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REFERENCIAS SOBRE CONSECUENCIAS RELACIONADAS CON EL CONSUMO DE ALCOHOL

[Drinking and Pleasure in Latin America](#)

[H Rosovsly - Alcohol and Pleasure: A Health Perspective, 2013 - books.google.com](#)

Chapter 7 Drinking and Pleasure in Latin America **Haydée Rosovsly** The use of alcohol in Latin cultures has a history dating from ... 91 spirits in Mexico such as aguardiente, mezcat ', and tequila, which were incorporated into the population's drinking habits (**Rosovsky**, 1985)

[Drinking patterns and their consequences](#)

[M Grant, J Litvak - 1998 - books.google.com](#)

... Dwight B. Heath and **Haydée Rosovsky** PART 3-A NEW APPROACH CHAPTER 12 221 The Implications for Measurement and Research Marjana Martinic CHAPTER 13 The Implications of Drinking Patterns for Primary Prevention, Education, and Screening Ann M. Roche and ...

Salud Publica Mex. 1992 Jul-Aug;34(4):378-87. [Liver cirrhosis mortality in Mexico. I. Relevant epidemiological characteristics]. [Article in Spanish] Narro-Robles J(1), Gutiérrez-Avila JH, López-Cervantes M, Borges G, Rosovsky H.

Previous studies have emphasized the impact of alcoholism on public health, especially on the incidence of liver cirrhosis, which ranks among one of the main causes of death in Mexico. Accordingly, the epidemiologic features of liver cirrhosis mortality (LCM) are examined, highlighting its historical trends, its geographical distribution and other risk factors like age and sex. The data show a consistently high LCM rate over time, male rates moving slightly up and female rates down. Proportional mortality has been increasing. The significant risk increment with age has determined LCM to be the leading cause of death for both sexes in the 30-64 years age group. A particularly interesting finding relates to the continuous excess of LCM seen in Mexico City and four surrounding states; on the contrary, in the northern states, LCM is considerably low. This difference is valid for women too. Comparing all states, a gradient of LCM rates from high to low mortality areas is observed.

Addiction. 1998 Oct;93(10):1543-51.

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Alcohol intake and severity of injuries on highways in Mexico: a comparative analysis. Híjar M(1), Flores M, López MV, Rosovsky H. Author information: (1)Instituto Nacional de Salud Pública, Cuernavaca, México.

AIMS: To analyze the association between alcohol intake and the severity of injuries sustained from traffic accidents on a Mexican highway.

DESIGN: An observational unit evaluated drivers involved in auto accidents.

SETTING: Mexico-Cuernavaca Highway, Mexico. A 60 km-long road with many altitude variations and sharp curves. **PARTICIPANTS:** Three hundred and eighty-six drivers involved in traffic accidents between March and September, 1994.

MEASUREMENTS: A questionnaire was applied to the driver, an occupant or witness at the site of the accident to collect information about the driver, vehicle characteristics, type of accident, day-night occurrence, road section (Mexico-Cuernavaca or Cuernavaca-Mexico) and weather conditions. A physical examination was carried out to determine the presence and severity of injuries. **FINDINGS:** There were 177 injured people, including 12 deaths, with rates of 67.5 injuries and 4.58 deaths per 10,000 km driven. Variables associated with alcohol intake ($p < 0.05$) included: severity of injuries, non-use of seat belt, vehicle size and occurrence at night. Risk factors for severe injuries were: alcohol intake (adjusted OR 6.1 CI 95% 1.6-24.0); non-use of seat belt (OR 4.9 CI 2.2-10.8), age < 25 years (OR 3.6 CI 1.0-12.7), age > 54 years (OR 6.0 CI 1.4- 25.0), speed > 90 km/h (OR 2.6 CI 1.1-6.3) and occurrence at night (OR 2.6 CI 1.3-5.3). **CONCLUSIONS:** Alcohol intake is a major risk factor for severe injuries from highway traffic accidents. Its association with other risk factors such as non-use of seat belt and excessive speed suggests the importance of designing interventions aimed at reducing alcohol intake among automobile drivers.

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