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ALCOHOL CONSUMPTION PATTERNS AND RISK FACTORS AMONG CHILDHOOD CANCER SURVIVORS COMPARED TO SIBLINGS AND GENERAL POPULATION PEERS

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ABSTRACT

Objective: This study describes alcohol consumption patterns among long-term survivors of pediatric cancer compared to sibling controls and a national sample of healthy peers. General and cancer-related risk factors for heavy drinking among survivors are described. **Methods:** Data were collected from adult survivors of pediatric cancer (N=10,398), a sibling cohort (n=3,034) and peers (n=4,774) from a national population-based survey. National data were weighted to reflect the distribution of survivors by age, gender and race. **Results:** Survivors, compared to peers, were less likely to be heavy drinkers (OR_{adj}=0.8; CI 0.7-1.0) and did not differ significantly on current drinking (OR_{adj}=1.1; 95% CI, 1.0-1.2) and risky drinking (OR_{adj}=0.9; CI 0.8-1.0). Survivors, compared to siblings, were less likely to be current, risky and heavy drinkers. Survivors and peers had similar risk factors for heavy drinking. Survivors' risk factors for heavy drinking include being age 18-21 (OR_{adj}=2.0), male (OR_{adj}=2.1), having high school education or less (OR_{adj}=3.4), and drinking initiation at a young age (OR_{adj}=6.9). Early initiation of drinking (less than age 14) is a significantly stronger predictor of later heavy drinking for survivors compared to peers. Among survivors, symptoms of depression, anxiety, or somatization, activity limitations and anxiety about cancer were associated with significantly higher risk for heavy drinking. Cognitively compromising treatment, brain tumors and older age at diagnosis were protective. **Conclusions:** Adult survivors of childhood cancer drink similarly to peers despite their more vulnerable health status and higher risk for secondary malignancy and other complications. Sibling drinking warrants further research. Among survivors, distress and poorer health are associated with heavy drinking. Screening for alcohol consumption should be instituted in long-term follow-up care and interventions among adolescent survivors and siblings should be established to reduce risk for early drinking.

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