SECTION 5

Alcohol Use and Mortality in the Japan Collaborative Cohort Study for Evaluation of Cancer (JACC)

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Abstract

Alcohol use was examined for its influence on mortality in the Japan Collaborative Cohort. While overall risk of death, as well as ischemic heart disease, were reduced with moderate consumption, increase was noted with heavy intake, even after cessation. With heavy consumption, overall cancers were also increased. In males, risk of oesophageal cancer was particularly elevated and risk of liver and renal cancer was found to be increased in ex-drinkers. Heavy consumption appears to be also a risk factor for rectal and gallbladder cancer. Furthermore, cerebrovascular disease was increased with dose-dependence.

Keywords: Alcohol - consumption level - mortality - cancer - circulatory disease

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Introduction

Alcohol use was surveyed in all areas of the Japan Collaborative Cohort Study for Evaluation of Cancer (JACC) and assessed for its influence on mortality.

Materials and Methods

Each participant was asked about his or her drinking habits and was classified accordingly as a drinker, exdrinker, or rare/non-drinker. Drinkers were further classified by their drinking frequency, level of alcohol consumption per day, duration of drinking habit, and age at which drinking started. Ex-drinkers were classified according to number of years since drinking ceased. Level of alcohol consumption was self-estimated as a volume equivalent to Japanese sake by the participants. Sexspecific and age- and study area-adjusted hazard ratios and 95% confidence intervals of major causes of death were calculated.

Results

Risk of death from all causes

The overall risk of death was found to be decreased in both male and female drinkers, in particular, in occasional (3-4/week) drinkers compared with rare/non-drinkers (Age-adjusted Hazard Ratio (HR) = 0.84, P < 0.01 for males, and HR = 0.87, P < 0.01 for females) (Table 1). This was particu;ar;y the case for male and female light drinkers (HR = 0.86, P < 0.01, and HR = 0.90, P < 0.01, respectively), who consumed less than 54 ml of alcohol per day (Table 2). In contrast, the risk of death from all causes was increased in male heavy drinkers who consumed more than 81 ml of alcohol per day (HR = 1.33, P<0.01). A drinking habit lasting less than 20 years decreased the risk of death (HR = 0.75, P<0.01) (Table 3). Commencing alcohol use before the age of 20 years increased the risk of death from all causes (HR = 1.20, P < 0.01) (Table 4). Risk was increased in both male and female ex-drinkers (HR = 1.59, P<0.01, and HR = 1.51, P<0.01, respectively) (Table 1). Risk of death from all causes appeared to remain high even after cessation of drinking (Table 5).

Risk of death from all cancers

The risk of death from all cancers in male and female drinkers was no different to that in rare/non-drinkers, but it was increased in male heavy drinkers who consumed amounts of alcohol equal to or greater than 81 ml per day (HR = 1.39, P < 0.01) (Table 2). A drinking habit of less than 20 years duration decreased the risk (HR = 0.82, P < 0.01) (Table 3), whereas a drinking habit of 30 years or longer increased the risk of death from all cancers (HR = 1.11, P < 0.05). Younger age (<20 years) at which drinking started also increased the risk (HR = 1.23, P < 0.05) (Table 4). The risk was increased in both male and female exdrinkers (HR = 1.50, P < 0.01, and HR = 1.60, P < 0.01, respectively) (Table 1). In males, the risk of death from all cancers appeared to decrease gradually after permanent cessation of alcohol consumption (Table 5).

Risk of death from esophageal cancer

Compared with rare/non-drinkers, the risk of death from esophageal cancer was increased in male drinkers, especially in those drinking daily (HR = 2.84, P < 0.01)

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Table 1. Hazard Ratios (HRs) [#] and 95% Confidence Intervals (95% CI) for Selected (Causes of Death with
Reference to Alcohol Drinking and its Frequency	

			Alco	hol drinking			Freq	uency of dr (Compared w	inkin ⁄ith rai	0
Observed	Rare/	none		Drinkers		Ex-drinkers	Almo	st every day		week or less
person /Male	1		421,158			29,400	27	8,663	12	21,109
-years /Female	545,	032		183,717		11,666	3	5,457	1.	35,302
Site ICD10 Deaths	No	HR	No	HR (95% CI)	No	HR (95% CI)	No	HR (95% CI)	No	HR (95% CI)
Male										
All causes 10,230	2,038	1.00	6,326	0.95 (0.90, 1.00)+	1,157	1.59 (1.48, 1.71)**	4,405	1.01 (0.96, 1.06)	1,496	0.84 (0.78, 0.90)**
All cancers 3,894	718	1.00	2,571	1.04 (0.95, 1.13)	373	1.50 (1.32, 1.70)**	1,811	1.11 (1.02, 1.22)*	621	0.93 (0.83, 1.04)
Esophagus C15 153	14	1.00	123	2.26 (1.29, 3.95)**	· 10	2.08 (0.92, 4.70)+	106	2.84 (1.62, 4.99)**	۶ 14 [°]	0.89 (0.42, 1.88)
Stomach C16 777	149	1.00	519	1.03 (0.85, 1.23)	61	1.16 (0.86, 1.57)	359	1.06 (0.87, 1.29)	138	1.01 (0.80, 1.28)
Colon C18 219		1.00	148	1.16 (0.80, 1.68)	19	1.57 (0.90, 2.75)	108	1.23 (0.84, 1.80)	37	1.01 (0.63, 1.61)
RectumC19-20 164	25	1.00	120	1.33 (0.86, 2.06)	15	1.89 (0.99, 3.60)+	92	1.48 (0.94, 2.31)	21	0.80 (0.44, 1.45)
Liver C22 463	79	1.00	271	0.89 (0.69, 1.15)	79	3.16 (2.32, 4.31)**	171	0.90 (0.68, 1.18)	79	0.89 (0.65, 1.23)
Gall bladder C23 72	10	1.00	48	1.47 (0.74, 2.92)	7	2.00 (0.76, 5.29)	38	1.74 (0.86, 3.53)		0.99 (0.40, 2.47)
Pancreas C25 224	40	1.00	163	1.23 (0.87, 1.75)		0.70 (0.35, 1.41)	100	1.18 (0.81, 1.73)	49	1.42 (0.92, 2.18)
Lung C33-34 904	184	1.00		0.94 (0.80, 1.12)		1.40 (1.09, 1.80)**		1.02 (0.85, 1.22)		$0.82(0.65, 1.03)^+$
Prostate C61 169		1.00		0.79 (0.55, 1.13)		0.76 (0.40, 1.44)		0.82 (0.55, 1.21)		0.92 (0.57, 1.47)
Kidney C64 46		1.00		2.26 (0.79, 6.43)		4.43 (1.24, 15.8)*		$2.60(0.90, 7.54)^+$		1.62 (0.45, 5.85)
Urothelial tract								(, , , , , , , , , , , , , , , , , , ,		(,,
C65-67 94	18	1.00	63	1.12 (0.66, 1.91)	7	1.07 (0.44, 2.57)	42	1.27 (0.71, 2.28)	17	1.32 (0.66, 2.64)
Non-Hodgkin's lymph	oma									
C82-85 93	26	1.00	55	0.59 (0.37, 0.95)*	7	0.80 (0.34, 1.86)	35	0.62 (0.37, 1.06)	16	0.69 (0.36, 1.31)
Multiple myeloma										
C90 49	11	1.00	28	0.70 (0.34, 1.42)	4	1.23 (0.39, 3.90)	16	0.57 (0.26, 1.24)	10	0.85 (0.35, 2.04)
Myeloid leukemia										
C92 44	7	1.00	34	1.28 (0.56, 2.91)	1	0.47 (0.05, 3.89)	25	1.38 (0.59, 3.21)	7	1.02 (0.35, 2.94)
Ischemic heart disease										
I20-25 666	150	1.00	394	0.82 (0.68, 1.00)+	78	1.45 (1.10, 1.91)**	252	0.79 (0.64, 0.97)*	113	0.89 (0.69, 1.14)
Cerebrovascular disease										
I60-69 1,322	228	1.00	812	1.15 (0.99, 1.34)+	179	2.13 (1.75, 2.60)**	576	1.25 (1.06, 1.46)**	* 172	0.93 (0.76, 1.14)
Female										
All causes 7,174	4,817	1.00	1,110	0.91 (0.85, 0.97)**	162	1.51 (1.29, 1.77)**	277	1.01 (0.89, 1.14)	724	0.87 (0.80, 0.95)**
All cancers 2,325	718	1.00	2,571	0.98 (0.88, 1.10)	373	1.60 (1.21, 2.10)**	104	1.13 (0.93, 1.38)	289	0.95 (0.84, 1.08)
Esophagus C15 27	18	1.00		1.70 (0.69, 4.16)	0	N.A	3	2.79 (0.80, 9.70)		0.73 (0.16, 3.22)
Stomach C16 386		1.00		1.00 (0.76, 1.31)	8	1.44 (0.71, 2.93)		0.79 (0.44, 1.41)		1.09 (0.79, 1.48)
Colon C18 220		1.00		0.82 (0.55, 1.20)		1.12 (0.41, 3.03)		0.96 (0.48, 1.89)		0.83 (0.53, 1.31)
RectumC19-20 89		1.00		0.60 (0.31, 1.13)		1.51 (0.36, 6.21)		0.28 (0.03, 2.02)		0.57 (0.28, 1.18)
Liver C22 227		1.00		0.83 (0.57, 1.21)		2.89 (1.51, 5.53)**		1.38 (0.76, 2.52)		0.69 (0.43, 1.10)
Gall bladder C23 95		1.00		0.97 (0.55, 1.71)		0.75 (0.10, 5.47)		0.81 (0.25, 2.63)		1.10 (0.58, 2.09)
Pancreas C25 217		1.00		1.48 (1.06, 2.07)*		1.68 (0.68, 4.12)		1.17 (0.59, 2.32)		1.71 (1.18, 2.48)**
Lung C33-34 268		1.00		0.93 (0.67, 1.29)		1.52 (0.67, 3.45)		1.30 (0.76, 2.22)		0.78 (0.52, 1.16)
Breast C50 103		1.00		1.34 (0.85, 2.09)		1.38 (0.33, 5.69)		1.04 (0.37, 2.89)		$1.55 (0.95, 2.51)^+$
Cervix uteri C53 36		1.00		0.73 (0.29, 1.83)		1.69 (0.22, 12.7)		0.61 (0.08, 4.61)		0.70 (0.23, 2.10)
Kidney C64 19		1.00		0.37 (0.04, 2.92)		7.88 (1.71, 36.2)**		1.63 (0.21, 12.7)		NA
Urothelial tract	11	1.00	1	0.57 (0.04, 2.72)	2	7.00 (1.71, 50.2)	1	1.05 (0.21, 12.7)	0	10/1
C65-67 41	30	1.00	8	1.02 (0.45, 2.28)	0	NA	2	1.31 (0.31, 5.54)	6	1.07 (0.43, 2.69)
Non-Hodgkin's lymph		1.00	0	1.02 (0.45, 2.20)	0	1471	2	1.51 (0.51, 5.54)	0	1.07 (0.43, 2.07)
C82-85 65		1.00	11	0.97 (0.49, 1.93)	2	2.45 (0.58, 10.3)	4	1.59 (0.56, 4.54)	7	0.85 (0.37, 1.94)
Multiple myeloma	40	1.00	11	0.97 (0.49, 1.93)	4	2.45 (0.56, 10.5)	-	1.57 (0.50, 4.54)	/	0.05 (0.57, 1.94)
C90 49	34	1.00	Q	1.00 (0.47, 2.14)	1	1.34 (0.18, 9.85)	2	1.07 (0.25, 4.55)	Δ	0.68 (0.23, 1.97)
Myeloid leukemia	54	1.00	,	1.00 (0.77, 2.14)	1	1.57 (0.10, 7.05)	2	1.07 (0.20, 7.00)	-	0.00 (0.23, 1.77)
C92 33	20	1.00	7	1.23 (0.50, 2.99)	1	2.24 (0.29, 16.9)	3	2.32 (0.67, 7.97)	3	0.76 (0.22, 2.64)
Ischemic heart disease	20	1.00	/	1.25 (0.50, 2.77)	1	2.27 (0.29, 10.9)	5	2.32 (0.01, 1.31)	5	0.70 (0.22, 2.04)
I20-25 458	302	1.00	76	1.09 (0.84, 1.41)	6	0.85 (0.38, 1.92)	21	1.28 (0.82, 2.00)	17	1.04 (0.76, 1.43)
Cerebrovascular disease		1.00	70	1.07 (0.04, 1.41)	0	0.00 (0.00, 1.92)	21	1.20 (0.02, 2.00)	+/	1.07 (0.70, 1.45)
I60-69 1,151		1.00	155	0.86 (0.72, 1.02)	21	1.17 (0.76, 1.82)	40	0.92 (0.67, 1.28)	91	0.77 (0.62, 0.97)*
				0.00 10.14. 1.041	<u>~1</u>	1.1/ (0./0, 1.04)		0.74(0.07, 1.40)		0.11(0.02, 0.71)

*Adjusted for age and area of study. Significance level: ** p<0.01, * p<0.05, + p<0.1 NA: not applicable

and in heavy drinkers consuming 81 ml of alcohol or more per day (HR = 4.63, P < 0.01) (Table 2). Longer duration of drinking habit and younger age at which drinking commenced also increased the risk. The risk of death from esophageal cancer was increased in male ex-drinkers (Table 1), in particular in those in the 5 year interval postquitting (HR = 3.75, P < 0.05) (Table 5). both male and female ex-drinkers (HR = 3.16, P < 0.01, and HR = 2.89, P < 0.01, respectively) (Table 1), and the increased risk persisted even after cessation of alcohol consumption. In male and female drinkers, the risk ofdeath from liver cancer was no different from the risk in rare/ non-drinkers overall (Table 1). However, in male drinkers there appeared to be a dose-dependent relationship between the amount of alcohol consumed per day, duration of drinking habit and increased risk of death from liver cancer (Tables 2, 3).

Risk of death from liver cancer

The risk of death from liver cancer was increased in

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Observed		Rare	/none		<54		54-80	81+		
person- /Male		100,388			162,193		112,169		52,405	
years / Female ICD10		545,032			88,499		6,264	2,586		
		No	HR	No	HR (95%CI)	No	HR (95%CI)	No	HR (95%CI)	
Male										
All causes		2,038	1.00	2,463	0.86 (0.81, 0.92)**	1,550	1.02 (0.95, 1.09)	775	1.33 (1.22, 1.46)**	
All cancers	C00-97	718	1.00	969	0.94 (0.85, 1.04)	672	1.17 (1.04, 1.31)**	312	1.39 (1.20, 1.60)**	
Esophagus	C15	14	1.00	28	1.33 (0.67, 2.62)	50	3.71 (1.95, 7.04)**	25	4.63 (2.28, 9.37)**	
Stomach	C16	149	1.00	198	0.93 (0.74, 1.16)	151	1.24 (0.97, 1.57)+	52	1.11 (0.79, 1.54)	
Colon	C18	36	1.00	66	1.32 (0.85, 2.04)	36	1.26 (0.76, 2.07)	20	1.75 (0.97, 3.14)+	
Rectum	C19-20	25	1.00	43	1.07 (0.64, 1.78)	26	1.08 (0.61, 1.92)	21	2.25 (1.22, 4.14)**	
Liver	C22	79	1.00		0.70 (0.49, 0.98)*		0.88 (0.60, 1.28)	36	1.47 (0.96, 2.25)+	
Gall bladder	C23	10	1.00		1.56 (0.65, 3.77)		2.02 (0.78, 5.25)		3.21 (1.09, 9.44)*	
Pancreas	C25	40	1.00		1.14 (0.75, 1.73)		1.52 (0.97, 2.38)+		1.22 (0.65, 2.26)	
Lung	C33-34	184	1.00		0.86 (0.70, 1.06)		0.96 (0.77, 1.21)		1.29 (0.98, 1.71)+	
Prostate	C61	45	1.00		0.90 (0.59, 1.38)		0.66 (0.37, 1.17)		0.82 (0.37, 1.79)	
Kidney	C64	4	1.00		2.88 (0.83, 9.97)+		2.93 (0.75, 11.3)		0.92 (0.09, 9.07)	
Urothelial trac		18	1.00		1.37 (0.71, 2.65)		1.98 (0.96, 4.07) +		0.52 (0.11, 2.35)	
Non-Hodgkin		ι								
	C82-85	26	1.00	21	0.60 (0.32, 1.10)+	14	076 (0.38, 1.52)	5	0.70 (0.26, 1.91)	
Multiple myel		11	1.00		0.91 (0.35, 2.37)		0.53 (0.15, 1.87)		1.34 (0.38, 4.77)	
Myeloid leuke		7	1.00		1.21 (0.49, 2.97)		1.37 (0.51, 3.67)		0.69 (0.14, 3.42)	
Ischemic heart					(,		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	I20-25	150	1.00	168	0.78 (0.62, 0.98)*	92	0.83 (0.63, 1.10)	40	0.94 (0.66, 1.36)	
Cerebrovascula		100	1100	100	01/0 (0102, 01/0)		0100 (0100, 1110)		019 1 (01000, 1100)	
Corosiovasoura	I60-69	228	1.00	305	0.95 (0.79, 1.14)	225	1.37 (1.13, 1.66)**	101	1.66 (1.30, 2.13)**	
Female										
All causes		4,817	1.00	506	0.90 (0.82, 0.99)*	28	1.03 (0.71, 1.50)	14	1.37 (0.81, 2.32)	
All cancers	C00-97	1,542	1.00		1.12 (0.97, 1.29)	9	0.80 (0.41, 1.54)		0.92 (0.34, 2.47)	
Esophagus	C15	18	1.00		2.06 (0.74, 5.73)	0	NA	0	N.A	
Stomach	C16	262	1.00	31	0.93 (0.63, 1.36)	0	NA	2	3.23 (0.80, 13.1)	
Colon	C18	153	1.00		1.04 (0.66, 1.64)	0	NA		2.14 (0.29, 15.4)	
Rectum	C19-20	63	1.00		0.62 (0.24, 1.57)		NA		NA	
Liver	C22	141	1.00		0.70 (0.40, 1.23)		1.02 (0.14, 7.37)		NA	
Gall bladder	C23	62	1.00		1.12 (0.55, 2.30)		2.17 (0.29, 15.8)	0	NA	
Pancreas	C25	138	1.00		2.02 (1.37, 2.98)**		1.05 (0.14, 7.56)		NA	
Lung	C33-34	181	1.00		1.01 (0.66, 1.56)		2.34 (0.74, 7.40)		NA	
Breast	C50	63	1.00		1.62 (0.90, 2.91)		NA		3.44 (0.47, 25.1)	
Cervix uteri	C53	24	1.00		0.52 (0.12, 2.27)		NA		NA	
Kidney	C64	11	1.00		NA		10.2 (1.24, 83.5)		NA	
Urothelial trac		30	1.00		1.12 (0.33, 3.78)		NA		NA	
Non-Hodgkin					(0.000, 0.1.0)					
rion riougium	C82-85	. 40	1.00	8	1.25 (0.57, 2.72)	0	NA	0	NA	
Multiple myel		34	1.00		1.21 (0.46, 3.18)		NA		NA	
Myeloid leuke		20	1.00		1.50 (0.50, 4.53)		NA		NA	
Ischemic heart		20	1.50	1		0	•	0	•	
Loonenne neurt (I20-25	302	1.00	32	1.03 (0.71, 1.49)	3	2.66 (0.84, 8.36)	3	7.60 (2.41, 23.9)*	
Cerebrovascula		502	1.00	52		5		5		
_ siesis (usediu	I 60-69	787	1.00	(7	0.77 (0.60, 1.00)*	-	1.84 (0.87, 3.90)	2	2.06 (0.66, 6.42)	

Table 2. Hazard ratios (HRs)[#] and 95% Confidence Intervals (95% CI) of Consumption of Alcohol per day in Current Drinkers, Compared with Rare/Nondrinkers

[#]Adjusted for age, area of study. ^{##}One unit (gou) Japanese Sake = 27 ml alcohol = 22 g ethanol. Significance level: ** p<0.01, * p<0.05, * p<0.1 NA: not applicable

Risk of death from cancers at other sites

The risk of death from renal cancer was increased in male and female ex-drinkers (HR = 4.43, P < 0.05, and HR = 7.88, P < 0.01, respectively) (Table 1). An increased risk of death from lung cancer was found in male exdrinkers (HR = 1.40, P < 0.01). Although the risk of death from rectal or gall bladder cancers in drinkers overall did not differ from that in rare/non-drinkers, the risk was increased in heavy drinkers for rectal cancer (HR = 2.25, P < 0.01), and for gall bladder cancer (HR = 3.21, P < 0.05) (Table 2). In contrast, the risk of death from Non-Hodgkin's lymphoma was less in male drinkers (HR = 0.59, P < 0.05) (Table 1).

Risk of death from circulatory diseases

The risk of death from ischemic heart disease was decreased in males drinking daily (HR = 0.79, P < 0.05) (Table 1), in particular in light drinkers who consumed less than 54 ml of alcohol per day (HR = 0.78, P < 0.05) (Table 2) and in those drinkers who drank for less than 20

					Dura	ation of	of drinking (years)	drinking (years)			
Observed		Rare	e/none		<20		20-29		30+		
person- /Ma	le	100,388 545,032		86,104			104,082		127,040		
years / Female	e				54,755		19,905		13,425		
	ICD10	No	HR	No	HR (95%CI)	No	HR (95%CI)	No	HR (95%CI)		
Male											
All causes		2038	1.00	662	0.75 (0.68, 0.82)**		0.92 (0.84, 0.99)*		1.03 (0.97, 1.09)		
All cancers	C00-97	718	1.00		0.82 (0.70, 0.94)**		1.04 (0.92, 1.19)		1.11 (1.01, 1.22)*		
Esophagus	C15	14	1.00	11	1.19 (0.51, 2.77)	22	1.93 (0.93, 3.99)+	60	2.87 (1.53, 5.36)**		
Stomach	C16	149	1.00	64	0.92 (0.67, 1.25)	92	1.10 (0.83, 1.45)	226	1.06 (0.85, 1.31)		
Colon	C18	36	1.00		1.02 (0.55, 1.90)	32	1.59 (0.94, 2.68)+	64	1.31 (0.84, 2.03)		
Rectum	C19-20	25	1.00		0.61 (0.27, 1.35)		1.35 (0.74, 2.46)	48	1.27 (0.77, 2.10)		
Liver	C22	79	1.00	22	0.52 (0.31, 0.86)*		0.70 (0.46, 1.08)	114	1.13 (0.82, 1.54)		
Gall bladder	C23	10	1.00	3	1.02 (0.26, 4.00)	9	2.63 (0.95, 7.29)+	25	2.01 (0.86, 4.67)		
Pancreas	C25	40	1.00	19	0.96 (0.54, 1.69)	34	1.43 (0.88, 2.33)	71	1.16 (0.77, 1.73)		
Lung	C33-34	184	1.00	56	0.63 (0.46, 0.86)**	106	0.97 (0.75, 1.25)	269	0.93 (0.77, 1.14)		
Prostate	C61	45	1.00	15	1.03 (0.56, 1.89)	9	0.54 (0.25, 1.13)	52	0.80 (0.53, 1.21)		
Kidney	C64	4	1.00	5	2.65 (0.61, 11.5)	5	2.18 (0.50, 9.44)	14	2.84 (0.81, 9.92)		
Urothelial trac	et C65-67	18	1.00	8	1.26 (0.51, 3.06)	6	0.80 (0.30, 2.15)	35	1.48 (0.79, 2.76)		
Non-Hodgkin	's lymphom	a									
	C82-85	26	1.00	6	0.45 (0.18, 1.14)+	8	0.51 (0.22, 1.18)	28	0.80 (0.45, 1.41)		
Myeloma	C90	11	1.00	4	0.79 (0.22, 2.82)	7	1.15 (0.39, 3.41)	8	0.73 (0.26, 2.03)		
Leukemia	C92	7	1.00	13	3.09 (1.12, 8.48)*	5	0.98 (0.29, 3.33)	9	0.96 (0.34, 2.73)		
Ischemic heart	disease										
	I20-I25	150	1.00	37	0.57 (0.39, 0.84)**	53	0.68 (0.49, 0.95)*	205	0.94 (0.75, 1.17)		
Cerebrovascula	r disease										
	I60-I69	228	1.00	82	0.90 (0.69, 1.16)	97	0.90 (0.70, 1.15)	433	1.26 (1.06, 1.48)**		
Female											
All causes		4817	1.00	283	0.98 (0.87, 1.11)	114	0.93 (0.77, 1.12)	142	0.93 (0.78, 1.10)		
All cancers	C00-97	1542	1.00	128	1.15 (0.96, 1.39)	47	1.08 (0.80, 1.44)	49	1.05 (0.78, 1.39)		
Esophagus	C15	18	1.00	1	0.78 (0.10, 5.98)	1	1.91 (0.25, 14.5)	3	5.32 (1.53, 18.4)**		
Stomach	C16	262	1.00	19	1.06 (0.66, 1.70)	4	0.56 (0.20, 1.50)	7	0.86 (0.40, 1.84)		
Colon	C18	153	1.00	11	0.99 (0.53, 1.84)	2	0.43 (0.10, 1.77)	6	1.13 (0.49, 2.57)		
Rectum	C19-20	63	1.00	2	0.43 (0.10, 1.79)	2	1.13 (0.27, 4.69)	0	NA		
Liver	C22	141	1.00	7	0.64 (0.30, 1.39)	5	1.20 (0.49, 2.96)	3	0.70 (0.22, 2.21)		
Gall bladder	C23	62	1.00	9	2.02 (0.98, 4.15)	0	NA	0	NA		
Pancreas	C25	138	1.00	20	2.17 (1.34, 3.51)**	4	1.09 (0.40, 2.96)	4	0.92 (0.34, 2.50)		
Lung	C33-34	181	1.00	14	1.04 (0.60, 1.82)	5	0.97 (0.39, 2.38)	5	0.92 (0.38, 2.26)		
Breast	C50	63	1.00	7	1.12 (0.50, 2.49)	4	1.73 (0.62, 4.83)	3	1.95 (0.60, 6.28)		
Cervix uteri	C53	24	1.00	2	0.87 (0.20, 3.78)	1	1.19 (0.15, 8.90)	0	NA		
Kidney	C64	11	1.00	0	N.A	1	3.11 (0.39, 24.4)	0	NA		
Urothelial trac	ct C65-67	30	1.00	2	1.40 (0.32, 6.01)	0	NA	2	2.66 (0.62, 11.4)		
Non-Hodgkin	's lymphoma	ι									
0	C82-85	40	1.00	6	1.67 (0.69, 4.04)	0	NA	2	1.67 (0.40, 7.04)		
Multiple myel		34	1.00		0.42 (0.05, 3.14)		3.25 (0.98, 10.8)+		0.91 (0.12, 6.76)		
Myeloid leuke		20	1.00		1.41 (0.32, 6.17)		NA		5.12 (1.48, 17.6)**		
Ischemic heart											
	I20-25	302	1.00	15	1.00 (0.59, 1.69)	8	1.13 (0.56, 2.30)	14	1.51 (0.88, 2.59)		
Cerebrovascula											
	I60-69	787	1.00	38	0.88 (0.63, 1.22)	22	1.15 (0.75, 1.76)	29	1.14 (0.78, 1.65)		

Table 3. Hazard ratios (HRs)[#] and 95% Confidence Intervals (95% CI) of Duration of Drinking in Current Drinkers, Compared with Rare/Nondrinkers

*Adjusted for age, area of study. Significance level: ** p<0.01, * p<0.05, + p<0.1 NA: not applicable

years (HR = 0.57, P < 0.01) (Table 3). However the risk was increased in male ex-drinkers (HR = 1.45, P < 0.01) (Table 1). The risk of death from cerebrovascular disease was increased in males who drank daily (HR = 1.25, P < 0.01) and this relationship appeared to show dose-dependency with the amount of alcohol consumed. It was also increased in male ex-drinkers (HR = 2.13, P < 0.01). In contrast, risk of death from cerebrovascular disease was decreased in female occasional (3-4/week) drinkers (HR = 0.77, P < 0.05).

Discussion

Heavy alcohol consumption is considered to cause cancer of the oral cavity, pharynx, larynx, esophagus, and liver, and may increase the risk of breast and colorectal cancer (IARC, 2003). In the JACC Study, drinking appeared to predispose individuals to increased risk of esophageal and liver cancer. Synergy between drinking and smoking has been reported for esophageal cancer (Sakata et al., 2005). Risk of breast cancer significantly

				Age at which the drinking commenced (years)							
Observed		Rare	e/none		<20		20-29		30+		
person- /Mal	le	100,388			21,241		150,609	145,700			
years / Female		545,032			1,725		18,404		69,193		
)	ICD10	No	HR	No	HR (95%CI)	No	HR (95%CI)	No	HR (95%CI)		
Male											
All causes		2038	1.00	662	1.20 (1.05, 1.36)**	970	1.07 (1.01, 1.14)*	3085	0.86 (0.81, 0.92)**		
All cancers	C00-97	718	1.00		1.23 (1.01, 1.51)*		$1.09 (0.98, 1.21)^+$		0.99 (0.90, 1.10)		
Esophagus	C15	14	1.00		4.56 (1.94, 10.7)**		2.07 (1.07, 4.00)*		2.30 (1.21, 4.37)*		
Stomach	C16	149	1.00		1.26 (0.80, 1.98)		1.07 (0.85, 1.36)		1.00 (0.79, 1.25)		
Colon	C18	36	1.00		1.15 (0.44, 3.00)		1.15 (0.71, 1.86)		1.45 (0.94, 2.26)		
Rectum	C19-20	25	1.00		1.10 (0.37, 3.22)		1.48 (0.88, 2.48)		0.94 (0.88, 2.48)		
Liver	C22	79	1.00		1.02 (0.53, 1.97)		1.08 (0.78, 1.51)		0.75 (0.53, 1.06)		
Gall bladder	C23	10	1.00		$3.95 (0.99, 15.7)^+$		1.82 (0.72, 4.56)		1.94 (0.81, 4.61)		
Pancreas	C25	40	1.00		1.78 (0.85, 3.75)		1.33 (0.87, 2.03)		1.02 (0.67, 1.54)		
Lung	C33-34	184	1.00		0.83 (0.52, 1.31)		0.97 (0.79, 1.20)		$0.84 (0.68, 1.03)^{+}$		
Prostate	C61	45	1.00		1.19 (0.46, 3.06)		0.74 (0.46, 1.21)		0.79 (0.51, 1.23)		
Kidney	C64	43	1.00		$4.65 (0.76, 28.3)^+$		2.68 (0.72, 9.90)		2.48 (0.69, 8.81)		
Urothelial trac		18	1.00		1.80 (0.50, 6.40)		1.37 (0.69, 2.73)		1.25 (0.64, 2.42)		
Non-Hodgkin'			1.00	5	1.00 (0.50, 0.40)	21	1.57 (0.09, 2.75)	25	1.25 (0.04, 2.42)		
Non-Hougkins	C82-85	26	1.00	0	NA	10	0.75 (0.40, 1.41)	23	0.66 (0.36, 1.19)		
Myeloma	C90	11	1.00		NA		0.93 (0.34, 2.54)		0.87 (0.33, 2.30)		
Leukemia	C92	7	1.00		2.73 (0.66, 1.95)		0.58 (0.17, 1.95)		1.92 (0.76, 4.83)		
Ischemic heart d		/	1.00	5	2.75 (0.00, 1.95)	5	0.58 (0.17, 1.95)	19	1.92 (0.70, 4.83)		
Ischennic neart u	I20-25	150	1.00	10	0.57 (0.30, 1.10)+	151	1.02 (0.80, 1.29)	124	0.71 (0.56, 0.91)**		
Carabravagaular		150	1.00	10	0.57 (0.50, 1.10)	151	1.02 (0.80, 1.29)	134	0.71 (0.30, 0.91)		
Cerebrovascular	I60-69	228	1.00	27	1.12 (0.75, 1.69)	273	1.23 (1.03, 1.49)*	312	1.06 (0.89, 1.27)		
Female											
All causes		4817	1.00	283	1.14 (0.59, 2.19)	114	0.96 (0.77, 1.20)	142	0.96 (0.87, 1.06)		
All cancers	C00-97	1542	1.00		0.63 (0.15, 2.55)		0.76 (0.51, 1.13)		1.19 (1.02, 1.38)		
Esophagus	C15	18	1.00		NA		NA		2.53 (0.91, 7.02)		
Stomach	C16	262	1.00		NA		0.38 (0.09, 1.53)		1.01 (0.68, 1.50)		
Colon	C18	153	1.00		NA		0.61 (0.15, 2.47)		0.97 (0.58, 1.61)		
Rectum	C19-20	63	1.00		NA		NA		0.60 (0.21, 1.68)		
Liver	C22	141	1.00		3.53 (0.49, 25.4)		0.65 (0.16, 2.64)		0.81 (0.45, 1.44)		
Gall bladder	C22 C23	62	1.00		NA		N.A		1.34 (0.65, 2.73)		
Pancreas	C25	138	1.00		NA		0.70 (0.17, 2.85)		1.81 (1.18, 2.78)		
Lung	C23 C33-34	138	1.00		NA		0.53 (0.13, 2.14)		1.10 (0.70, 1.73)		
U	C50	63	1.00		NA		1.40 (0.43, 4.54)		1.40 (0.72, 2.70)		
Breast Cervix uteri	C53	24	1.00		NA		NA		0.96 (0.28, 3.25)		
	C55 C64	24 11	1.00		NA		NA		0.90 (0.28, 5.23) 0.82 (0.10, 6.47)		
Kidney											
Urothelial tract	C65-67	30	1.00	0	NA	0	NA	4	1.72 (0.59, 5.02)		
Non-Hodgkin's	• •	40	1.00	0	NIA	1	0.09(0.12,7.26)	7	1 29 (0 61 2 14)		
Maala	C82-85	40	1.00		NA		0.98 (0.13, 7.26)		1.38 (0.61, 3.14)		
Myeloma	C90	34	1.00		NA		2.85 (0.67, 12.1)		0.82 (0.25, 2.71)		
Leukemia	. C92	20	1.00	0	NA	3	7.27 (2.08, 25.4)	2	0.95 (0.22, 4.16)		
Ischemic heart d		202	1.00	~	5 00 (1 40 00 5);	10	0.05 (1.10.1.0.0)	25	0.02 (0.61.1.15)		
C 1 1	I20-25	302	1.00	2	5.83 (1.43, 23.7)*	10	2.25 (1.19, 4.26)*	25	0.93 (0.61, 1.41)		
Cerebrovascular			1.00	~	0.70 (0.06 0.10)	. –	1.00 (0.00 0.15)	-	0.04 (0.72, 1.20)		
	I60-69	787	1.00	3	2.70 (0.86, 8.43)+	17	1.32 (0.82, 2.15)	70	0.94 (0.73, 1.20)		

Table 4. Hazard ratios (HRs)[#] and 95% Confidence Intervals (95% CI) of Age at Which the Drinking Commenced in Current Drinkers, Compared with Rare/Nondrinkers

*Adjusted for age, area of study. Significance level: ** p<0.01, * p<0.05, + p<0.1 NA: not applicable

increased in current drinkers, especially heavy drinkers (Lin et al, 2005b). Increased risk of incidence of colon cancer was observed in male current drinkers and exdrinkers (Wakai et al, 2005c). Risk of hepatocellular carcinoma increased in ex-drinkers, and the association was further investigated (Ogimoto et al, 2004a). Risk of oral and pharyngeal cancer was also investigated (Ide et al, 2007). Increased risk of death from pancreatic cancer was not apparent in data obtained from follow-up to the end of 1997 (Lin et al., 2002b). No association with lung

cancer could be demonstrated (Nishino et al, 2006).

In contrast, the risk of death from all causes and some cardiovascular diseases appeared to decrease in occasional or light drinkers. In the JACC Study, a 12% to 20% decreased risk of all-cause mortality was observed in both men and women who consumed less than 23g/day of alcohol, although heavy drinking increased that risk (Lin et al, 2005a).

Increased risk of death from any disease in ex-drinkers might suggest that cohort subjects who were aware of

					Yea					
Observed		Rare	/none		<5		5-15		15+	
person- /Mal	le	100,388			7,451		7,680	5,422		
years / Female		545,032			2,943		2,679		1,681	
-	ICD10	No	HR	No	HR (95%CI)	No	HR (95%CI)	No	HR (95%CI)	
Male										
All causes		2038	1.00	277	1.75 (1.54, 2.00)**	339	1.73 (1.53, 1.94)**	189	1.23 (1.06, 1.43)**	
All cancers	C00-97	718	1.00	102	1.89 (1.53, 2.34)**	92	1.43 (1.15, 1.79)**	60	1.22 (0.93, 1.60)	
Esophagus	C15	14	1.00	4	3.75 (1.16, 12.1)*	3	2.76 (0.76, 10.0)	1	1.03 (0.13, 8.12)	
Stomach	C16	149	1.00	15	1.31 (0.76, 2.25)	11	0.77 (0.41, 1.44)	8	0.73 (0.35, 1.50)	
Colon	C18	36	1.00	6	2.36 (0.97, 5.74)+	4	1.29 (0.45, 3.70)	3	1.30 (0.39, 4.32)	
Rectum	C19-20	25	1.00	6	3.46 (1.37, 8.70)**	2	0.85 (0.19, 3.67)	2	1.17 (0.27, 5.06)	
Liver	C22	79	1.00	19	3.79 (2.24, 6.42)**	26	4.56 (2.83, 7.33)**	10	2.43 (1.23, 4.79)*	
Gall bladder	C23	10	1.00	3	4.65 (1.14, 19.0)*	1	1.18 (0.14, 10.1)	0	N.A	
Pancreas	C25	40	1.00	4	1.39 (0.49, 3.97)	1	0.27 (0.03, 2.05)	0	N.A	
Lung	C33-34	184	1.00	25	1.66 (1.08, 2.55)*	26	1.50 (0.98, 2.28)+	21	1.56 (0.98, 2.47)+	
Prostate	C61	45	1.00	3	1.00 (0.30, 3.30)	3	0.77 (0.23, 2.53)	2	0.58 (0.13, 2.44)	
Kidney	C64	4	1.00	0	NA	1	3.04 (0.30, 30.4)	2	6.82 (1.08, 42.8)*	
Urothelial tract	C65-67	18	1.00	2	1.99 (0.43, 9.09)	1	0.77 (0.09, 6.01)	1	0.93 (0.11, 7.25)	
Non-Hodgkin's	lymphoma									
	C82-85	26	1.00	2	0.94 (0.21, 4.07)	1	0.41 (0.05, 3.12)	1	0.56 (0.07, 4.22)	
Multiple myelor	ma C90	11	1.00		NA	0	NA	3	5.52 (1.38, 22.1)*	
Myeloid leukem		7	1.00	1	1.67 (0.19, 14.19)	0	NA		NA	
Ischemic heart d										
	I20-25	150	1.00	11	0.93 (0.50, 1.73)	28	1.99 (1.31, 3.02)**	17	1.60 (0.96, 2.68)+	
Cerebrovascular	r disease									
	I60-69	228	1.00	52	2.97 (2.17, 4.05)**	50	2.18 (1.59, 2.99)**	26	1.42 (0.93, 2.15)+	
Female										
All causes		4817	1.00	28	1.41 (0.97, 2.05)+	41	1.91 (1.40, 2.60)**	32	1.78 (1.25, 2.52)**	
All cancers	C00-97	1542	1.00	8	1.16 (0.58, 2.33)	16	2.18 (1.33, 3.58)**	7	1.25 (0.59, 2.64)	
Esophagus	C15	18	1.00	0	NA	0	NA	0	NA	
Stomach	C16	262	1.00	0	NA	3	2.45 (0.78, 7.68)	2	2.09 (0.51, 8.45)	
Colon	C18	153	1.00	0	NA	0	NA	1	1.50 (0.21, 10.8)	
Rectum	C19-20	63	1.00	0	NA	0	NA	0	NA	
Liver	C22	141	1.00	1	1.58 (0.22, 11.4)	5	7.53 (3.04, 18.7)**		1.92 (0.26, 13.8)	
Gall bladder	C23	62	1.00	0	NA	1	2.92 (0.40, 21.4)	0	NA	
Pancreas	C25	138	1.00	0	NA	1	1.58 (0.22, 11.4)	0	NA	
Lung	C33-34	181	1.00	2	2.63 (0.65, 10.7)	3	3.58 (1.13, 11.3)*	1	1.58 (0.22, 11.4)	
Breast	C50	63	1.00	1	3.18 (0.43, 23.2)	1	3.51 (0.48, 25.7)	0	NA	
Cervix uteri	C53	24	1.00	0	NA	0	NA	1	13.0 (1.71, 99.1)*	
Kidney	C64	11	1.00	0	NA	1	15.7 (1.99,122.9)**	0	NA	
Urothelial tract	C65-67	30	1.00	0	NA	0	NA	0	NA	
Non-Hodgkin's	lymphoma									
-	C82-85	40	1.00	1	4.71 (0.64, 34.6)	0	NA	0	N.A	
Multiple myelor	ma C90	34	1.00	0	NA	0	NA	0	N.A	
Myeloid leukem	nia C92	20	1.00	0	NA	0	NA	0	N.A	
Ischemic heart d										
	I20-25	302	1.00	0	NA	1	0.82 (0.11, 5.92)	2	1.69 (0.41, 6.87)	
Cerebrovascular	r disease									
	I60-69	787	1.00	5	1.51 (0.62, 3.66)	5	1.42 (0.59, 3.43)	2	0.66 (0.16, 2.67)	

Table 5. Hazard ratios (HRs)[#] and 95% Confidence Intervals (95% CI) of Period since Drinking Ceased in Exdrinkers, Compared with Rare/Nondrinkers

*Adjusted for age, area of study. Significance level: ** p<0.01, * p<0.05, + p<0.1 NA: not applicable

alcohol-related health problems quit drinking prior to the baseline survey. For example, high risk individuals such as heavy drinkers or Hepatitis C virus carriers, who were aware of having abnormal liver function tests, may have quit drinking just before the baseline survey. In future studies of hazard ratios for individual cancers, such factors in drinkers and ex-drinkers should be considered.

the end of 2003, indicated a nonsignificant increased risk (data not shown).

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Reported small numbers of deaths from cancers of the oral cavity (24 deaths) (ICD10; C03-C06), pharynx (27 deaths)(C10-C13) and larynx (21 deaths) (C32), up until

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