



Determinants of transition across the spectrum of alcohol use and misuse in Nigeria

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ABSTRACT

Many studies have examined the risk factors associated with alcohol use disorders. No information is available from developing countries about the factors that may determine the transitions across different levels of use and misuse. Alcohol use and its misuse were assessed in a cohort of 2143 Nigerians using Version 3.0 of the World Health Organization Composite International Diagnostic Interview (WHO-CIDI). This generated six levels of alcohol use and related disorders. Using age of onset variables created for the purpose, analysis was done to determine rates of and risk factor for transition between the levels. Lifetime prevalence estimates were 57.8% for alcohol use, 27.6% for regular use, 2.9% for abuse, and 0.3% for dependence. Whereas 47.8% transitioned to regular use from lifetime ever use, only 10.5% transitioned to abuse from regular use and 9.5% from abuse to dependence. Male sex, age 18–49 years and being never married predicted onset of alcohol use. Transition to regular use was predicted only by male sex while transition to abuse was predicted by male sex and age 35–49 years. Factors associated with recovery from abuse were female sex and a student status. Higher rates of transition occurred in the stages preceding the onset of alcohol use disorders. Sex and age were the main determinants of transition, with male gender and middle age being risk factors for transition to problematic use of alcohol.

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Introduction

Alcohol use disorders (AUD) remain a major cause of disability and dependency. An estimated two billion people worldwide consume alcoholic beverages, while 76.3 million live with diagnosable alcohol use disorders (World Health Organization, 2004). Alcohol is also responsible for a substantial number of cases of esophageal cancer, cirrhosis of the liver, liver cancer, homicides, epileptic seizures, and motor vehicle accidents worldwide (World Health Organization, 2002).

In a national survey of the 12-month prevalence of alcohol abuse and dependence conducted in the USA, alcohol abuse and dependence were found to have a prevalence of 4.65% and 3.81% respectively (Grant et al., 2004) representing reports from a well defined cultural pattern of binge or episodic heavy drinking (Room, Janca, Bennett, Schmidt, & Sartorius, 1996). In the United Kingdom, the prevalence of alcohol dependence is as high as 4.7% (World Health Organization, 2004). A study that described drinking patterns in 20 African countries showed that in four countries (Comoros, Mali, Mauritania and Senegal), virtually all respondents

were lifetime abstainers. The authors concluded that African drinking patterns are diverse, and that although life-time abstinence dominates in African countries, a single typical pattern of drinking for the African continent, such as the alleged 'all-or-none' pattern, was not observed (Clausen, Rossow, Naidoo, & Kowal, 2009) Nigeria can be described as a relatively "dry" culture, in which drinking is commonly set apart from daily life to weekends and festivities, and with many of the populace being abstainers (Room et al., 1996). Here the lifetime prevalence of alcohol abuse and dependence in the community is estimated at 2.8% and 0.2% respectively while the 12-month estimates are 0.5% and 0.1% respectively (Gureje, Lasebikan, Kola, & Makanjuola, 2006).

Many studies in Nigeria have largely examined the use of alcohol, though some of the authors have described their findings as relating to abuse or dependence. These studies have also largely addressed population subgroups such as students and hospital patients. The estimates of use have varied widely, ranging between 11% and 87% depending on the category of subjects studied and the ascertainment tools used (Isichei, Ikwuagwu, & Egbuta, 1994; Odejide, Ohaeri, Adelekan, & Ikuesan, 1987; Okulate & Odunaike, 2005; Oshodin, 1981). These results also show that alcohol use in Nigeria is mainly among men, the young, middle aged, and people of middle to high socioeconomic class.

Few studies in Nigeria have examined the issue of alcohol abuse and dependence using present day assessment tools based upon

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