Did COVID-19 Drinking Spur Alcohol-Related Hepatitis and Liver Transplants?

In the U.S., liver transplants due to alcoholic hepatitis tripled during the COVID-19 pandemic. Other findings show a similar trend.

August 5, 2021 By Trent Straube

It's no secret that many people have been drinking more alcohol than usual due to the COVID-19 pandemic. But as a growing body of research shows, more folks are dealing with severe health issues—in the form of liver disease and liver transplants—as a result of their alcohol consumption.

For example, the number of people in the United States who had liver transplants related to alcoholic hepatitis tripled since the emergence of COVID-19, and the number of people with alcohol-related hepatitis who were placed on waiting lists for transplants more than quadrupled, according to an analysis by Therese Bittermann, MD, of the University of Pennsylvania in Philadelphia. The findings were written about in JAMA Network Open and further reported in MedPage Today.

Similarly, a report from Alberta, Canada, found that hospital admissions related to alcoholic hepatitis increased month after month—about 9% on a monthly average—beginning March 2020, the start of the pandemic. The results were presented at the virtual European Association for the Study of the Liver (EASL 2021) and also reported in MedPage Today.

But first, here's a bit more about hepatitis, which refers to inflammation of the liver, and alcoholic liver disease (ALD), which was already the leading cause of liver transplants in the United States prior to the COVID-19 pandemic. As Hep explains in the Basics section on ALD:

> ALD is the result of liver damage caused by the excess consumption of alcohol. The liver processes what the body needs and discards what it doesn't need, including alcohol. If there is too much alcohol, it can't process it, which increases the risk of liver damage. Over time, that damage can become serious.
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> ALD is a broad term applied to varying degrees of alcohol-related liver injury.
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> Alcoholic hepatitis (AH) is a more severe form of ALD. In addition to fat accumulation, there is

> inflammation of the liver. As a result, the liver is scarred, which is known as fibrosis. If AH progresses, cirrhosis [scarring] may develop. The severity of AH can range from mild to severe, and it can occur suddenly. Mild AH is reversible if a person stops drinking. If drinking continues, severe AH may cause serious complications, including liver failure and death.
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> The backbone of treatment for alcoholic liver disease is abstinence from alcohol [unlike hepatitis C, for example, which is caused by a virus, there is no cure or treatment for ALD]. In addition to stopping alcohol, nutritional support and medication may be prescribed.
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> Alcoholic fatty liver disease is reversible if a person stops drinking. Alcoholic cirrhosis is generally not reversible, but stopping drinking can significantly improve the quality and quantity of life. A small study found that a few cups of coffee a day may ward off alcoholic hepatitis among those who drink heavily. However, this is no substitution for abstinence from alcohol.

Writing in JAMA Network Open, Bittermann and her team shed light on liver transplant trends during the COVID-19 pandemic as they related to alcohol-associated hepatitis. They looked at data from March 1, 2018, to February 28, 2021, and included information from the United Network for Organ Sharing database and the national liver transplant waiting list.

The researchers found that the number of liver transplants related to alcoholic hepatitis increased 268.5% during the pandemic (defined here as June 2020 to February 2021) compared with before. In other words, the number of transplants more than tripled. This translates to an increase of 13.11 transplants per month.

Similarly, the number of people on waiting lists for transplants grew 325% (they more than quadrupled). Before the pandemic, 606 people were on waiting lists for liver transplants for alcoholic hepatitis. Most were white (79%) and men (66%). The pandemic boost, according to the researchers, added about 18 people to the list each month, starting June 2020.

“This marked change [in people on waiting lists and undergoing liver transplants] is likely associated with recent patterns in high-risk alcohol use,” writes Bitterman in JAMA Network Open, before underscoring that other factors are in play.

“Additional contributions,” she continued, ”may have included transplant centers’ increasing acceptance of pursuing liver transplantation for acute alcohol-associated hepatitis and a revision of the liver transplantation allocation system in February 2020, as well as possibly concurrent lifestyle changes and COVID-19 infection itself. Nevertheless, these recent recipients of liver transplant will require intensive longitudinal multidisciplinary care to reduce their risk of alcohol relapse and ensure successful outcomes.”

“As a medical community, we need to be proactive about screening for alcohol use disorder and ensuring the appropriate treatment of those at risk,” Bittermann told MedPage Today. “Specific to

the field of liver transplantation, these recent recipients are likely to be particularly vulnerable in the post-transplant setting."

Increased alcohol consumption is the "collateral damage of COVID-19 due to insecurity, isolation, depression and disquiet brought by the pandemic," added Khalid Mumtaz, MBBS, MSc, from the Ohio State University Wexner Medical Center in Columbus.

Canadian researcher Abdel-Aziz Shaheen, MBChB, of the University of Calgary in Alberta, reached similar conclusions after his study found that an average of 69.5 people per month required hospitalization for alcoholic hepatitis in Alberta during the pandemic, compared with an average of 39.6 in a comparative time period pre-pandemic.

"Our results actually show that an increase in alcohol sales [spurred by the COVID-19 pandemic] will impact significantly the natural history of alcohol liver disease in Canada and probably most of the Western world," Shaheen said during a virtual press conference, according to MedPage.

In related news, U.K. scientists have reported other negative health outcomes in relation to increased drinking. For more, see the MedPage article "Rise in Alcoholic Dependence Seen During Pandemic: Alcohol use disorder in U.K. study tied to worse COVID outcomes and more mental health problems as well."

And for more Hep coverage of the European Association for the Study of the Liver, click #EASL 2021. This year's event took place in June and opened with a focus on how COVID-19 affects global liver disease. Visit EASL.eu for more information.

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