

Hospitalizations for chronic liver disease on the rise

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(HealthDay)—Hospitalizations for chronic liver disease (CLD) increased

from 2012 to 2016, reaching a total estimated national cost of \$81.1 billion, according to a study published online April 2 in *JAMA Network Open*.

Grishma Hirode, from Highland Hospital in Oakland, California, and colleagues used data from the National Inpatient Sample (2012 to 2016) to identify 1,016,743 adult CLD-related hospitalizations. Trends in health care utilization were evaluated.

The researchers found that during the study period, the rate of CLD-related hospitalizations increased from 3,056 to 3,757 per 100,000 hospitalizations, while total inpatient hospitalization costs increased from \$14.9 billion to \$18.8 billion. From 2012 to 2016, the mean patient age increased from 56.8 to 57.8 years, and relatedly, the proportion with Medicare also increased (41.7 to 43.6 percent). Throughout the study period, the proportion of hospitalizations of patients with hepatitis C virus remained steady, while the proportion with alcoholic cirrhosis and [nonalcoholic fatty liver disease](#) showed increases. The mortality rate was higher among patients hospitalized with alcoholic cirrhosis (11.9 percent) and hepatocellular carcinoma (9.8 percent). Across all etiologies, the cost burden increased but was highest for hospitalizations with alcoholic cirrhosis (\$22.7 billion) and hepatitis C virus (\$22.6 billion).

"The increasing burden of hospitalizations related to [chronic liver disease](#) emphasizes this disease's clinical and [economic impact](#) and the importance of optimizing outpatient management to prevent complications leading to the need for hospitalization," the authors write.

One author disclosed financial ties to Gilead Sciences and AbbVie.

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