Alcoholic Hepatitis and Preventing Patients from Reaching the Pint of No Return

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Introduction
- Alcoholic hepatitis (AH) results from long-term alcohol abuse that leads to:
  - Liver inflammation + impaired hepatic function
- Typical patient:
  - Between 40 – 60 years old
  - H/o heavy drinking (>100g) for years
- Clinical and lab features:
  - Jaundice, anorexia, fever, abdominal pain
  - Moderate elevation of AST and ALT
  - AST/ALT ratio ≥ 2
  - Increased bilirubin, white count, INR
- Overall a clinical diagnosis!

Case Description
- A 56 yo man with PMH homelessness, hep C (s/p treatment and SVR), EtOH use disorder presented with subacute-on-
chronic nausea, vomiting, abdominal pain, dark stools, fatigue
  - 10 beers/day for 15 years prior to admit
- Vitals: HR 110 and BP 105/75, afebrile, O2 98% on room air
- Exam: jaundiced, tremulous, moderate TTP in RUQ
- Labs:
  - Hgb 6.6
  - WBC 12.7
  - AST 230
  - ALT 61
- Imaging: chest-abdomen-pelvis with hepatic steatosis

Hospital Course
- IV PPI, CIWA protocol
- IVF prn and 1 unit pRBC
- Hemodynamically stable throughout
- Endoscopy could NOT explain anemia
- EGD: 2mm erosion in gastric cardia, AVM in duodenum
- Colonoscopy: 1 small polyp
- Diagnosed with alcoholic hepatitis
- Labs improved with supportive therapy
  - Hemoglobin: 6.6 > 7.7 > 8.0 > 8.8
  - AST: 230 > 190 > 160 > 120
  - ALT: 61 > 55 > 50 > 35
  - T bili: 8.1 > 8.8 > 8.2 > 6.5 > 5.3
- Discharged with outpatient substance abuse counseling
  - Presented 4 weeks later in s/o continued EtOH use

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Trends in Alcoholic Hepatitis

Rate of hospitalization for AH in the United States from 2002 – 2010

Inpatient mortality for AH from 2002 – 2010

Psychosocial Treatment Options

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What makes up our health?

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Discussion
- Most of recent AH literature:
  - Focuses on mortality benefit of steroids
  - Alternative treatments options (such as pentoxifylline)
  - Scoring systems have been developed to assess disease severity
    - Maddrey Score
    - Lille Score
  - If patient has mild/moderate AH (Maddrey <32) → steroids NOT recommended
    - Supportive therapy alone
  - If severe AH (Maddrey ≥ 32) → steroids!
    - Lille score after 1 week for +/- steroids

But this misses larger issue of EtOH in AH!
- Abstinence from EtOH → only independent predictor of long-term survival in AH
  - One study shows 5-year survival of 75% in abstainers vs 26% in relapsed drinkers
  - Highest mortality benefit gained is through resources to maintain sobriety
  - Patients needs more than just outpatient counseling
- Integrated psychotherapy is effective for achieving abstinence
  - A systematic review found that 45% of patients in a psychosocial intervention group achieved abstinence vs 36% in the control group
  - One study with 74% vs 45% abstinence

Teaching Points
- Alcoholic hepatitis (AH) results from long-term, heavy alcohol abuse
- Jaundice, anorexia, fever, abdominal pain, mild transaminitis and AST/ALT ratio ≥ 2
- Treat with steroids if Maddrey score ≥ 32
- Getting AH patients to stop drinking is the most beneficial treatment for their health
- A deliberate effort utilizing integrated, multidisciplinary care can achieve this!

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References