



National Institute on Alcohol  
Abuse and Alcoholism

# **NIAAA DIRECTOR’S REPORT ON INSTITUTE ACTIVITIES TO THE 169<sup>TH</sup> MEETING OF THE NATIONAL ADVISORY COUNCIL ON ALCOHOL ABUSE AND ALCOHOLISM**

Tuesday, May 13, 2025

Virtual Meeting

## **TABLE OF CONTENTS**

|                                               |    |
|-----------------------------------------------|----|
| NIAAA Director’s Report .....                 | 1  |
| In Memoriam .....                             | 2  |
| NIAAA Budget.....                             | 3  |
| Staff Transitions .....                       | 3  |
| NIAAA Director’s Activities .....             | 6  |
| What’s Ahead.....                             | 6  |
| NIAAA Research Highlights .....               | 6  |
| NIAAA Communications and Public Liaison ..... | 10 |

## IN MEMORIAM

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**Dr. Warren K. Bickel** held faculty positions at the Albert Einstein College of Medicine of Yeshiva University, University of Vermont, University of Arkansas for Medical Sciences, and Fralin Biomedical Research Institute at VTC, Virginia Tech. Dr. Bickel's research accomplishments included developing buprenorphine as a medication for treatment of opioid use. He is particularly well-known for applying behavioral economics to the study of addiction. Another seminal contribution is that he established an addiction recovery registry to facilitate the study of recovery from alcohol and other drugs.



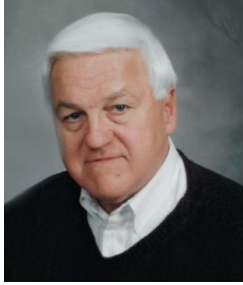
**Dr. Floyd Bloom** made major advances in the field of neuroscience. He was among the first to provide evidence that signaling in the brain may be chemical as well as electrical, and one of the first to identify functional roles for neurocircuits in the brain. Dr. Bloom was Director of the A.V. Center for Behavioral Neurobiology at the Salk Institute and then Chairman of the Department of Neuropharmacology at the Scripps Research Institute, where he focused on the organization and chemical neuroanatomic relationships that define how and where alcohol and other drugs produce their effects at the cellular and systems levels. He directed one of the first National Institute on Alcohol Abuse and Alcoholism (NIAAA) Alcohol Research Centers initiated in 1977. He was a Co-Founder of Alkermes Inc., a biotechnology company that develops, manufactures and commercializes medicines for the treatment of chronic diseases.



**Dr. Charlotte Boettiger** was a professor of Psychology and Neuroscience at the University of North Carolina, where she had served on the faculty since 2007. Her innovative research program examined the neurobiological mechanisms of executive function irregularities associated with substance use disorders, with a strong focus on alcohol use disorder (AUD). Dr. Boettiger's group also focused on dissociating pre-existing risk factors from the cognitive consequences of AUD. She was a highly productive researcher and a strong advocate for alcohol research.



**Dr. Jan Froehlich** was a professor at Indiana University's Department of Medicine, Cellular and Integrative Physiology and Medical Neurobiology. She served as the scientific co-director of the Indiana Alcohol Research Center. She dedicated her career to understanding how alcohol affects the brain and how addiction and AUD develop through the lens of hormonal, neurochemical, behavioral, and genetic factors. A major focus of her work was preclinical studies for the development of pharmacotherapies for AUD.



**Mr. Martin Kent Trusty** was the Executive Officer for NIAAA for 29 years, guiding the Institute's administrative and management affairs until he retired in 1999. After retiring, NIAAA established an annual meritorious award in his name, honoring his leadership and contributions. It is awarded each year to a staff member in recognition of their excellence in management at NIAAA.

## NIAAA BUDGET

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### Fiscal Year (FY) 2025

The National Institutes of Health (NIH) operates under the Full-Year Continuing Appropriations and Extensions Act, 2025 (Public Law 119-4), which was signed by the President on March 15, 2025. This Continuing Resolution ensures government operations continue through September 30, 2025, at the FY 2024 enacted levels with no reductions.

The FY 2025 appropriation for NIAAA is \$595.3 million. This represents a flat appropriation compared to the FY 2024 budget level.

### FY 2026

The FY 2026 appropriation for NIH and NIAAA has not yet been finalized.

## STAFF TRANSITIONS

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### **New Post-Baccalaureate Intramural Research Training Award (IRTA) Fellows:**

- **Saghar Babaeian** – Clinical Neuroimaging Research Core
- **Akash Kotian** – Laboratory of Neuroimaging

### Departures

**Dr. Khushbu Agarwal**, a Research Fellow in the Section of Sensory Science and Metabolism in the Division of Intramural Clinical and Biological Research, took a position at the National Brain Research Centre, Manesar, Haryana, India. Dr. Agarwal's work focused on the neuronal and molecular mechanisms underlying chemosensation as well as motivational and reward pathways of ingestive behaviors.

**Dr. Gregory Bloss**, a Public Health Analyst and Program Officer in the Division of Epidemiology and Prevention Research, retired after 32.5 years of federal service. He oversaw projects that evaluated how alcohol policy implementation influenced alcohol drinking at the state and local level, and he led efforts on the Alcohol Policy Information System, a tool to evaluate the impact of state alcohol policies on alcohol misuse and related consequences.

**Kimberly Bochniak**, an Inventory Management Specialist, retired after 35-years of federal service, including 27-years with the Division of Intramural Clinical and Biological Research and the Administrative Services Branch.

**Antonia Calzone**, a Computer Scientist in the Information Technology Branch retired after 36 years of federal service, 33 of which were spent at NIAAA. Ms. Calzone contributed her expertise in database technology and digital accessibility.

**Richard Doucette**, a Workforce Resources Specialist within the Administrative Services Branch (ASB), retired with 24 years of federal service. Richard spent his last 11 years with NIAAA servicing both the Extramural and Intramural programs.

**Madhu Gola**, an Administrative Officer in the Administrative Services Branch, retired after 30 years of service at NIAAA. She served in multiple roles within the branch.

**Aurelia Higginbotham**, a Travel Specialist in the NIAAA Office of the Director, retired after 18.5 years of federal service. She joined NIAAA in 2014.

**Timothy Karacki**, Deputy Budget Officer in the Office of Financial Management, departed NIH to serve as the Branch Chief in the Immunology and Infection Disease Budget and Financial Management Branch at the National Institute of Allergy and Infectious Diseases.

**Michael Todd King**, a Research Chemist from the Laboratory of Integrative Neuroscience in the Division of Intramural Clinical and Biological Research, retired after 32.5 years of federal service. Todd previously worked with Dr. Richard Veech in the Laboratory of Metabolic Control.

**Dr. Raye Litten**, Director of the Division of Treatment and Recovery (DTR), retired after nearly 40 years of federal service, with the last 36 years spent at NIAAA. For the past seven years he led DTR, and prior to that served as Chief of the Medications Development Branch. He is best known for his major impact on the medications development field, including the creation of the NIAAA Clinical Investigations Group, a highly successful program designed to test the safety and effectiveness of promising compounds to treat AUD in proof-of-concept Phase II clinical trials. He spearheaded the advancement of two U.S. Food and Drug Administration-approved primary outcome measures used in medication development trials. Dr. Litten was also instrumental in the development of NIAAA's recovery research definition and the development of NIAAA's Healthcare Professional's Core Resource on Alcohol.

**Dr. Peter Manza**, a Research Fellow in the Laboratory of Neuroimaging in the Division of Intramural Clinical and Biological Research, departed to become an Assistant Professor of Psychiatry at the Kahlert Institute for Addiction Medicine, University of Maryland School of Medicine.

**Kimberly Martin**, Technical Writer Editor in the Office of Science Policy and Communications, is retiring after 8 years of service to NIAAA and 18 years of service to NIH overall. She wrote and edited NIAAA resources, news stories, social media content, and other materials, and was the lead for developing the NIAAA Short Takes video series.

**Denise Gates Nee**, a Computer Scientist within the Information Technology Branch in the Division of Intramural Clinical and Biological Research, retired after 32.5 years of federal service. She performed data analysis for the NIAAA clinical program. Denise previously worked in NIAAA intramural laboratories.

**Dr. Antonio Noronha**, Director of the Division of Neuroscience and Behavior, retired after 35 years of federal service. During his tenure at NIAAA, Dr. Noronha transformed neuroscience research in the alcohol field by opening the door to the use of neuroscience for diagnosis, prevention, and treatment of alcohol misuse and AUD. These efforts culminated in a wide range of advances in neuroscience-alcohol research and highly impactful research training programs and initiatives such as the Collaborative Studies on the Genetics of Alcoholism (COGA), the Integrative Neuroscience Initiative on Alcoholism (INIA), the National Consortium on Alcohol and Neurodevelopment in Adolescence-Adulthood (NCANDA-A), the Consortium on the Neurobiology of Adolescent Drinking in Adulthood (NADIA), and the Adolescent Brain Cognitive Development (ABCD) Study.

**Dr. Abbas Parsian**, Program Director in the Division of Neuroscience and Behavior, retired after 16 years of service to NIAAA. He coordinated NIAAA Brain Bank activities and served in the Joint Addiction, Aging and Mental Health Data Access Committee.

**Dr. Svetlana Radaeva**, Deputy Director of the Division of Metabolism and Health Effects, retired after 24 years of federal service. Following her time as Staff Scientist in NIAAA's Section on Liver Biology, Dr. Radaeva joined the division in 2006. She played a pivotal role in shaping the Alcohol-Associated Hepatitis Network, which has had broad impacts on the field of liver disease and clinical practice.

**Gregory Roa**, Writer Editor in the Office of Science Policy and Communications, retired after more than 18 years with NIAAA. He organized outreach efforts and was key to a wide range of NIAAA communications activities, including websites, the Alcohol Treatment Navigator, Spectrum, and the NIH Record.

**Brenda Robertson**, a Program Specialist in the Division of Intramural Clinical and Biological Research, retired after 32.5 years in federal service. She served many roles for the Intramural Research Program throughout her career, most recently in procurement.

**Wen June Ruan**, a Survey Statistician within the Epidemiology and Biometry Branch Specialist in the Division of Intramural Clinical and Biological Research, retired after 22.5 years of federal service.

**Dr. Mariela Shirley** retired from the federal service after joining NIH in 2002 and NIAAA in 2006. Most recently she oversaw grants on young adults, older populations, and translational science within the Division of Treatment and Recovery. Dr. Shirley was also co-chair of the NIAAA Centers and Training Committee.

**Erick Singley**, a Chemist in the Office of the Clinical Director in the Division of Intramural Clinical and Biological Research, retired after 32.5 years of federal service. He was an essential and valued member of the Clinical Core Lab team.

**Van Van**, a Program Analyst in the Office of Science Policy and Communications, retired after 25 years of federal service. Van coordinated NIAAA's compliance with the policy on inclusion of women and minorities in clinical research and ensured NIAAA materials were accessible to people with disabilities.

**Dr. Gene-Jack Wang**, a Senior Clinician and Senior Research Physician in the Laboratory of Neuroimaging in the Division of Intramural Clinical and Biological Research, retired after 11 years of federal service. He studied the neuropsychiatric mechanisms and manifestations of

alcohol and other substance use disorders, attention deficit hyperactivity disorder, obesity, and eating disorders.

**Keming Xiong**, a Biologist with the Laboratory of Physiologic Studies in the Division of Intramural Clinical and Biological Research, retired with 24 years of federal service

Recent reductions in force have also impacted six staff members in NIAAA's Office of Science Policy and Communications as well as four staff members in NIAAA's Ethics and Management Analysis Branch. In addition, four staff members were affected by probationary dismissals.

## NIAAA DIRECTOR'S ACTIVITIES

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NIAAA Director **Dr. George F. Koob** gave the following presentation:

- "Strategies to Enhance Pediatric Health Research Funding by NIH: Pediatric Research" at the National Academies of Science, Engineering, and Medicine (virtual) on March 28, 2025

## WHAT'S AHEAD

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The [33<sup>rd</sup> Society on Prevention Research Annual Meeting](#), "Prevention Science for Action: Leveraging Data Science & Technology to Enhance Research, Practice, & Policy," will be held May 27-30, 2025, in Seattle, WA.

The [48th Annual Research Society on Alcohol Scientific Meeting](#) will be held June 21-25, 2025, in New Orleans, Louisiana.

## NIAAA RESEARCH HIGHLIGHTS

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### [Unhealthy Alcohol Use and Risk of Coronary Heart Disease Among Young and Middle-Aged Adults](#)

**Significance:** This study used a large, real-world dataset from a healthcare system that systematically screens for alcohol use to examine alcohol misuse-associated health outcomes over a 4-year period. The sample of 432,000 adults suggested that consuming alcohol above weekly heavy drinking limits, but not daily heavy drinking limits, was associated with higher risk of coronary heart disease. While more research is needed to establish causality, these findings may inform the identification of people who are at increased risk for developing coronary heart disease based on alcohol consumption patterns.

**Abstract:** *Objective:* To examine the associations between unhealthy alcohol use and risk of coronary heart disease (CHD) among women and men aged 18-65 years. *Methods:* An observational study in an integrated healthcare system with systematic alcohol screening. We identified 432,265 primary care patients aged 18-65 years who, in 2014-2015, reported weekly alcohol intake levels. Weekly alcohol intake, categorized into below ( $\leq 14$ /week men;  $\leq 7$ /week

women) and above limits ( $\geq 15$ /week men;  $\geq 8$ /week women) per U.S. guidelines, and heavy episodic drinking (HED,  $\geq 5/\geq 4$  drinks any day in past 3 months for men/women, respectively). Main outcome was CHD during 4-year follow-up, based on inpatient ICD diagnoses of myocardial infarction and CHD. Cox proportional hazards models adjusted for age, sex, race/ethnicity, body mass index, physical activity, smoking, hypertension, diabetes, and hyperlipidemia. *Results:* The cohort comprised 44 % women, mean age (standard deviation) of 43.5 years ( $\pm 13.1$ ). Weekly alcohol intake above limits was associated with higher prevalence of cardiovascular risk factors, and a 26 %, 19 % and 43 % higher risk on the overall, men- and women-specific risk of CHD after adjusting for these risk factors (hazard ratio [95 % confidence interval] = 1.26[1.13 -1.40], 1.19[1.04-1.35] and 1.43[1.20-1.71], respectively). *Conclusions:* In a large, real-world, diverse population with a systematic alcohol screening program, having weekly alcohol intake above limits was associated with increased risk of CHD among young and middle-aged men and women. Increased CHD risk due to alcohol intake above limits warrants particular awareness and interventions.

Rana JS, Chi FW, Acquah I, Sterling SA. Unhealthy alcohol use and risk of coronary heart disease among young and middle-aged adults. *Am J Prev Cardiol.* 2025 Feb 8;21:100947. doi: 10.1016/j.ajpc.2025.100947. PMID: 40027094; PMCID: PMC11869880.

### **Chronic Alcohol Consumption Accelerates Cardiovascular Aging and Decreases Cardiovascular Reserve Capacity**

**Significance:** Among people over 65 years old, cardiovascular disease is the primary health burden associated with alcohol consumption. This preclinical study in rodents suggested that chronic alcohol consumption can cause cardiac and vascular dysfunction over time. In a clinically relevant rat model, six months of alcohol use accelerated cardiovascular aging by impairing mitochondrial function, increasing oxidative stress, and triggering inflammation, apoptosis, senescence, and fibrosis—particularly in aged hearts and vessels. This study highlights alcohol's role as an accelerant of biological aging, emphasizing the need for health care professionals and public health experts to recognize alcohol as a modifiable risk factor in cardiovascular aging.

**Abstract:** The pathology of cardiovascular aging is complex, involving mitochondrial dysfunction, oxidative and nitrative stress, oxidative DNA injury, impaired lipid metabolism, cell death, senescence, and chronic inflammation. These processes lead to remodeling and structural changes in the cardiovascular system, resulting in a progressive decline in cardiovascular reserve capacity and health, and an increased risk of diseases and mortality. Excessive alcohol consumption exacerbates these risks by promoting hypertension, stroke, arrhythmias, coronary artery disease, cardiomyopathy, and sudden cardiac death, yet the effects of chronic alcohol consumption on cardiovascular aging remain unclear. Herein, we explored the impact of a 6-month 5% Lieber-DeCarli alcohol diet in young (3 months old) and aging (24-26 months old) Fisher F344BNF1 rats. We assessed detailed hemodynamics, mitochondrial function, oxidative/nitrative stress, lipid metabolism, inflammation, cell death, senescence, and myocardial fibrosis using the pressure-volume system, isolated vascular rings, and various histological, biochemical, and molecular biology methods. Alcohol consumption in both young and aging rats impaired mitochondrial function, disrupted cholesterol and triglyceride metabolism, and increased oxidative/nitrative stress, inflammation, cell death, and senescence,

leading to a decline in systolic contractile function. In aging rats, alcohol further exacerbated diastolic dysfunction and myocardial fibrosis. Alcohol also increased oxidative/nitrative stress, apoptosis, and senescence in the vasculature, contributing to endothelial dysfunction and increased total peripheral resistance. Additionally, alcohol exacerbated the aging-related ventriculo-arterial uncoupling and diminished cardiac efficiency, further reducing cardiovascular reserve capacity. In conclusion, chronic alcohol consumption promotes cardiovascular aging and further diminishes the already impaired cardiac and vascular reserve capacity associated with aging.

Mukhopadhyay P, Yokus B, Paes-Leme B, Bátkai S, Ungvári Z, Haskó G, Pacher P. Chronic alcohol consumption accelerates cardiovascular aging and decreases cardiovascular reserve capacity. *Geroscience*. 2025 Mar 20. doi: 10.1007/s11357-025-01613-w. Epub ahead of print. PMID: 40111699.

### **Prediction of Alcohol Intake Patterns With Olfactory and Gustatory Brain Connectivity Networks**

**Significance:** Taste and smell can play a role in triggering craving for alcohol. This study revealed that brain connectivity patterns linked to taste and smell can accurately predict current alcohol use behaviors in young adults—a population at high risk for developing AUD. Using resting-state functional magnetic resonance imaging, the researchers identified specific functional brain networks associated with smell and taste processing that correlated with alcohol consumption patterns. Predictive models built from these networks performed well in an independent sample, suggesting their robustness. These findings are among the first to use chemosensory neural signatures for current alcohol behavior prediction, representing a potential shift toward neurobiologically informed tools. The utility of chemosensory neural signatures in early intervention and personalized treatment strategies for AUD will be explored in future studies.

**Abstract:** Craving in alcohol drinkers is often triggered by chemosensory cues, such as taste and smell, which are linked to brain network connectivity. This study aimed to investigate whether these brain connectivity patterns could predict alcohol intake in young adults. Resting-state fMRI data were obtained from the Human Connectome Project (HCP) Young Adult cohort, comprising 1003 participants. Functional connectomes generated from 100 independent components were analyzed, identifying significant connections correlated with taste and odor scores after applying a false discovery rate (FDR) correction using the Benjamini-Hochberg (BH) method. These significant connections were then utilized as predictors in general linear models for various alcohol intake metrics. The models were validated in an independent sample to assess their accuracy. The training sample ( $n = 702$ ) and the validation sample ( $n = 117$ ) showed no significant demographic differences. Out of 742 possible connections, 41 related to odor and 25 related to taste passed the significance threshold ( $P < 0.05$ ) after FDR-BH correction. Notable predictors included visual-visual connectivity (node32-node13:  $\beta = 0.028$ ,  $P = 0.02$ ) for wine consumption and connectivity between the ventral attention network (VAN) and the frontal parietal/caudate nucleus (FP/CN) (node27-node9:  $\beta = -0.31$ ,  $P = 0.04$ ) for total alcohol intake in the past-week and maximum number of drinks per day in the past-year. The predictive models demonstrated strong accuracy, with root mean square error (RMSE) values of 5.15 for odor-related models and 5.14 for taste-related models. The F1 scores were 0.74 for the odor model and 0.71 for the taste model, indicating reliable performance. These findings suggest that specific patterns of brain connectivity associated with taste and olfactory

perception may serve as predictors of alcohol consumption behaviors in young adults. Our study highlights the need for longitudinal research to evaluate the potential of taste- and smell-related brain connectivity patterns for early screening and targeted interventions, as well as their role in personalized treatment strategies for individuals at risk of AUD.

Agarwal K, Chaudhary S, Tomasi D, Volkow ND, Joseph PV. Prediction of alcohol intake patterns with olfactory and gustatory brain connectivity networks. *Neuropsychopharmacology*. 2025 Feb 17. doi: 10.1038/s41386-025-02058-7. Epub ahead of print. PMID: 39962224.

### **Choline Enhances Elicited Imitation Memory Performance in Preschool Children With Prenatal Alcohol Exposure: A Cumulative Report of 3 Randomized Controlled Trials**

**Significance:** Previous research suggests that prenatal choline supplementation may have sustained benefits for non-verbal intelligence, visuospatial skills, working and verbal memory, attention, social cognition, executive functioning, and white matter development in children later diagnosed with fetal alcohol spectrum disorders (FASD). The current study combined data from three double-blinded, randomized controlled trials to evaluate dose-dependent effects of choline as a neurodevelopmental intervention in children with FASD. Beneficial effects of choline were seen for hippocampus-dependent, early non-verbal sequential memory at the 9-month follow-up compared with placebo, with an effect size large enough to be potentially clinically relevant. There was a larger effect for younger children ( $\leq 4.2$  y). Future studies are needed to further define appropriate dosage and timing for supplementation.

**Abstract:** *Background:* Fetal alcohol spectrum disorders (FASDs) are associated with neurocognitive deficits for which there are no biological treatments. Choline supplementation may attenuate these deficits. *Objectives:* This study was aimed to evaluate choline as a neurodevelopmental intervention for preschool-aged children with FASD. *Methods:* We present combined data from 104 participants with FASD (aged 2.5-5.9 y) from 3 placebo randomized controlled trials (RCTs). Participants in RCT1 and RCT2 were randomly assigned to 9 mo choline (500 mg daily) or placebo. Participants in RCT3 were randomly assigned to 9 mo choline (19 mg/kg daily) or placebo. The primary outcome measure was an elicited imitation (EI) memory task. *Results:* Adherence was high (78% doses received). Adverse effects were similar across groups except fishy body odor: choline group, 36%; placebo group, 8%. We observed a trend-level choline advantage; participants receiving choline performed 25% better on EI short-delay adjacent pairs (sequential memory) than those on placebo, with a steeper increase in scores between 6 and 9 mo ( $\hat{\gamma} = -10.06$ ;  $P = 0.03$ ; 95% CI: -19.13, -0.99). No sex difference in response was seen, nor did we observe a dose-response relationship. Age-moderated response to choline between baseline and 9 mo ( $\hat{\gamma} = 10.02$ ;  $P = 0.01$ ; 95% CI: 2.47, 17.57), with greater response in younger ( $\leq 4.2$  y) than that in older ( $> 4.2$  y) participants. Overall, choline showed a beneficial effect on memory but no impact on executive functioning or intelligent quotient. *Conclusions:* The results support choline as a neurodevelopmental intervention for improvement of memory in young children exposed to alcohol prenatally. Specifically, the use of choline bitartrate as a supplement in the range of 260-500 mg/d in children between 2.5 and 5.9 y of age is supported. Future studies are needed to further define appropriate dosage as well as optimal lengths and developmental windows for supplementation. This trial was registered at clinicaltrials.gov as NCT01149538 and NCT02735473.

Wozniak JR, Eckerle JK, Gimbel BA, Ernst AM, Anthony ME, Tuominen KA, de Water E, Zeisel SH, Georgieff MK. Choline enhances elicited imitation memory performance in preschool children with prenatal alcohol exposure: a cumulative report of 3 randomized controlled trials. *Am J Clin Nutr.* 2025 Apr;121(4):921-931. doi: 10.1016/j.ajcnut.2025.02.009. Epub 2025 Feb 14. PMID: 39956364.

## **NIAAA COMMUNICATIONS AND PUBLIC LIAISON**

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### **News Media**

Dr. Koob and other NIAAA scientists completed 14 media interviews from January through March. Highlights include:

- CNN: [Ozempic shown to reduce drinking in first trial in alcohol-use disorder](#), *Dr. Lorenzo Leggio*
- Bloomberg: [Novo's Ozempic Helped Cut Alcohol Cravings in Small Study](#), *Dr. Lorenzo Leggio*
- Business Insider: [What alcohol does to your brain and body, according to the latest science](#), *Dr. Aaron White*
- The Wall Street Journal: [How Much Alcohol Are You Really Drinking? Take Our Quiz to Find Out](#), *Dr. Aaron White*

*Satellite Media Tour/Dry January* – Dr. Koob discussed how people can assess their drinking habits during Dry January. The tour consisted of 19 interviews—TV, radio, and web—reaching a total audience of nearly 21 million people.

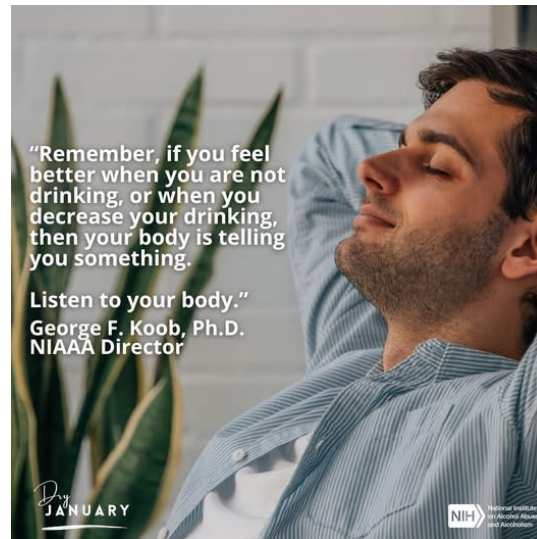
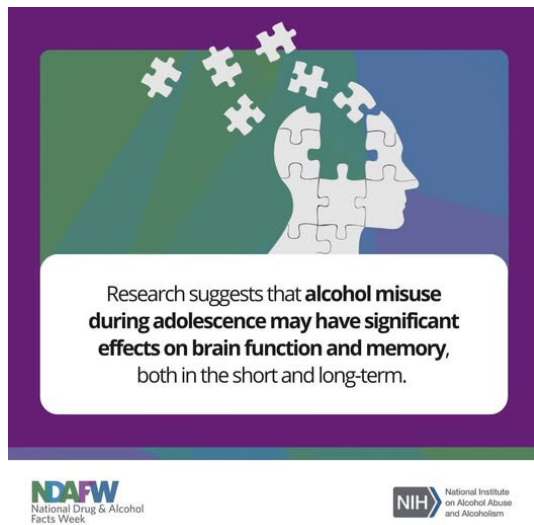
### ***News stories and NIAAA Director's blogs***

- Director's Blog: [Kicking off the new year with Dry January? Here are six tips for success](#)
- [April is Alcohol Awareness Month](#)

### **Major Activities, Partnerships, and Events**

- NIAAA and SAMHSA's Strategic Prevention Technical Assistance Center (SPTAC) hosted a webinar, Strategic Planning for Alcohol Prevention with the College Alcohol Intervention Matrix (CollegeAIM).
- NIAAA and FASD United hosted a webinar on Alcohol and Women's Health.
- SAMSHA added the teen and middle school websites to their online resource lists.

## Social Media Highlights



NIAAA ran campaigns for Dry January and National Alcohol Drug and Facts Week on social media. As part of the Dry January campaign, NIAAA collaborated with five health and fitness social media influencers. A total of 44 social media posts earned 3 million total impressions on the topics of the benefits of taking a break from alcohol, tips for staying on track during Dry January, and helpful NIAAA resources.

## Notable Pickup of NIAAA Content

NIH homepage posts NIAAA graphics throughout the year including Alcohol-related blackouts.

