

## Main points

In 2018, there were 1,269 alcohol-related deaths, on the basis of the old National Statistics definition (details of which are given in the [methodology document](#)); an increase of 34 (3%) compared with 2017. This was the highest annual total since 2010, being slightly more than the 1,265 registered in 2016.

The number of alcohol-related deaths was relatively stable, at roughly 600 per year, during the 1980s. Thereafter, the general trend seems to have been rapid increases during the 1990s and early 2000s, to around 1,500 per year in the mid-2000s. The figure of 1,546 in 2006 was the largest so far recorded. For the next six years, the general trend was downward, reaching a recent low of 1,080 in 2012. However, rises in four of the past six years (including the large increase in 2016) and a rise in the 5-year moving average (Chart 1) suggest an upward general trend in recent years.

These figures may fluctuate from year to year. [Chart 1](#) shows the number for each year, together with the 5-year moving annual average (as an indication of any overall trend) and the likely range of statistical variability around it (which is explained in '[Alcohol Deaths - Methodology](#)'). It will be seen that almost all the year-to-year fluctuations over the period since 1979 have been within what would be expected to be the likely range of statistical variability around the general trends described earlier.

Minimum unit pricing for alcohol was implemented in Scotland on 1 May 2018, with a minimum price of 50p per unit. The 3% increase in the number of alcohol-related deaths between 2017 and 2018 is not conclusive evidence on whether or not the policy is working because (for example) it is well within the range of the 'random' year-to-year fluctuations that have been seen in many previous years and, in any case, the figure for 2018 as a whole includes deaths which were registered in four months (January to April 2018) in which there was no minimum unit price for the sale of alcohol. Depending on the scale of future years' numbers, it could be a long time before one could be confident that statistics of alcohol-related deaths provide clear evidence of the success or otherwise of minimum unit pricing.

[Table 1](#) shows that the 1,269 alcohol-related deaths in 2018 consisted of 832 male deaths and 437 female deaths. Over the years since 1979, there have been roughly twice as many male deaths as female deaths, with the two figures tending to rise and fall together (although there have been some exceptions, as the ratio has been as low as 1.4:1 and as high as 2.4:1).

In 2018, there were 141 alcohol-related deaths of people in the 30-44 age-group, 21 more than in 2017 but still the sixth lowest figure since 1993 (when there were 97 alcohol-related deaths of 30-44 year olds, the lowest since then being 120 in 2017). The number of deaths of people aged 45-59 was 497, three more than in 2017, having not changed much in recent years (it was 491 in 2015 and 503 in 2016). There was a rise of three in deaths of 60-74 year olds, to 485: a fifth consecutive

increase, and the highest figure for that age-group since 2006 (when it was 523). The 138 deaths of people aged 75 and over was nine more than in 2017, and the second highest number ever recorded for that age-group (the largest figure being 147 in 2016). There were 8 deaths aged under 30, two fewer than in 2017 (deaths in this age group have fluctuated between 8 and 19 over the last decade). The table shows that the 45-59 age-group has had the largest number of alcohol-related deaths in almost every year since 1979.

The final three columns of the table show the average age at death for alcohol-related deaths: in 2018, this was 60.1 years, and was slightly higher for males (60.4) than for females (59.5). It has not changed much over the period since 1979: while there have been year to year fluctuations, it has remained between 55 and about 60 years (the lowest value in the period was 55.6 in 1999, and the highest 60.1 in 2018), although it seems to have increased recently, as the five largest values are in the five latest years (2014: 58.5; 2015: 58.7; 2016: 59.7; 2017: 59.9; 2018: 60.1).

[Table 2](#) and [Table 3](#) give figures for each NHS Board area and council. As the figures can fluctuate markedly from year to year, 3-and 5-year averages are shown for NHS Boards and 5-year averages are shown for councils. This should indicate better any overall trend.