current US alcohol health warning, as well as aided recall of the topics in the warning. Analyses used multivariable logistic regression to examine correlates of reading the warning.

**Results:** About half of participants (52 %) reported noticing the alcohol health warning the last time they saw an alcohol container and 27 % reported reading the warning in the past month. Reading the warning was more common among Black people (vs. white, 43 % vs. 23 %,  $p = 0.02$ ). When prompted with a list of possible warning topics, only 4 % of participants correctly recalled all five topics in the warning. Most (60 %) recalled that the warning discussed pregnancy, but less than half recalled the remaining topics in the warning (46 % driving a car, 44 % operating machinery, 41 % birth defects, and 33 % health problems). Recall was modestly higher among those who read the warning in the past month (improvements of 5–16 percentage points) compared to those who did not. However, fewer than two-thirds of people who said they had read the warning recalled each topic.

**Conclusions:** The current US alcohol warning fails to actively engage many alcohol consumers. The US should require new, rotating alcohol warnings designed to heighten engagement and better inform consumers.

**Source:** Hall, M. G., Ruggles, P. R., Chelius, C., Lee, C. J., Whitesell, C., Lazard, A. J., ... & Grummon, A. H. (2026). Consumer engagement with the US alcohol health warning: A nationally representative study. *Addictive Behaviors*, 108586. <https://doi.org/10.1016/j.addbeh.2025.108586>

## **DOES THE APPLE FALL FAR FROM THE TREE? WHEN PARENTING STYLES DISRUPT THE INTERGENERATIONAL PATTERN OF SUBSTANCE USE**

March 2026

### **Abstract**

This study investigates whether parenting styles can buffer the intergenerational transmission of substance use. Using a person-centered analytic strategy with 4,280 adolescent–parent dyads in Brazil, we applied Latent Class Analysis to identify substance use profiles in both generations and modeled their association using Latent Transition Analysis. Parental and adolescent profiles were strongly aligned, especially among abstainers. However, this similarity was not deterministic: authoritative parenting significantly reduced adolescents' likelihood of polysubstance use – even among high-risk parents. Authoritarian parenting also reduced this risk but increased alcohol-specific transmission. Permissive and neglectful styles showed no protective effects. These findings underscore the role of parenting style and highlight the value of family-based interventions to disrupt intergenerational substance use patterns.

**Source:** Sanchez, Z., Caetano, S., Valente, J. Y., Soares-Santos, L. E., & Cogo-Moreira, H. (2026). Does the apple fall far from the tree? when parenting styles disrupt the intergenerational pattern of substance use. *Addictive Behaviors*, 108567. <https://doi.org/10.1016/j.addbeh.2025.108567>

## **BINGE DRINKING AND MORTALITY AMONG OLDER ADULTS: FINDINGS FROM THE CANADIAN COMMUNITY HEALTH SURVEY LINKED TO THE CANADIAN VITAL STATISTICS DEATH DATABASE**

March 2026

**Background:** Binge drinking is a growing public health concern among older adults, yet research has disproportionately focused on younger adults. The relationship between binge drinking and mortality among older adults represents a critical research gap.

**Objectives:** (1) To examine the association between binge drinking frequency and mortality among older adults; (2) To identify whether this relationship is attenuated by controlling for various sociodemographic and health factors.

**Methods:** Data were drawn from the 2005-2014 Canadian Community Health Survey linked to the Canadian Vital Statistics Death Database. The final sample was restricted to adults aged 50 and older who reported consuming an alcoholic drink at least once per month (n = 129,470). A series of Cox regression models was conducted to examine the associations between binge drinking and other potential covariates with the time to all-cause mortality.

**Results:** Most of the sample did not engage in binge drinking (60.1%), while 21.2% engaged in binge drinking less than once per month, 10.7% engaged in binge drinking one to three times per month, and 8.0% engaged in binge drinking once per week or more. Those who had never engaged in binge drinking in the preceding year had significantly lower mortality risk (HR = 0.81; 95% CI, 0.74-0.90; p < .0001) compared to those who engaged in binge drinking once a week or more after sociodemographics and health-related covariates were taken into account.

**Conclusion:** Binge drinking frequency is associated with an increased mortality risk among older adults. Targeted interventions and screening campaigns are needed to address binge drinking among older adults.

**Source:** MacNeil, A., Lung, Y., & Fuller-Thomson, E. (2026). Binge drinking and mortality among older adults: Findings from the Canadian Community Health Survey linked to the Canadian Vital Statistics Death database. *Alcohol*. <https://doi.org/10.1016/j.alcohol.2026.02.002>

## **EPISODIC HEAVY DRINKING AND IMPLICATIONS FOR STEATOTIC LIVER DISEASE NOMENCLATURE: A NATIONAL CROSS-SECTIONAL STUDY**

April 2026

**Background & Aims:** Federal agencies define heavy drinking by average increased or episodic heavy alcohol consumption, yet steatotic liver disease (SLD) nomenclature only captures average alcohol consumption to define subcategories. We evaluated episodic heavy drinking among SLD subcategories and its association with liver fibrosis.

**Methods:** We utilized the 2017 to 2023 National Health and Nutrition Examination Survey (NHANES) including adults with vibration-controlled transient elastography data. Significant and advanced liver fibrosis were liver stiffness  $\geq 8$  and  $\geq 12$  kPa. Episodic heavy drinking was  $\geq 4$  drinks (women) and  $\geq 5$  (men) on any day, at least once per month. Multivariable logistic regression (adjusted for age, sex, average alcohol consumption) analyzed the association of episodic heavy drinking with liver fibrosis in SLD groups.

**Results:** Among 8006 individuals, 4571 had SLD: 3969 had metabolic dysfunction-associated steatotic liver disease (MASLD), 373 had metabolic and alcohol-associated liver disease (MetALD), and 144 had alcohol-associated liver disease (ALD). Among patients with MASLD, 632 (15.9%) had episodic heavy drinking, which was associated with significant (adjusted odds ratio, 1.69; 95%

confidence interval [CI], 1.11–2.58) and advanced (adjusted odds ratio, 2.76; 95% CI, 1.58–4.80) liver fibrosis. Adjusted weighted-prevalence of significant liver fibrosis among MASLD with episodic heavy drinking (23.6%; 95% CI, 17.6%–29.6%) was higher than MASLD without episodic heavy drinking (15.6%; 95% CI, 13.5%–17.6%). Subgroup prevalence using consensus nomenclature vs including episodic heavy drinking as MetALD or ALD decreased the weighted prevalence of MASLD (48.0%; 95% CI, 46.0%–50.0% to 40.4%; 95% CI, 38.5%–42.4%), increased MetALD (5.3%; 95% CI, 4.6%–6.1% to 12.9%; 95% CI, 11.9%–13.9%), whereas ALD was similar (1.9%; 95% CI, 1.5%–2.3% to 2.1%; 95% CI, 1.7%–2.5%).

**Conclusions:** Episodic heavy drinking is prevalent in MASLD and associated with 3-fold higher odds of advanced liver fibrosis. Reclassifying these patients to MetALD would more than double the estimated prevalence of MetALD.

**Source:** Su, Y., Dodge, J. L., & Lee, B. P. (2026). Episodic Heavy Drinking and Implications for Steatotic Liver Disease Nomenclature: A National Cross-Sectional Study. *Clinical Gastroenterology and Hepatology*. <https://doi.org/10.1016/j.cgh.2026.03.004>