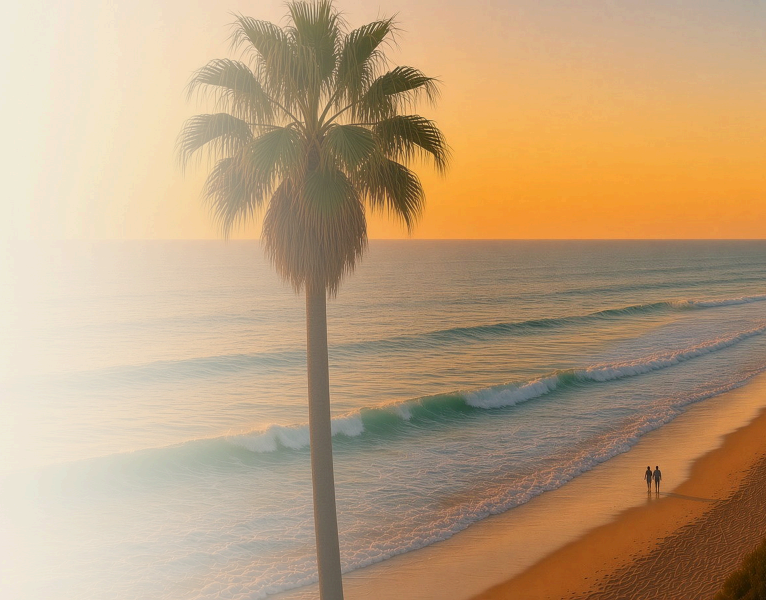
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The Glass of Wine Advice, Revisited

Better studies no longer show a heart benefit from drinking. What the newer evidence says, and what to do with it.

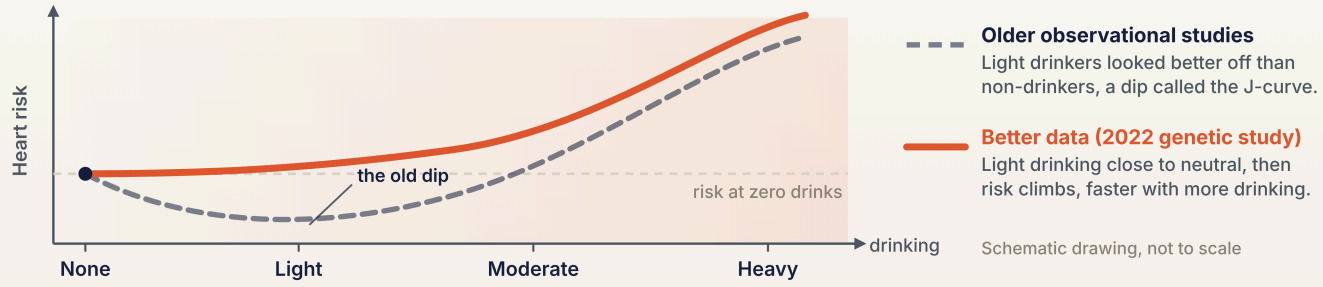
Roughly 8%
higher long-term AFib risk for each daily drink, on average

45%
less AFib coming back over six months in AFib patients who cut from about 17 drinks a week to 2

2 or fewer
drinks a week, Canada's low-risk threshold since early 2023

WHERE THE OLD ADVICE CAME FROM

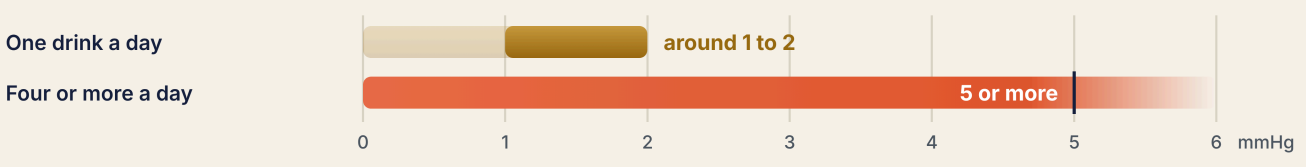
The J-curve didn't hold up



The non-drinkers in older studies included people who had quit because they were already sick, and moderate drinkers tended to be healthier and wealthier. In a large 2022 genetic study, the protective effect of light drinking all but vanished.

THE CLEANEST SIGNAL

Blood pressure climbs with the dose



A 2023 analysis of nearly twenty thousand adults found a straight-line rise with no threshold below which the effect disappeared. Cutting back lowers blood pressure measurably, often a few millimeters within weeks.

Less, and not as protection

If you don't drink, there is no reason to start. If you enjoy a glass of wine with dinner, the risk is small and you can take it with eyes open. If you drink more than that, cutting back pays off within weeks to months.

YOUR LEVEL, WHAT HELPS AND WHEN TO SEE YOUR PHYSICIAN ARE ON THE BACK

WHAT TO DO WITH IT

Find your level and what helps

CANADA'S 2023 GUIDANCE

Where the line sits now

2 or fewer	3 to 6	7 or more
drinks a week	drinks a week	drinks a week
Low risk	Moderate risk	Increasingly high risk

The old Canadian limit was up to fifteen drinks a week for men. The WHO said in 2023 that no level of drinking is safe for our health.

IF YOU

Don't drink	Don't start for your heart.
Drink lightly	The risk you add is small. Track what you drink for a month, since most people underestimate by a factor of one and a half to two.
Drink moderately or heavily	Cutting back has measurable benefits. Blood pressure drops, AFib episodes get less frequent and sleep gets deeper.
Have a reason to aim near zero	AFib, hard-to-control blood pressure, a strong family history of breast or colon cancer, liver disease, or pregnancy or trying to conceive. For AFib, the 2023 U.S. guideline says to "minimize or eliminate" alcohol.

BEYOND BLOOD PRESSURE

Stroke	Light drinking shows no clear protection in genetic studies. Heavy drinking raises stroke risk, with bleeding strokes rising the most.
Cancer	Alcohol causes at least seven kinds, including breast, colon, mouth, throat, esophagus, voice box and liver. Breast cancer risk in women rises measurably at one drink a day. A 2025 US Surgeon General advisory ranks it the third leading preventable cause of cancer.

TALK TO YOUR PHYSICIAN SOON

Rhythm symptoms	New palpitations, a feeling of an irregular heartbeat, or a wearable alert that flags AFib after drinking. Any of these deserves an ECG and a cardiology evaluation. With fainting, chest pain, trouble breathing or confusion, call 911.
Breathlessness	New shortness of breath, especially with exertion, if you drink regularly. It can be an early sign of alcohol affecting the heart muscle.
Blood pressure creep	Pressure that has crept up in a regular drinker despite a stable lifestyle and medications.
Hard to cut back	Withdrawal symptoms when you try, or drinking that interferes with sleep, work or relationships. Talk with your primary care physician or an addiction medicine specialist. Heavy drinkers shouldn't stop suddenly. Seizures or hallucinations after stopping mean call 911.

HOW FAST IT PAYS OFF

Sleep improves quickly, sometimes within nights. Blood pressure usually responds within a few weeks. AFib often drops within one to two months in people who cut back a lot. Cancer risk and overall survival improve over years.

READ THE FULL ARTICLE

damianrasch.com/
alcohol-no-safe-amount

For education only, and not a substitute for advice from your own physician. Sources include a 2022 genetic study (JAMA Netw Open), the 2023 WHO statement, Canada's 2023 alcohol guidance, a 2020 AFib trial (NEJM), the 2023 ACC/AHA/ACCP/HRS AFib guideline and a 2023 blood pressure analysis.

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