

# Sober October?

Has the time come to re-examine our love-hate relationship with drinking? A recent episode of the *New York Times* podcast *The Daily*<sup>1</sup> got me thinking about how we talk to patients, and ourselves, about alcohol.

The general teaching when I was in medical school was that alcohol was a good thing . . . in moderation. The term *French paradox* was coined after evidence suggested that drinking red wine was responsible for a reduction in heart disease in some European countries.<sup>2</sup> In 1991, after *60 Minutes* aired a story on the research, sales of red wine in the United States increased 40%.<sup>3,4</sup>

Research eventually also found health benefits in beer and other drinks.<sup>5,6</sup> Alcohol was credited with lower rates of ischemic heart disease<sup>7</sup> and ischemic stroke,<sup>8</sup> theoretically due to benefits to cholesterol profile, endothelial inflammation, and coagulation factors.<sup>7-9</sup>

A meta-analysis in *Archives of Internal Medicine* (2006) demonstrated that death from all-cause mortality was lowest with moderate drinking. The article's now infamous J-shaped curve compared various quantities of alcohol consumption to “abstainers” and concluded that one to two drinks per day for women and two to four for men was a healthy range.<sup>9</sup> Cheers to salubrious spirits!

Let's be honest: wasn't that what everyone wanted to hear anyway? How wonderfully convenient to have one of our most beloved rituals supported by science. But why weren't we talking more about the negative effects of alcohol? Addiction, increased risk of cancers, cirrhosis, and death from accidents? Publication bias, you say? Don't be a buzzkill.

More recently, new evidence has changed the narrative. Published in January 2023, *Canada's Guidance on Alcohol and Health: Final Report* by the Canadian Centre on Substance Use and Addiction

contains what are likely the strictest drinking guidelines of any country.<sup>2,10</sup>

Compared with 2012 guidelines, which suggested that women could consume up to two drinks (27 g) daily and men up to three drinks (40 g) daily, the 2023 update dramatically cut consumption recommendations. The current message is, unequivocally, that no amount of alcohol is good for your health and that men and women are to consume a maximum of zero to two drinks (27 g) per week.<sup>10</sup>

Professor Tim Stockwell, a psychologist and alcohol researcher from Victoria, conducted a number of meta-analyses, including data that were foundational in Canada's most recent guidelines on alcohol.<sup>11,12</sup> In his April 2024 address to the Royal College of Physicians of Edinburgh, Professor Stockwell dove into some of the nuances, assumptions, and misinterpretations in past research that led to overly generous estimates of alcohol's benefits. Among them are that data were mainly restricted to white populations in high-income countries and that the maximum doses for benefit were very low, around one to three drinks per week. He also suggested we give sober second thought to some of the improbable benefits of alcohol reported in older studies—reduced asthma, deafness, common colds, liver disease, and falls in the elderly, and improved infant development.<sup>2</sup>

The crux of the issue, however, appears to be how older studies categorized “abstainers” versus “moderate drinkers.” A closer look at study subjects reveals that “abstainers” had higher baseline risks and unfavorable socioeconomic factors and included sick quitters, which systematically biased nondrinkers to ill health.

If we now accept that drinking can harm our health and shorten our lives, how will this impact our behavior? Alcohol is a ubiquitous social lubricant, and it can be hard to avoid.

What do you think—is it time to raise a mocktail and toast Sober October? Or do you plan to keep calm and pour on? ■

—Caitlin Dunne, MD, FRCSC

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# Connecting and *tree-ting* with nature

The fragile symbiosis between human beings and our planet is at risk. Patient–planetary health co-benefit frameworks are increasingly being recognized, and health professionals are encouraged to take a more active role in climate change mitigation efforts.<sup>1</sup>

My efforts to provide good patient care require more consideration of the planet, and there are many recognized actions that health professionals can pursue in this regard.<sup>1</sup> Connecting within nature is an action I can promote in my practice.<sup>1</sup>

My knowledge and love of trees have grown exponentially since I met my partner, a horticulturalist; his passion for trees is infectious. I feel connected to nature when I am among trees. Not only do they provide oxygen, absorb greenhouse gases, prevent soil erosion, produce food, and provide shelter, but these ancient organisms also offer me solace. The revitalizing aroma of my coffee in the morning; the melodious sound of a western meadowlark perched on a giant Colorado spruce; the refreshing green space that exists at my home in the form of Norfolk pines, fig trees, swamp oaks, and hibiscus; the fruit-bearing orchard; and my invigorating runs in the forest, with its earthy aroma, all contribute to my inner peace.

I was also recently introduced to the concept of forest bathing by a friend in Kamloops, who is always trying to better our planet while practising as a neurologist. She reminisces about how, for her, forest bathing became a retreat and a peaceful refuge, alone and with others, during the pandemic. Forest bathing, or *shinrin-yoku*, is a meditative practice that involves being present with and mindful of your senses while you are in a woodland setting. It was conceptualized in the 1980s by the Japanese Ministry of Agriculture, Forestry and

Fisheries to prevent further nature deprivation and protect the diminishing forests and is based on a concept of reciprocity. As people immerse themselves in nature and receive physical and mental benefits, they want to protect and preserve this environment.<sup>2</sup> Studies have shown that *shinrin-yoku* can lower cortisol concentrations, pulse rates, and blood pressure.<sup>2</sup>

As forest bathing becomes more popular in Western culture, we can also take inspiration from the practices followed by Indigenous Peoples that emphasize a spiritual bond with nature and a responsibility to respect, nurture, and protect the land.

As for local academic research, the Multidisciplinary Institute of Natural Therapy (<https://mint.forestry.ubc.ca>), an initiative of the University of British Columbia's Faculty of Forestry, is exploring the physiological and psychological effects of forest therapy on humans. It is developing innovative ways of bringing the sounds, scents, and lighting of the forest indoors—virtual forest bathing—making it accessible to all.

My efforts to help patients connect with nature are gaining momentum. I have created a mini–green space in my clinic. The waiting room is full of plants and small trees, and the TV plays the nature channel, so the sound of nature emanates in every room. My patients' favorite room in the clinic has a wall-sized mural of a forest, and they always comment on how calm they feel in that space.

I am also a registered prescriber of the PaRx program, whereby physicians can offer a “prescription for nature,” asking patients to be present in nature for 2 hours per week, 20 minutes at a time, and a Discovery Pass, which reduces barriers to nature across Canada. PaRx is an evidence-based program that originated in the US over a decade ago and was launched here in November 2020



Dr Chahal with her family at Kew Gardens in London, UK.

by the BC Parks Foundation, expanding to many provinces since then. The PaRX website ([www.parkprescriptions.ca](http://www.parkprescriptions.ca)) lists numerous studies showing how spending time in nature has positive effects on human health.

Finally, having participated in Doctors of BC's annual Walk with your Doc event (<https://walkwithyourdoc.ca>), I wonder whether next year's walks could be organized as forest-bathing events.

Ultimately, whatever the impetus, I encourage everyone to connect with nature and perhaps even hug a tree. ■

—Jeevyn K. Chahal, MD

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