As a general rule, there is no need to avoid alcohol because you have diabetes.

You should not drink alcohol if you:

• are pregnant or trying to get pregnant
• are breastfeeding
• have a personal or family history of drinking problems
• are planning to drive or engage in other activities that require attention or skill
• are taking certain medications. Ask your pharmacist about your medications.

Consider the following questions when deciding what is best for you.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Is my diabetes under control?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2  Am I free from health problems that alcohol can make worse such as disease of the pancreas, eye disease, high blood pressure, high triglycerides, liver problems, nerve damage or stroke?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3  Do I know how to prevent and treat low blood sugar?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you answered “no” to any of these questions, you should speak to your diabetes educator or health-care professional before drinking alcohol.

If you answered “yes” to all of these questions, it is OK to drink alcohol in moderation.

Moderate alcohol intake is limited to 2 standard drinks/day or less than 10 drinks/week for women; and limited to 3 standard drinks/day or less than 15 drinks/week for men.

This recommendation is the same for people without diabetes. For people with high blood pressure, alcohol should be limited to 1 drink/day for women and 2 drinks/day for men.
What is a “standard drink”?

1 standard drink (10 g of alcohol):

**Beer**
341 mL (12 fl.oz) of regular strength beer (5% alcohol)

**Spirits**
43 mL (1.5 fl.oz) of spirits (40% alcohol)

**Wine**
142 mL (5 fl.oz) of wine (12% alcohol)

Note: If you are carbohydrate counting, do not take insulin for the carbohydrate content of alcoholic drinks.

**Health risks of alcohol use**

You may have heard that alcohol has certain health benefits. However, any pattern of drinking can be harmful. Proven ways of improving your health include: healthy eating, being active, and being a non-smoker.

**The Diabetes Canada Clinical Practice Guidelines recommend that:**

- People with type 1 diabetes should be aware that moderate consumption of alcohol with, or 2 to 3 hours after, an evening meal may result in delayed low blood sugar (hypoglycemia) the next morning after breakfast, or up to 24 hours after alcohol consumption. This also applies to people with type 2 diabetes who are using insulin or insulin secretagogues.
- Alcohol should be limited to 2 standard drinks/ day or less than 10 drinks/ week for women, and limited to 3 standard drinks/ day or less than 15 drinks/ week for men.
- People with diabetes should discuss alcohol use with their diabetes health-care team.

**Risks for people with diabetes**

**Alcohol can:**

- affect judgement
- provide empty calories that might lead to weight gain if taken in excess
- increase blood pressure and triglycerides
- cause damage to liver and nerves including brain and sexual organs
- contribute to inflammation of the pancreas
- dehydrate the body which is very dangerous in someone with high blood sugar
- worsen eye disease

**For young people in particular, alcohol use:**

- can lead to addiction
- is associated with a dramatic increase in injuries and death
For those on insulin or some diabetes medications

Drinking alcohol can increase your risk of having low blood sugar. To reduce this risk, take the following steps:

**BEFORE drinking alcohol**

Eat regular meals, take your medication(s), and check your blood sugar levels frequently (keep your blood glucose meter with you).

- Always have a treatment for low blood sugar with you (such as 3 glucose tablets or 150 mL regular pop or 6 Life Savers®).
- Wherever you are, make sure someone with you knows your signs and symptoms of low blood sugar and how to treat it so they can help you.
- Be aware that glucagon, a treatment for low blood sugar, will not work while alcohol is in the body. Because of this, make sure that someone knows to call an ambulance if you pass out.
- Wear diabetes identification such as a MedicAlert® bracelet.

**WHILE drinking alcohol**

- Eat carbohydrate-rich foods when drinking alcohol. Some ideas:
  - Eat extra carbohydrate-rich foods if you are dancing, playing sports or doing other physical activity.
  - Always pour your own drinks. Use less alcohol and stretch your drinks with sugar-free mixes.
  - Drink slowly. Make your second drink without alcohol.

**AFTER drinking alcohol**

- Tell a responsible person that you have been drinking. They should look for low blood sugar symptoms.
  
  (eg.)

- Check your blood sugar before going to bed. Eat a carbohydrate snack if your blood sugar is lower than usual.
- Set an alarm or have a responsible person wake you up through the night and early morning – a delayed low blood sugar can occur anytime up to 24 hours after drinking alcohol.
- You need to get up on time the next day for any food, medication or insulin you normally take. Missed medication or insulin can lead to high blood sugar, ketones and diabetic ketoacidosis (DKA).
Carbohydrate and calorie content in some common alcoholic beverages and mixes
(The amounts listed are a general guide only)

<table>
<thead>
<tr>
<th>Beverage</th>
<th>Standard serving size</th>
<th>Energy (kcal)</th>
<th>Carbohydrate content (g)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Beer:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>regular</td>
<td>341 mL (12 fl.oz)</td>
<td>147</td>
<td>12</td>
</tr>
<tr>
<td>light</td>
<td>341 mL (12 fl.oz)</td>
<td>99</td>
<td>6</td>
</tr>
<tr>
<td>non-alcoholic*</td>
<td>355 mL (~12 fl.oz)</td>
<td>40-80</td>
<td>9-17</td>
</tr>
<tr>
<td>low carb*</td>
<td>341 mL (12 fl.oz)</td>
<td>96</td>
<td>3</td>
</tr>
<tr>
<td>Spirits/Hard liquor</td>
<td>43 mL (1.5 fl.oz)</td>
<td>98</td>
<td>0</td>
</tr>
<tr>
<td><strong>Liqueurs &amp; Cordials</strong></td>
<td>43 mL (1.5 fl.oz)</td>
<td>155-190</td>
<td>10-25</td>
</tr>
<tr>
<td><strong>Wine:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>regular</td>
<td>142 mL (5 fl.oz)</td>
<td>106-127</td>
<td>2-4</td>
</tr>
<tr>
<td>dessert</td>
<td>142 mL (5 fl.oz)</td>
<td>233-243</td>
<td>18-21</td>
</tr>
<tr>
<td>non-alcoholic</td>
<td>142 mL (5 fl.oz)</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td><strong>Cooler:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>regular</td>
<td>355 mL (12 fl.oz)</td>
<td>178-258</td>
<td>21-38</td>
</tr>
<tr>
<td>light*</td>
<td>330 mL (12 fl.oz)</td>
<td>100</td>
<td>1</td>
</tr>
<tr>
<td><strong>Mixes:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sugar free pop</td>
<td>250 mL (8 fl.oz)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Regular pop</td>
<td>250 mL (8 fl.oz)</td>
<td>107</td>
<td>28</td>
</tr>
<tr>
<td>Club soda</td>
<td>250 mL (8 fl.oz)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Tonic water</td>
<td>250 mL (8 fl.oz)</td>
<td>88</td>
<td>23</td>
</tr>
<tr>
<td>Orange juice</td>
<td>250 mL (8 fl.oz)</td>
<td>118</td>
<td>27</td>
</tr>
<tr>
<td>Tomato juice</td>
<td>250 mL (8 fl.oz)</td>
<td>44</td>
<td>9</td>
</tr>
<tr>
<td>Tomato and clam juice</td>
<td>250 mL (8 fl.oz)</td>
<td>123</td>
<td>28</td>
</tr>
</tbody>
</table>

Reference: Canadian Nutrient File, 2018; USDA Food Composition Databases, 2018; *Actual Label
The caloric and carbohydrate content may vary by brand, be sure to check the labels.

**THE BOTTOM LINE**

- If you do not drink alcohol, don’t start.
- If you choose to drink alcohol, intake should be moderate (daily intake should be limited to 2-3 drinks for adult men and 1-2 drinks for adult women). When drinking alcohol, make sure you know how to prevent and treat low blood sugar.
- Heavy alcohol drinkers (more than 21 drinks/week for men and more than 14 drinks/week for women) are strongly advised to reduce the amount of alcohol they drink. Heavy alcohol use can make blood sugar control more difficult and increases other health risks.
- Talk to your diabetes educator or health-care professional if you have questions.

Related article: *High blood pressure and diabetes*