

Alcohol-related liver disease

What is alcohol-related liver disease?

Alcohol-related liver disease is liver damage that is caused by drinking too much alcohol. There are several stages of alcohol-related liver disease ranging from mild to severe, and it usually develops over many years. Symptoms such as weight loss, yellowing of the skin and eyes (jaundice) and swelling of the tummy (ascites) are often only seen when the disease is quite advanced, as the liver is very good at repairing itself. Alcohol-related liver disease is sometimes referred to as ARLD.

How does alcohol damage the liver?

Every time we drink alcohol, the liver has to filter it in order to break it down and remove it from the body. Some liver cells die during this process, which is why the liver needs a break from alcohol to allow it to regenerate and make new cells. Drinking too much alcohol over a long period of time means the liver doesn't get a chance to recover. This can result in serious and permanent damage.

There are three main stages of alcohol-related liver disease. These are:

- **Alcohol-related fatty liver disease** – This is the **first stage**. Drinking large amounts of alcohol can lead to a build-up of fat in the liver, which the liver doesn't like. The liver's response to this is to become inflamed, which is actually an attempt to heal itself. If the cause of this inflammation – ie. alcohol – isn't removed, the inflammation response continues, which can lead to scar tissue forming.
- **Alcohol-related hepatitis** – Hepatitis means inflammation of the liver, whatever its cause. In this case, excess alcohol continues to trigger inflammation in the liver. This can result in scar tissue, which is known as fibrosis.
- **Cirrhosis** – If the damage to the liver continues, the inflammation and fibrosis spreads throughout the liver, affecting how well it works and even changing its shape. This is known as **compensated cirrhosis**. There may not be any symptoms of liver disease at this stage, and often, the liver is able to keep working quite well, although any damage that occurs to the liver at this point may be permanent.

However, it is possible to stop further damage and stabilise the condition if the cause of the inflammation (alcohol) is removed. If damage to the liver continues, it will become unable to function properly and will start to fail.

This is known as **decompensated cirrhosis**, or end-stage liver disease. Chemicals and waste products normally dealt with by the liver start to build up in the body and can cause symptoms such as confusion and memory loss, jaundice (yellowing of the skin and eyes) and a build-up of fluid in the abdomen. Other major organs in the body may start to fail too, eventually leading to loss of life.

Is it possible to stop my alcohol-related liver disease from getting worse?

The first stage of alcohol-related liver disease, **alcohol-related fatty liver disease**, is reversible. Stopping drinking alcohol completely for two weeks gives the liver time to recover, reduce fatty deposits and stop the inflammation. If, after this, you do continue to drink alcohol, try to stick to the Government guidelines, which advise that both men and women should drink **no more than 14 units a week**, spread over several days, with two or three consecutive alcohol-free days to give the liver a chance to recover. As a guide, there is one unit in a single measure (25ml) of spirits, three units in a pint of 5.2% lager or cider and 10 units in a bottle of 13.5% wine.

If you have a more serious form of alcohol-related liver disease, such as alcohol-related hepatitis or cirrhosis, **stopping drinking completely (lifelong abstinence) is the only way to prevent liver damage getting worse** and progressing to liver failure and loss of life.

The following lifestyle changes will also help to improve your overall health, as well as the health of your liver. Malnutrition (lack of nutrients the body needs to stay healthy) is common in people with this type of liver disease, so a healthy diet is particularly important.

- Focus on a healthy balanced diet that includes lots of fresh vegetables, fruit, wholegrain carbohydrates and lean protein, such as chicken. Cut down on processed foods and snacks that are high in fat and sugar.
- Aim to reduce your weight (if necessary) so that you have a BMI of 18.5-24.9. This is in the healthy range (see box). As well as drinking too much alcohol, another common cause of fatty liver is being overweight or obese – losing 10% of your bodyweight can reduce the amount of fat in the liver and help prevent inflammation.
- Make exercise a regular part of your daily routine. Aim for 150 minutes per week (30 mins five days a week, for example) of moderate-to-intense activity every week, such as running, cycling or brisk walking.

What should I do next?

If you have alcohol-related fatty liver disease, your GP should now assess you to see how likely it is you have fibrosis or cirrhosis using a blood test score. In some cases, you may also be given a specialist scan (for example, a fibroscan). If this indicates a low risk, you should receive advice on your lifestyle as above and be re-checked for risk of fibrosis every three-five years.

If you are diagnosed with advanced alcohol-related liver disease, your GP should now refer you to a specialist team. This should either be a gastroenterologist (a doctor who specialises in diseases relating to the digestive tract with a liver specialism) or a hepatologist (a doctor who specialises in liver disease). They will be able to assess further the extent of the damage to the liver and decide on the best way to treat it.

If you need help to stay in control around alcohol, or stop drinking altogether, see your doctor, who can advise on local support groups, types of therapy that can help (such as cognitive behavioural therapy, or CBT) and managing withdrawal symptoms. If you have drunk a lot of alcohol over a long period of time, you may need medical assistance to help your body cope without alcohol to start with.

If you are in the early stages of alcohol-related liver disease, as well as stopping drinking, you may be advised to book regular appointments with your doctor so they can check your liver function and keep an eye on any new symptoms that may develop.

Where to find support if you need help to stop drinking alcohol

Cutting down on drinking alcohol, or stopping drinking altogether, can be very difficult and a lot of people need help with this – as many as 70% of people with alcohol-related liver disease are alcohol-dependent. Ask your doctor about alcohol services in your area, and remember that support groups such as Alcoholics Anonymous (AA) are available throughout the UK, free of charge. Useful contacts include:

Alcoholics Anonymous (AA) – support to stop drinking available UK-wide.
Call free on 0800 9177 650 or visit alcoholics-anonymous.org.uk

Drinkline – a national alcohol helpline. Calls are free and completely confidential.
Call 0300 123 1110 (weekdays 9am-8pm and weekends 11am-4pm)

Smart Recovery – a charity that promotes addiction recovery through meetings and online resources, including online meetings. Visit smartrecovery.org.uk

Getting help and support

A diagnosis of any kind of liver disease can be worrying and you may have a lot of questions. Talk to your doctor about anything you don't understand. You can also call the British Liver Trust's helpline on **0800 652 7330** to speak with a liver nurse specialist. Alternatively, email us at helpline@britishlivertrust.org.uk.

You'll find more information about alcohol-related liver disease on our website at www.britishlivertrust.org.uk, where you can also download our booklet ***Alcohol and Liver Disease***.



Call our helpline: 0800 652 7330

Call our office: 01425 481320

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