ALCOHOL-ASSOCIATED LIVER DISEASE and ALCOHOL USE DISORDER

What is Alcohol-Associated Liver Disease (ALD)?
ALD is a liver disease in which your liver is damaged due to heavy alcohol use, and the liver is unable to completely perform its functions. ALD is one of the main causes of chronic liver disease worldwide and is the leading cause of preventable liver-related death in the United States.

What does your liver do?
Your liver filters your blood and breaks down, balances, and creates nutrients you need. The liver helps to digest food, remove harmful or unneeded parts of what you consume, and make clotting factors that keep your blood flowing well. It also processes several prescription and over-the-counter medications.

Alcohol Use Disorder –
Alcohol-associated liver disease is most often related to alcohol use disorder (AUD), harmful drinking which negatively affects your health and often your personal and/or work life.

HARMFUL DRINKING

WOMEN: 2 OR MORE drinks per day or 14 OR MORE drinks per week
MEN: 3 OR MORE drinks per day or 21 OR MORE drinks per week

KEY TAKEAWAYS

Stages of ALD – Excessive alcohol consumption can contribute to three stages of liver disease:
• Fatty/steatotic liver disease,
• alcohol-related hepatitis, and
• cirrhosis (severe scarring of the liver)
In serious cases, the damage to your liver may be too severe and you may need a liver transplant.

ALD is Preventable – The most effective way to prevent ALD is to stop drinking entirely. Reducing your alcohol use can also lower your risk for developing ALD. Some people who drink heavily may need medical assistance with stopping alcohol use because suddenly stopping can cause severe withdrawal symptoms such as seizures or death.

Recommendations
• People with obesity, diabetes, hepatitis C, or hepatitis B should avoid alcohol.
• Heavy alcohol users should abstain from tobacco because it can increase the risk of cirrhosis.
• People who drink heavily should seek medical care for stopping drinking.

How to Get Help
• Your doctor can help you find a counselor and there are behavioral therapies and medications that may help you reduce your drinking or stop entirely (baclofen, acamprosate, naltrexone, gabapentin or topiramate).
• You can seek help from your gastroenterologist, primary care physician, or a therapist as a first step.

Learn More about NIAAA: niaaa.nih.gov

1 ACG Cirrhosis Info: gi.org/topics/liver-cirrhosis | Read ACG’s Clinical Guideline on ALD: bit.ly/AJG-EtOH-Guideline