Background. The aim of this study was to define optimal cut points of Alcohol Use Disorders Identification Test-Consumption (AUDIT-C) to detect hazardous drinking in the Korean general male population.

Methods. This study had recruited subjects among male individuals who were invited to a health check and had excluded those who had any past and present history of alcohol or substance use disorder. Among them, 221 subjects completed the AUDIT and questionnaires about their alcohol consumption.

Results. The optimal cut-off point of AUDIT-C was found to be > 6 to detect a hazard drinker based on > 9 of total AUDIT scores. The optimal cut-off point was observed to be > 5 for AUDIT-C to detect a hazard drinker defined as > 14 standard drinks per week or > 4 standard drinks per occasion. According to AUDIT cut-off > 9 and AUDIT-C cut-off > 6 for a hazard drinker, 32.3% subjects were positive for both the AUDIT and AUDIT-C, 9.2% were positive for AUDIT-C only, and 3.7% were positive for AUDIT only. The subjects with AUDIT-positive and AUDIT-C-negative had significantly higher alcohol-related problem score in AUDIT than others. They all had insight in their alcohol-related problem and showed their willing to reduce alcohol drinking. However, the males with AUDIT-negative and AUDIT-C-positive showed lack of insight and willing to reduce alcohol drinking.

Conclusions. Our study found the optimal cut points to be 5 or 6 for AUDIT-C to detect a hazard drinker in the Korean male population. Clinicians should apply both AUDIT total score and AUDIT-C score to differentiate individual’s characteristics in alcohol-related problem.