

Severe alcoholic hepatitis: An effective combination of two treatments

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A French multi-center study has shown that a treatment combining an antioxidant with an anti-inflammatory was effective on 174 patients suffering from severe alcoholic hepatitis. The study was coordinated by the Hepato-Gastroenterology department at the Amiens University Hospital Centre and the "Early exposure to alcohol and dependency vulnerability," INSERM 24 research team. Their findings were published in the *New England Journal of Medicine* on Nov. 10 2011.

Acute alcoholic hepatitis is one of the most serious forms of [alcoholic liver disease](#), affecting individuals with chronic [excessive alcohol consumption](#), which generally equates to more than 50 grams of alcohol per day (roughly five drinks), over a period of more than three to six months. The disease is characterized by liver failure (hepatic insufficiency) and acute jaundice (icterus), which may induce a coma through [liver failure](#) (hepatic encephalopathy) and an ensuing death rate of between 40-45% within the first six months. Conventional treatment involves stopping alcohol consumption (alcohol abstinence) and administering cortisone (corticosteroid therapy over a one-month period) to fight the highly inflammatory nature of the disease. Despite this treatment, 30-35% of patients with acute alcoholic hepatitis still die within a six month period, since the cortisone-based treatment remains insufficient.

Given the given the frequent deficiency in the [antioxidant capacity](#) of the alcoholic liver (described above), combined with [chronic inflammation](#) associated with the disease, the aim of the study coordinated by Professor Nguyen-Khas (Amiens University Hospital Centre and the Inserm research team) was to combine an antioxidant treatment with the conventional anti-inflammatory treatment. The results show an improved survival rate for patients suffering from acute alcoholic hepatitis who were given both medication types, with significantly less deaths within one month of treatment compared to the

group who received the cortisone- only treatment. Tolerance levels to the treatment were good. The new, very low-cost medicine (N-acetylcysteine) is a molecule that has long been used in the treatment of hepatitis caused by drugs such as paracetamol, or mucolytic to fluidify bronchial secretion.

These results improve the prognosis for severe alcoholic hepatitis patients.

More information: "Glucocorticoids plus N-acetylcysteine in Severe Alcoholic Hepatitis". Nguyen-Khac and coll. *The New England Journal of Medicine* 2011; 365 10 November 2011.

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