# **ALCOHOLIC LIVER DISEASE**



Empowering Communities...

# By Ms. RUPALI RUPASMITA ROUT ASSISTANT PROFESSOR

#### **INTRODUCTION:**

Alcoholic liver disease is a condition that occurs as a result of excessive alcohol consumption over a long period of time. It is a major cause of liver disease and can lead to serious liver damage, including cirrhosis, liver failure, and liver cancer.

#### **ETIOLOGY:**

Alcoholic liver disease is caused by excessive and prolonged alcohol consumption. The liver is responsible for breaking down and metabolizing alcohol, but excessive drinking can cause damage to liver cells and lead to the development of alcoholic liver disease.

**Genetics:** Some individuals may have a genetic predisposition to liver damage caused by alcohol consumption.

**Gender:** Women are more susceptible to alcoholic liver disease than men, even with lower levels of alcohol consumption.

**Nutrition:** Poor nutrition, especially a deficiency in certain vitamins and minerals, can increase the risk of alcoholic liver disease.

**Co-existing medical conditions:** Individuals with co-existing medical conditions, such as obesity, viral hepatitis, or HIV, are at a higher risk of developing alcoholic liver disease.

#### **PATHOPHYSIOLOGY:**

**Metabolism of alcohol:** Over time, repeated damage to liver cells can lead to scarring and fibrosis, which can progress to more severe liver diseases such as alcoholic hepatitis and cirrhosis. These conditions can cause significant liver damage.

Alcoholic liver disease typically progresses in three stages:

Alcoholic fatty liver disease: This is the earliest and most common stage of alcoholic liver disease. It occurs when the liver begins to accumulate fat as a result of excessive alcohol consumption. This can lead to inflammation and damage to liver cells.

Alcoholic hepatitis: This stage occurs when inflammation and damage to liver cells becomes more severe. Symptoms may include abdominal pain, jaundice, fever, and fatigue. In severe cases, alcoholic hepatitis can lead to liver failure.

Alcoholic cirrhosis: This is the most advanced stage of alcoholic liver disease. It occurs when liver damage becomes irreversible and scar tissue begins to replace healthy liver tissue. Symptoms may include swelling in the abdomen, weight loss, and confusion. In severe cases, alcoholic cirrhosis can lead to liver failure and the need for a liver transplant.

Over time, repeated damage to liver cells can lead to scarring and fibrosis, which can progress to more severe liver diseases such as alcoholic hepatitis and cirrhosis. These conditions can cause significant liver damage.

## **CLINICAL MANIFESTATION:**

- Fatigue and weakness
- Loss of appetite
- Nausea and vomiting
- Abdominal pain and tenderness
- Jaundice (yellowing of the skin and eyes)
- Ascites (fluid buildup in the abdomen)
- Edema (swelling in the legs and ankles)
- Itchy skin
- Confusion and difficulty concentrating
- Sleep disturbances
- Spider-like blood vessels on the skin
- Easy bruising and bleeding.

#### **DIGNOSIS:**

**Blood tests:** Blood tests can be used to evaluate liver function and check for elevated liver enzymes, which can be a sign of liver damage. Blood tests can also be used to check for other indicators of liver disease, such as high bilirubin levels.

**Imaging tests**: Imaging tests, such as ultrasound, CT scan or MRI, can be used to evaluate the liver and detect signs of liver damage, such as scarring or fatty deposits.

**Biopsy:** A liver biopsy may be recommended to confirm a diagnosis of alcoholic liver disease. During a biopsy, a small sample of liver tissue is removed and examined under a microscope to check for signs of inflammation or scarring.

Alcohol screening: Your healthcare provider may ask you about your alcohol consumption habits and may use screening tests to help determine if your drinking is contributing to your liver disease.

#### PHARMACOLOGICAL MANAGEMENT:

**Medications:** Medications may be used to treat symptoms of alcoholic liver disease and to help reduce inflammation and damage to the liver. These may include corticosteroids, such as prednisone, and pentoxifylline, which can help reduce inflammation and scarring in the liver.

**Nutrition therapy:** Nutritional support is important in the treatment of alcoholic liver disease. A registered dietitian can help develop a meal plan that is tailored to your individual needs and can help ensure that you are getting adequate nutrition.

Alcohol cessation: Stopping or reducing alcohol consumption is a critical component of treating alcoholic liver disease. Your healthcare provider may recommend counseling or support groups to help you quit drinking.

**Liver transplant:** In severe cases of alcoholic liver disease, a liver transplant may be necessary. A liver transplant involves removing the damaged liver and replacing it with a healthy liver from a donor.

## NON- PHARMACOLOGICAL MANAGEMENT:

- Limit alcohol consumption: For men, limiting alcohol consumption to no more than two drinks per day and for women, limiting alcohol consumption to no more than one drink per day. If you have been diagnosed with alcoholic liver disease or other liver conditions, it may be necessary to abstain from alcohol completely.
- **Get vaccinated:** Vaccines are available for hepatitis A and B, which can cause liver damage and increase the risk of developing alcoholic liver disease.
- Maintain a healthy weight: Being overweight or obese can increase the risk of developing alcoholic liver disease. Maintaining a healthy weight through a balanced diet and regular exercise can help reduce the risk.
- Eat a healthy diet: A healthy diet that is rich in fruits, vegetables, whole grains, and lean proteins can help support liver health.
- Avoid drugs and toxins: Avoiding exposure to drugs and toxins that can damage the liver, such as certain medications, chemicals, and viruses, can help reduce the risk of developing alcoholic liver disease.
- **Get regular check-ups:** Regular check-ups with your healthcare provider can help identify early signs of liver disease and prevent the progression of the condition.