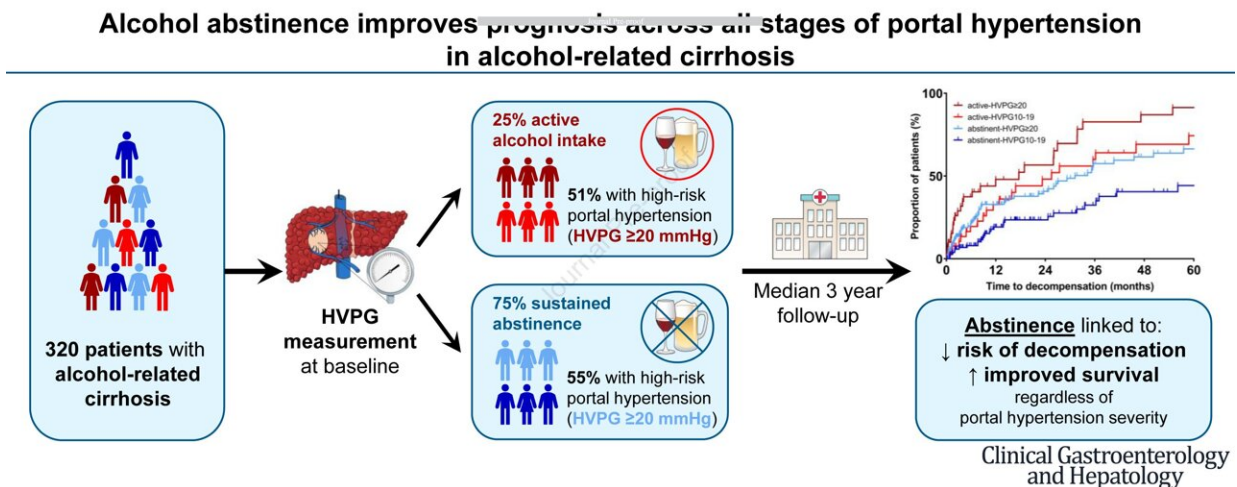


Alcohol abstinence essential even in advanced liver cirrhosis, finds study

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Graphical abstract. Credit: *Clinical Gastroenterology and Hepatology* (2022). DOI: 10.1016/j.cgh.2022.11.033

Complete abstinence from alcohol is considered a cornerstone in the treatment of patients with alcohol-related liver disease. It has not yet been sufficiently researched whether this measure can still improve the prognosis even in the case of advanced liver cirrhosis.

Scientists at the Department of Internal Medicine III at MedUni Vienna and AKH Vienna have now provided evidence of the positive effects of alcohol abstinence even at very advanced stages of the disease. The results of their clinical study were recently published in the journal

Clinical Gastroenterology and Hepatology.

As part of the study, the research team led by Benedikt Hofer and Thomas Reiberger from the Clinical Division of Gastroenterology and Hepatology at the Department of Internal Medicine III at MedUni Vienna and AKH Vienna analyzed the clinical course of 320 patients with alcohol-related liver cirrhosis.

Not only the influence of alcohol abstinence was investigated, but also the effect of [portal hypertension](#). Portal hypertension refers to increased [blood pressure](#) in the veins that transport blood from the [gastrointestinal tract](#) to the liver, and is—in addition to sustained alcohol consumption—largely responsible for the progression of liver disease.

By analyzing both factors, the researchers have now, for the first time, gained insights into the effect of alcohol abstinence in advanced liver cirrhosis at different stages of portal hypertension.

"Our results clearly show that all patients with alcohol-related liver cirrhosis who maintain sustained abstinence from alcohol not only suffer complications of liver cirrhosis significantly less frequently, but also live considerably longer—even in the case of pronounced portal hypertension," explains the lead author of the study, Benedikt Hofer.

Evidence for prognostic relevance

Liver cirrhosis, as the pronounced scarring of the liver is referred to in technical jargon, is one of the most frequent and most severe complications of excessive alcohol consumption.

According to current data of the Federal Ministry of Social Affairs, Health, Care and Consumer Protection (Alcohol Manual—Austria, 2021), 11.7 liters of (pure) alcohol per year or 25.3 grams of alcohol per

day (20 grams correspond to 0.5 liters of beer) are consumed per capita in Austria from the age of 15. This makes Austria one of the top countries in an international comparison.

Even though complete abstinence from alcohol is recommended as a basic therapy for patients with [alcohol-related liver disease](#), the prognostic relevance of abstinence in advanced liver cirrhosis has been insufficiently researched to date. "Our new data provide important evidence for the daily counseling of our patients and show that it is never too late to strive for complete abstinence from alcohol," says the head of the study, Thomas Reiberger.

However, the study also showed that even patients with sustained [abstinence](#) from alcohol are at risk of developing complications—especially if the extent of portal hypertension remains very pronounced. Therefore, all those affected need regular medical check-ups.

Personalized therapy options

As also shown in the study, the measurement of portal hypertension provides important prognostic information in patients with alcohol-related liver [cirrhosis](#), regardless of [alcohol](#) consumption. The minimally invasive examination of the hepatic vein pressure gradient is considered the gold standard for evaluating the extent of portal hypertension.

The measurement methodology has been consistently refined over the past few years in MedUni Vienna's Laboratory of Hepatic Haemodynamics. This means that optimized, personalized treatment options can be created for patients.

More information: Benedikt Silvester Hofer et al, Alcohol abstinence improves prognosis across all stages of portal hypertension in alcohol-

related cirrhosis, *Clinical Gastroenterology and Hepatology* (2022). [DOI: 10.1016/j.cgh.2022.11.033](https://doi.org/10.1016/j.cgh.2022.11.033)

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