Causes and risk factors for late-onset (50+) alcohol use disorder or heavy use – a systematic review.

J. Emiliussen 1, A. S. Nielsen 1, K. Andersen 2

1 Unit of Clinical Alcohol Research, University of Southern Denmark, Odense, Denmark.
2 University of Southern Denmark, Odense, Denmark.

Background

Until 1994 the DSM-III factually claimed that alcohol problems rarely begin after the age of 45. Nevertheless, multiple studies have since concluded that number of elderly with AUD is increasing.

One subgroup among elderly with AUD is the “late-onset” abusers. Among others, Wetterling et al. (2003) in a descriptive study, that found that as much as 16.8% (n=45 of 268) of their sample, had late-onset AUD (after the age of 45).

Late-onset AUD is a new field of research that has only recently been acknowledged.

Purpose

This review seeks to expand the description and understanding of late-onset AUD by reviewing the available literature on the subject.

Review question:

What causes and risk factors have been identified for late-onset heavy drinking and alcohol use disorder?

Method

A systematic review was conducted using the PRISMA guidelines.

Search terms were found using a thesaurus and by expert consultation.

We searched MEDLINE; EMBASE, PubMed and PsycInfo on the 19 may 2015.

The inclusion criteria were as follows:

• Explicit data on causes for late-onset in results section
• Define late-onset age 50+
• Quantitative study >100 participants
• English or Danish

See figures 1-3

General description

We included nine studies in the final review. They were published between 1979 and 1998. The studies were mainly correlational studies, two were surveys and one was a prospective study. Sample sizes varied from 216 participants to 2,325 participants. The studies utilized different conceptions of late-onset AUD, were two set the onset age at 50, and the rest – but one, set the onset age at 60 (the last one, at age 63).

Summary of Main Results

The methodologies and outcome measures differed across the studies. This meant that it was impossible to conduct a meta analysis. Instead, we utilized a descriptive analysis of the results. The results clustered around five different topics.

Factors related to late-onset alcohol use disorders and heavy use of alcohol.

Further research

We suggest a qualitative approach to capture the diversity of late-onset AUD, and to understand how this is different from earlier onset AUD and other kinds of AUD. From this research we imagine that clearer definitions could arise, which in turn could realign the quantitative data collection with its subject matter.

Conclusion

The present systematic review, illustrates that there is only limited evidence for any specific factors being the cause for late-onset AUD. It seems that chronic stress and loss of role or work identity are related to late-onset AUD, which coincides with the existing literature.

These factors have been identified in relatively old studies, and qualify for further, more contemporary investigation.

This review has pointed out the methodological difficulties in the existing literature, and has suggested a qualitative approach to reconnect the research results with the subject matter.

The diversity of the studies limits the general conclusion.

Acknowledgements

We extend our thanks to:

• The Lundbeck Foundation (who has given unconditional support)
• The Region of Southern Denmark
• The University of Southern Denmark