Alcohol consumption and harms dashboard: update briefing



This briefing presents key trends in alcohol retail sales and wholly attributable alcohol health harms. The trends presented in this report are also available on the publicly accessible Public Health Scotland (PHS) Alcohol Consumption and Harms Dashboard.

From 2017 to 2022, PHS (and previously NHS Health Scotland) produced an annual monitoring report as part of the **Monitoring and Evaluating Scotland's Alcohol Strategy (MESAS)** programme of work. In an effort to bring all of our data on alcohol and related harms together and onto a more interactive platform, the data from the MESAS monitoring report is now incorporated into the **Alcohol Consumption and Harms Dashboard**. The dashboard presents data and evidence around key trends in alcohol consumption and alcohol-related health and social harms, updated as data become available. Local reports showing indicators by health board or local authority can be downloaded from the dashboard, where data are available.

This briefing accompanies the latest updates to the dashboard, which include alcohol retail sales estimates, wholly attributable alcohol hospital and deaths statistics, crime and justice indicators, and self-reported consumption indicators.

Preventing alcohol harm

Alcohol is a leading cause of poor health and early death in Scotland, and there are significant inequalities in this harm. However, this is preventable. Reducing and preventing the harm caused by alcohol, including narrowing health inequalities, is possible but requires a concerted effort and coordinated approach. The data outlined in this briefing highlights the need for further action to prevent the burden of harm caused by alcohol. PHS's **alcohol policy briefing** outlines key outcomes and inequalities in harm from alcohol in Scotland, and describes PHS's role in reducing these harms.

Key points





Both wholly attributable alcohol death and hospital admissions rates were twice as high for males as they were for females.

Total alcohol retail sales



In 2024, an estimated total of 41.9 million litres of pure alcohol were sold in Scotland.

This is equivalent to an average of 9.0 litres (L) sold per adult per year in Scotland (around 17.3 units of alcohol sold per adult per week). This is the lowest level in the time series but is higher than the amount sold per adult in England & Wales (8.0 L sold per adult per year).

Excluding the proportion of the population that does not drink alcohol, adult drinkers in Scotland in 2024 were estimated to consume 21.6 units of alcohol per week (11.3 L of alcohol per year).



Volume of pure alcohol sold per adult per year in Scotland and England & Wales, 2017 to 2024

Alcohol retail sales by on and off-trade

In 2024, an estimated 31.9 million L of alcohol were sold in off-trade premises in Scotland, equivalent to 6.8 L sold per adult per year. This is a decrease from 2023. This is the lowest level in the time series but is higher than the amount sold per adult in off-trade premises in England & Wales in 2024 (5.9 L sold per adult per year).

In 2024, the amount of alcohol sold in on-trade premises, such as pubs, clubs and restaurants, in Scotland, was slightly lower than the amount sold in 2023 (10.1 million L in 2024 compared to 10.6 million L in 2023). This is equivalent to 2.2 L sold per adult in 2024 and is the same as the amount sold per adult in on-trade premises in England & Wales.

The majority (76%) of alcohol sold in Scotland in 2024 was sold in off-trade premises, such as supermarkets and other off-licences. While total off-trade sales have declined since 2017, the proportion of alcohol sold in the off-trade has increased from 73% in 2017.

Volume of pure alcohol (litres) sold per adult (16+) per year in Scotland and England & Wales, by trade sector, 2017 to 2024



Source: Circana, Nielsen IQ

While both on-trade and off-trade alcohol sales have declined over time, restrictions related to the COVID-19 pandemic in 2020 and 2021 had an impact on the distribution of sales between the two sectors. In 2023, PHS published a report, **The impact of the COVID-19 pandemic on alcohol consumption and harm in Scotland and England: An evidence summary**, which examines the impact of those restrictions in more detail.

Alcohol pricing

In 2024, the average price per unit of alcohol in Scotland was 72p in the off-trade and £2.29 in the on-trade.

The average price per unit of alcohol in the off-trade in Scotland has increased from 68p in 2023. In England & Wales, it has increased from 65p in 2023 to 67p in 2024.

The average price per unit of alcohol in the on-trade in Scotland has also increased, from £2.22 in 2023. In England & Wales, it has increased from £2.14 in 2023 to £2.21 in 2024.





Source: Circana, Nielsen IQ

In 2023, PHS published the final report on the independent evaluation of the impact of minimum unit pricing for alcohol in Scotland, **Evaluating the impact of minimum unit pricing for alcohol in Scotland: A synthesis of the evidence**.

Alcohol health harms

Alcohol health harms can be characterised as wholly or partially attributable to alcohol consumption.

- Wholly attributable harms are those which are directly and entirely related to alcohol consumption, e.g. alcoholic liver disease. These are sometimes called 'alcohol-specific'.
- **Partially attributable harms** are those for which alcohol consumption is one of a range of possible causative factors, e.g. liver cancer. These are sometimes called 'alcohol-related'.

In this report, only wholly attributable alcohol harms are reported; partially attributable harms statistics will be updated in the dashboard later this year. The dashboard presents alcohol health harms by Scottish Index of Multiple Deprivation (SIMD), age, sex and local area (health board and local authority).

Wholly attributable alcohol deaths



In 2023, 1,270 people in Scotland died from a cause wholly attributable to alcohol, which equates to an average of about 24 people per week.

The rate of wholly attributable alcohol deaths in Scotland has changed over time. From the 1980s, the wholly attributable alcohol death rate increased to a peak in 2006 (28.4 deaths per 100,000 population). Between 2006 and 2012, the rate declined by just over a third (18.4 deaths per 100,000 population in 2012). McCartney et al¹ explored plausible causes for these changes. They concluded that incomes trends and increased alcohol availability explain part, but not all, of this rise and fall.

1 Explaining trends in alcohol-related harms in Scotland, 1991–2011 (I): the role of incomes, effects of socio-economic and political adversity and demographic change - ScienceDirect and Explaining trends in alcohol-related harms in Scotland 1991–2011 (II): policy, social norms, the alcohol market, clinical changes and a synthesis - ScienceDirect From around 2012, wholly attributable alcohol deaths started to rise again. In 2023, the rate of wholly attributable alcohol deaths was 22.6 per 100,000 population.

There remain large inequalities in wholly attributable alcohol death rates. In 2023:

- The wholly attributable alcohol death rate in the 10% most deprived areas was over six times higher than in the 10% least deprived areas (54.4 and 9.0 deaths per 100,000 population, respectively).
- The wholly attributable alcohol death rate was more than twice as high among males than females (31.8 compared with 14.2, per 100,000 population).
- The 10-year age group with the highest wholly attributable alcohol death rate was 55 to 64 years (50.9 per 100,000 population). For males, the death rate in this age group was 66.7 per 100,000 population, compared with 36.0 per 100,000 population for females.
- Wholly attributable alcohol death rates by age have largely followed the Scottish trend described above. Since 2012, when rates started to increase, the largest increase has occurred in the age group 65 years and over. In that age group, the rate in 2023 was almost two-thirds higher than it was in 2012 (41.1 compared to 25.5, per 100,000 population).

European age-sex standardised rate (EASR) per 100,000 population of wholly attributable alcohol deaths per year by SIMD in Scotland, 1997 to 2023



European age-sex standardised rate (EASR) per 100,000 population of wholly attributable alcohol deaths per year by sex in Scotland, 1981 to 2023



European age-sex standardised rate (EASR) per 100,000 population of wholly attributable alcohol deaths per year by 10-year age group in Scotland, 1981 to 2023



Wholly attributable alcohol hospital admissions



In 2023/24, there were 29,829 wholly attributable alcohol hospital inpatient stays in general acute hospitals; this is equivalent to an age-sex standardised rate of 548 stays per 100,000 population.

In total in 2023/24, 19,710 people in Scotland were admitted to a general acute hospital with a diagnosis wholly attributable to alcohol in 2023/24, meaning that some people were admitted more than once.

The rate of hospital admissions wholly attributable to alcohol in Scotland has changed over time. From the 1980s, the rate increased to a peak in 2007/08 (855 admissions per 100,000 population). Since then, rates have steadily declined. The largest decline occurred between 2021/22 and 2022/23, from 615 to 532 admissions per 100,000 population.²

There remain large inequalities in wholly attributable alcohol hospital admissions. In 2023/24:

- The rate of wholly attributable alcohol hospital admissions in the 10% most deprived areas in Scotland was over six times higher than in the 10% least deprived areas (1,351 per 100,000 population compared with 201 per 100,000 population).
- The wholly attributable alcohol hospital admissions rate was more than twice as high among males than females (771 per 100,000 population compared with 325 per 100,000 population).
- The 10-year age group with the highest wholly attributable alcohol hospital admissions rate was 55 to 64 years (909 per 100,000 population). For males in this age group, the hospital stays rate was 1,260 per 100,000 population, compared with 557 per 100,000 population for females in the same age group.

² Trends for wholly attributable alcohol deaths and hospital admissions differ over time and may not follow the same pattern. Green et al (2017) found that while wholly attributable alcohol mortality in England largely followed consumption patterns, hospital admissions did not. They outline several factors that may help to explain this but suggest it as a direction for future research.

The dashboard also presents hospital statistics by condition. In 2023/24, the leading conditions for wholly attributable alcohol hospital stays in general acute hospitals were:

- withdrawal state, 158 per 100,000 population
- harmful use, 152 per 100,000 population
- acute intoxication, 113 per 100,000 population
- alcoholic dependence syndrome, 78 per 100,000 population
- cirrhosis, 65 per 100,000 population. In 2025, PHS published a report on the Future prevalence of burden of chronic liver disease, including cirrhosis, as part of the Scottish Burden of Disease programme of work.

European age-sex standardised rate (EASR) per 100,000 population of wholly attributable alcohol hospital stays in general acute hospitals per year by SIMD in Scotland, 1997/98 to 2023/24





European age-sex standardised rate (EASR) per 100,000 population of wholly attributable alcohol

European age-sex standardised (EASR) per 100,000 population of wholly attributable alcohol hospital stays in general acute hospitals per year by 10-year age group in Scotland, 1997/98 to 2023/24



Notes on data sources and methods

Detailed information on data sources and methods for calculating the figures presented in this report can be found on the **PHS Alcohol Consumption and Harms Dashboard** in the Data Sources and Methods tab.

Alcohol retail sales

Please note that the alcohol retail sales figures presented are estimates.

PHS uses off-trade alcohol retail sales data from Circana to produce per-adult sales estimates contained in this briefing and the Alcohol Consumption and Harms Dashboard; copyright for off-trade data remains with Circana. Please note that the off-trade alcohol sales data presented in this report and in the dashboard are not comparable with data published in previous MESAS Monitoring Reports, as those data were obtained from a different data provider. For a comparison of different off-trade data sources for estimating alcohol retail sales, please see the report titled **Estimating population alcohol consumption in Scotland: the impact of using different sources of alcohol retail sales data** on the PHS website.

PHS obtains on-trade alcohol retails sales data from Nielsen IQ to produce per-adult sales estimates contained in this briefing and the Alcohol Consumption and Harms Dashboard, and copyright for these data remains with Nielsen IQ. On-trade data were produced in 2025 based on OPM data — 2024 Period 13.

Alcohol deaths

Please note that in this report, and on the **PHS Alcohol Consumption and Harms Dashboard**, deaths wholly attributable to alcohol are included if the deceased was resident in Scotland, while National Records of Scotland (NRS) includes deaths that occur in Scotland regardless of the residence of the deceased. Therefore, the figures presented here are ~1% lower per annum than those reported by NRS.

Alcohol hospital statistics

For information around terminology used in the alcohol hospital statistics, please see this report: **Background, glossary, and metadata**.

Further information

- Data from this publication are available from the **publication page** on the PHS website.
- Our statistical practice is regulated by the Office for Statistics Regulation (OSR).
- Visit **www.publichealthscotland.scot** for further information about our statistics and PHS as an Official Statistics producer.

PHS and Official Statistics

PHS is the principal and authoritative source of statistics on health and care services in Scotland. PHS is designated by legislation as a producer of 'Official Statistics'.



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