

Alcohol-related harm during the COVID-19 pandemic

In 2020, deaths from alcohol-specific causes in England and Wales increased by almost 20% compared with 2019, according to the UK's Office for National Statistics; 80% of the alcohol-specific deaths were due to alcohol-related liver disease.

While the causes of this increase will be multifactorial and take time to unravel completely, it seems likely that it is at least in part related to the COVID-19 pandemic. When analysed by quarter, rates were much the same in quarter one of 2020 as in quarter one of 2019, but were significantly higher in each subsequent quarter, coinciding with the introduction of lockdown measures. Data from Public Health England suggest that although the proportion of adults reporting no alcohol consumption grew during lockdown, consumption increased in those who drank most heavily (35 units or more a week); other studies suggest that lockdown may have led to increased consumption or relapse in individuals with alcohol use disorders.

Data presented at Digestive Disease Week 2021 suggest that increases in alcohol-related liver disease during the pandemic are likely to be seen elsewhere,

too: an analysis across a health-care system in Rhode Island, USA, showed an increase, relative to 2019, of almost 60% in the proportion of inpatient consults for alcohol-related gastrointestinal and liver diseases during lockdown (and a 53% increase for acute alcohol-related hepatitis). In the reopening phase, the proportion of inpatient consults for alcohol-related digestive conditions remained higher than in 2019.

Problems with alcohol are often under-treated: a recent study from the USA showed that, although 81% of individuals who met the criteria for alcohol use disorder had received medical care during the previous year, only 12% had been told to reduce their drinking and just 6% actually received treatment. As the pandemic evolves and health-care provision returns to a greater degree of normality, it is vital that clinicians actively screen for and address alcohol misuse. Collaboration between clinical and alcohol services is needed to ensure these patients have ready access to alcohol counselling and addiction treatments, and for those with alcohol-related liver disease to obtain the care they need.

■ *The Lancet Gastroenterology & Hepatology*



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For the **Office for National Statistics data** see <https://bit.ly/3vx15Vb>

For the **Public Health England data** see <https://analytics.phe.gov.uk/apps/covid-19-indirect-effects/>

For the **study on care received by patients with alcohol use disorder** see *Alcohol Clin Exp Res* 2021; published online May 16. <https://doi.org/10.1111/acer.14609>

Ingestion of high-power magnets: cause for concern

Data from four paediatric surgical centres in the UK show that admissions of children with foreign body ingestion increased by 56% between 2016 and 2020. Although coins were the most common objects ingested (37% of admissions), 21% of admissions were for magnet ingestion, and 17% for button batteries. Of most concern, the incidence of magnet ingestion was five times higher in 2020 than in 2016. While only one button battery needed surgery to be retrieved, this was required for 42% of children who had ingested magnets. Magnets caused 80% of all complications encountered.

The growing ingestion of small, rare-earth toy magnets—often marketed in sets as executive desk toys for adults—represents a major cause for concern. While ingestion of one magnet will not usually need intervention, ingestion of multiple magnets represents a serious health hazard warranting urgent investigation. The attractive forces of the magnets are so strong that they can find each other when in different regions

of the bowel; the resulting adhesion can cause bowel perforation, volvulus, fistula, and severe infection.

Regulations regarding use of rare-earth magnets in toys vary globally—eg, they are banned in New Zealand, while magnet toys sold in the UK should be accompanied by a warning (although these are not always prominently displayed). In the US, the Consumer Product Safety Commission has actively pursued legislation in this area, and for a period the strength of magnets that were sold to be used in clusters of magnets was limited. Documentation on the Commission's website suggests that a technical review is underway, with a view to proposing new regulations in 2022.

Legislative means to limit exposure of children to the risks posed by ingestion of rare-earth magnets must be strengthened (for instance, via regulation of advertising online). Public health messaging is also essential to raise awareness of the risks among the general public.

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For the **report on paediatric foreign body ingestion** see *Arch Dis Child* 2021; published online May 11.

<https://doi.org/10.1136/archdischild-2021-322106>

For the **CPSC's update** see <https://www.cpsc.gov/s3fs-public/Informational%20Briefing%20Package%20Regarding%20Magnet%20Sets.pdf?FKVcZpHmPKWCZNb7jE16r0a31WV72PI>