Association of Alcohol Use on Prevalence L5U **NEW ORLEANS NEW ORLEANS** of Various Ophthalmic Diseases **School of Public Health** School of Medicine

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Background	Results					
 At least 2 billion people worldwide have a vision impairment Existing evidence suggests that vision impairment is associated with lower quality of life. Visual impairment is also linked to reduced daily visual function and the ability to perform visual tasks The effect of alcohol on eye diseases is still very unclear The main ocular conditions which alcohol has been proposed to have an effect include cataracts, age-related macular degeneration (AMD), diabetic retinopathy (DR), and glaucoma. 	Average Drinks per Adjusted (A) Over 60y (60+) Under 60y (60-) A 60+ 60- A 60+ 60- 0 Binge Drin	Cataracts Cataracts Glaucoma Any Eye Disorder 1 2	Age Gender Ethnicity	Sub-Category No F Mean = 45.7 ± 0.44 Under 60y Under 60y Over 60y Male Female Female Other Hispanic Non-Hispanic White Non-Hispanic Black Other S20,000 \$20,000 - \$35,000 \$35,000 - \$50,000	Eye Disorder (%) Any Eye 83.0 17.0 17.0 48.2 51.8 51.8 8.7 4.3 69.9 11.3 55.8 36.3 17.7 19.0	Disorder (%) 40.7 59.3 49.2 50.8 5.5 3.4 73.4 12.9 4.7 36.9 23.7 20.4
Hypothesis	Adjusted (A)	Cataracts		\$50,000 - \$75,000 > \$75,000	11.7 15.4	8.0 10.9

We hypothesize that there is an association between alcohol use and the prevalence of four eye diseases: cataract, AMD, glaucoma, and DR



Methods

- Data was gathered from the 2005-2006 and 2007-2008 National Health and Nutrition Examination Survey (NHANES; N = 11,791)
- Alcohol use was determined by 3 different measures:
- Binge drinking [4-5 drinks (4 for women; 5 for men) in a 2-hr time frame]
- Heavy drinking [Exceeding 3 (women) or 4(men) drinks in the past 30 days]
- Average number of drinks per drinking
- day (DpDD)
- Logistic regression, chi square, and t-tests were used to assess the association of alcohol use and having any or one of the four eye disorders

Potential confounders (age, gender, race, education level, income, smoking status, diabetes status, and hypertension were adjusted for.

Figure 1. Odds-ratio (OR) estimates for each alcohol measure against the prevalence of cataracts, glaucoma, and any eye disorder. Data was adjusted for age, gender, race, education level, income, smoking status, diabetes status, and hypertension. Data was also stratified by age.

Conclusion

- It is important to consider multiple confounders including age when investigating the association of alcohol use and eye disease
- Alcohol use often did not have an association with eye disorders post adjusting for confounders
- There was significant association seen with increasing average drinks per drinking day and prevalence of cataracts after adjusting for confounders which suggests that alcohol use along with other factors contribute to prevalence of cataracts
- Limitations include cross-sectional data and the inability to assess drinking patterns over time
- Further research is needed to determine





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