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Drinking Patterns Among Individuals With Alcohol Use Disorder: Analysis of the 2022–2024 National Survey on Drug Use and Health (NSDUH) Survey

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Margaret Hoyt[1], Sarah E. Curtis[1], Sarah Akerman[1], Maria A. Sullivan[1,4], Xian Zhou[2], Eric Davenport[3], Jinyi Wang[3], Deborah S. Hasin[4]

[1]Eli Lilly and Company, Indianapolis, IN, USA; [2]Syneos Health, LLC, Morrisville, NC, USA; [3]RTI Health Solutions, Research Triangle Park, NC, USA; [4]Department of Psychiatry, Columbia University Irving Medical Center, New York, NY, USA

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OBJECTIVE

- To characterize adults with AUD in the US, stratified by severity level, including demographics, DSM-5 diagnostic criteria, WHO drinking risk level, drinking patterns, healthcare professional interventions, and treatment patterns.

CONCLUSION

- High and very high-risk WHO drinking levels were observed across all AUD severity levels (mild, moderate, and severe).
- The most commonly reported DSM-5 criteria were a strong urge to drink alcohol and drinking more than intended across all AUD severities.
- Despite high levels of drinking in adults meeting criteria for AUD, intervention from HCPs was relatively low, highlighting the need for increased screening, disease education, diagnosis, and treatment.

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BACKGROUND

- Alcohol use disorder (AUD) is characterized by a persistent pattern of alcohol use, causing significant impairment or distress in health and daily life.
- Although more than 25 million adults in the US had AUD in 2025, it remains substantially undertreated. Of these, only 2.6% received pharmacological treatment for AUD in the past year.[1,2]

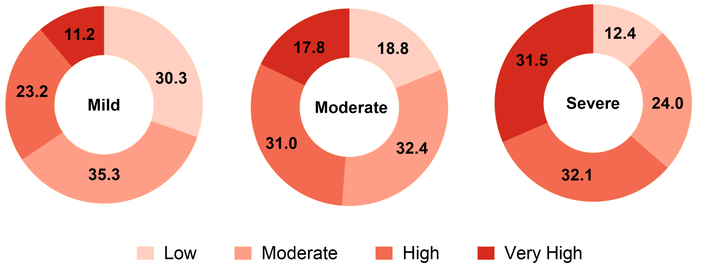
STUDY DESIGN

- This observational study analyzed self-reported data from the National Survey on Drug Use and Health (NSDUH) 2022–2024 annual surveys.
- This study included adults (aged ≥18 years) with AUD, defined as those reporting ≥2 DSM-5 symptoms in the past 12 months.
- All analyses were weighted to be nationally representative of the US adult population. Weighted percentages of outcomes were stratified by AUD severity.
- AUD severity was defined using NSDUH's imputed severity classification, based on the number of DSM-5 symptoms reported: mild (2–3), moderate (4–5), and severe (≥6).

AUD Severity Criteria (WHO vs DSM-5)

- Experiencing craving or strong urges to drink was the most common symptom in those with mild (54.5%) and severe (92.7%) AUD, while drinking more alcohol or for longer than intended predominated in moderate AUD (78.8%).
- WHO risk drinking levels are defined based on usual intake per day in the past 30 days; over a third (34.4%) with mild AUD were in the high/very high-risk level.

WHO drinking risk level, by AUD severity



Data are presented as weighted percentage. World Health Organization (WHO) risk drinking levels (RDLs): Low risk: 1–40 g (1–2.9 drinks) for men, 1–20 g (1–1.4 drinks) for women. Moderate risk: >40–60 g (>2.9–4.3 drinks) for men, >20–40 g (1.4–2.9 drinks) for women. High risk: >60–100 g (>4.3–7.1 drinks) for men, >40–60 g (>2.9–4.3 drinks) for women. Very high risk: >100 g (>7.1 drinks) for men, >60 g (>4.3 drinks) for women.

Individual DSM-5 symptoms, by AUD Severity



Data are presented as weighted percentage. *Percentage may be underestimated due to NSDUH data exclusions.

RESULTS

Baseline demographics were comparable across severities. For 15.0% of individuals, family income was below poverty. About half (50.6%) had used marijuana in the past year.

Characteristic (weighted frequency [weighted %])	Overall AUD (N=17,471)	AUD Severity		
		Mild (N=9,990)	Moderate (N=3,763)	Severe (N=3,718)
Weighted Frequency (x1000)	28,029	16,509	6,002	5,517
Weighted %	100.0	58.9	21.4	19.7
Age (years)				
18-20	1,322 (4.7)	761 (4.6)	309 (5.1)	251 (4.6)
21-25	3,926 (14.0)	2,240 (13.6)	898 (15.0)	788 (14.3)
26-49	14,328 (51.1)	8,046 (48.7)	3,209 (53.5)	3,073 (55.7)
50-64	5,701 (20.3)	3,526 (21.4)	1,075 (17.9)	1,099 (19.9)
≥65	2,752 (9.8)	1,936 (11.7)	511 (8.5)	305 (5.5)
Male	16,633 (59.3)	9,638 (58.4)	3,639 (60.6)	3,357 (60.8)
Race/Ethnicity				
Non-Hispanic White	17,892 (63.8)	10,448 (63.3)	3,925 (65.4)	3,519 (63.8)
Non-Hispanic Black/African American	3,362 (12.0)	2,033 (12.3)	704 (11.7)	624 (11.3)
Hispanic	4,964 (17.7)	2,911 (17.6)	1,036 (17.3)	1,017 (18.4)
Other	1,812 (6.5)	1,118 (6.8)	337 (5.6)	357 (6.5)
Body mass index (kg/m²)[1]				
<18.5 (underweight)	586 (2.2)	330 (2.1)	97 (1.7)	160 (3.0)
18.5 - <25 (healthy weight)	8,730 (32.2)	5,158 (32.2)	1,899 (32.7)	1,673 (31.7)
25 - <30 (overweight)	9,203 (33.9)	5,396 (33.6)	1,984 (34.1)	1,823 (34.5)
≥30 (obese)	8,614 (31.7)	5,152 (32.1)	1,831 (31.5)	1,631 (30.9)
Total family income at or below poverty[1]	4,209 (15.0)	2,198 (13.0)	1,005 (16.8)	1,006 (18.2)
Marijuana use in the past year	14,189 (50.6)	7,460 (45.2)	3,313 (55.2)	3,417 (61.9)

[1]Denominators may vary due to non-response or survey conditional branching

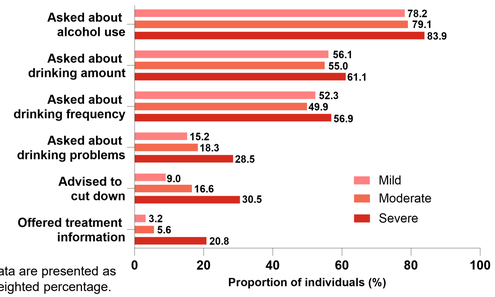
Drinking Patterns

- Frequency of binge drinking (≥4 drinks women/≥5 drinks men in 2 h) increases with severity in adults with AUD.
- Among those who reported drinking in the past 30 days, percentage with at least 6 binge drinking episodes: Mild AUD: 16.7%; Moderate AUD: 34.6%; Severe AUD: 46.4%.

HCP Interventions

- Overall, HCP screening for alcohol use was low, with fewer than 15% of participants with AUD reporting that they were offered an intervention.
- By severity, while >75% of individuals were asked about alcohol use, only about 50% were asked to quantify their use, and advice to cut down and offers of treatment information were each reported by <20%.

Doctor/HCP screening, past 12 months, stratified by AUD severity



Data are presented as weighted percentage.

Treatment-seeking Patterns

- Overall, 6% or fewer individuals with AUD received any form of treatment.
- By severity, treatment initiation rates were 3.5% for mild, 8.1% for moderate, and 24.6% for severe AUD.
- The most frequently utilized treatment was support group participation, used by 2.6% of those with mild AUD, 5.0% of those with moderate AUD, and 17.1% of those with severe AUD.

Limitations

- The data were self-reported and may be subject to recall bias or social acceptability bias.
- NSDUH does not include non-civilian, homeless, and incarcerated US populations, which may impact the generalizability of results.
- NSDUH survey did not include a confirmed AUD diagnosis of participants.

References: 1. Yue Y, Rothberg MB, Back SE, et al. (2026) J Gen Intern Med. doi:10.1007/s11606-025-10089-5; 2. Substance Abuse and Mental Health Services Administration (SAMHSA). July 2026.

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Abbreviations: AUD=Alcohol use disorder; DSM-5=Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision; HCP=Health care professional; N=total sample size; NSDUH=National Survey on Drug Use and Health; US=United States; WHO=World Health Organization

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