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Structural brain effects of alcohol use patterns in alcohol use disorder: a systematic review and meta-analysis

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Introduction: Alcohol Use Disorder (AUD) affects over 14% of the population and contributes to millions of premature deaths worldwide. Chronic alcohol use is associated with structural brain alterations, particularly in the prefrontal cortex, striatum, thalamus, and cerebellum. However, the relationship between specific drinking patterns (e.g., duration, intake, age of onset) and neuroanatomical changes remains poorly understood.
Objectives: This study aimed to identify consistent brain structural alterations in individuals with AUD and to explore dose-dependent effects of alcohol use patterns using a systematic review and meta-analysis.
Methods: Following PRISMA 2020 guidelines, we conducted a systematic review and voxel-based morphometry (VBM) meta-analysis of 28 gray matter and 8 white matter studies. Studies were included if they compared AUD patients with healthy controls. Meta-analyses and meta-regressions were performed using SDM-PSI (v6.22), applying TFCE-FWE correction ($p < 0.05$).
Results: Compared to controls, AUD patients showed significant gray matter reductions in the cingulate, insula, Heschl gyrus, and postcentral gyri. Higher AUDIT scores and longer use duration were associated with greater volume loss in frontal and cerebellar regions. Earlier age of onset predicted stronger deficits in prefrontal areas. Longer abstinence was linked to partial volume recovery in the corpus callosum. White matter studies revealed corpus callosum reductions and putamen changes associated with early alcohol initiation.
Conclusions: AUD is linked to widespread gray and white matter reductions. Meta-regressions demonstrate dose-response relationships and suggest partial brain recovery with abstinence, underscoring the importance of early intervention.

Disclosure of Interest: None Declared

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Smoking among healthcare workers: prevalence, knowledge and attitudes

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Introduction: Smoking remains a significant public health concern, particularly among healthcare workers, who are expected to promote health and wellbeing. The prevalence of smoking among healthcare professionals, their knowledge of smoking-related risks, and their attitudes towards smoking cessation in hospital settings are crucial factors in understanding the broader implications of tobacco use in healthcare environments.
Objectives: The aim of this study was to assess the prevalence of smoking among healthcare workers at Habib Thameur Hospital in Tunis, examine their knowledge about the dangers of smoking, and evaluate their attitudes towards smoking-related policies and smoking cessation efforts within the hospital.
Methods: This is a descriptive cross-sectional study conducted at Habib Thameur Hospital in Tunis in july 2025 involving all healthcare personnel. Data were collected using a pre-established questionnaire including socio-professional data, data on smoking behaviour and an assessment of nicotine dependence.
Results: We surveyed 111 healthcare staff with a mean age of 41.5 ±11.4 years, and a female predominance of 71.2%. The most represented professional category was paramedical staff (61.8%). Regarding knowledge about smoking, 47.7% believed that cigarette smoke poses the same danger to smokers and non-smokers, and 41.8% were unaware of the availability of smoking cessation consultation at the hospital. Half of those interviewed believed that a designated smoking area should be provided in hospitals, and 84.5% strongly agreed with the ban on smoking in hospitals. The survey revealed that 19.3% of healthcare professionals were active smokers, 2.8% were ex-smokers, and 35.8% were passive smokers. The mean age of onset of smoking was 19±4 years. The majority of smokers consumed an average of 15±5 light cigarettes per day. In terms of nicotine dependence, 33.3% of healthcare workers smoked their first cigarette within an hour of waking up. Regarding attitudes, 38.1% of healthcare workers smoked in their department in the presence of patients. Smokers tried to quit smoking in 76.2% of cases, and 95.2% wanted to quit in the future, with 33.3% reporting the need for psychological support. Passive smokers are exposed to tobacco smoke at work (61.7%), at home (23.4%), and both (14.9%). They leave the area without asking the smoker to stop in 73.3% of cases.
Conclusions: This study highlights a concerning prevalence of smoking among healthcare workers, despite their knowledge of the risks associated with tobacco use. It also underscores the need for stronger smoking cessation support and stricter enforcement of no-smoking policies within healthcare facilities. Given the influence of healthcare professionals on patient behavior, addressing smoking habits and attitudes among these workers is crucial for promoting a tobacco-free healthcare environment and setting an example for the public.

Disclosure of Interest: None Declared

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