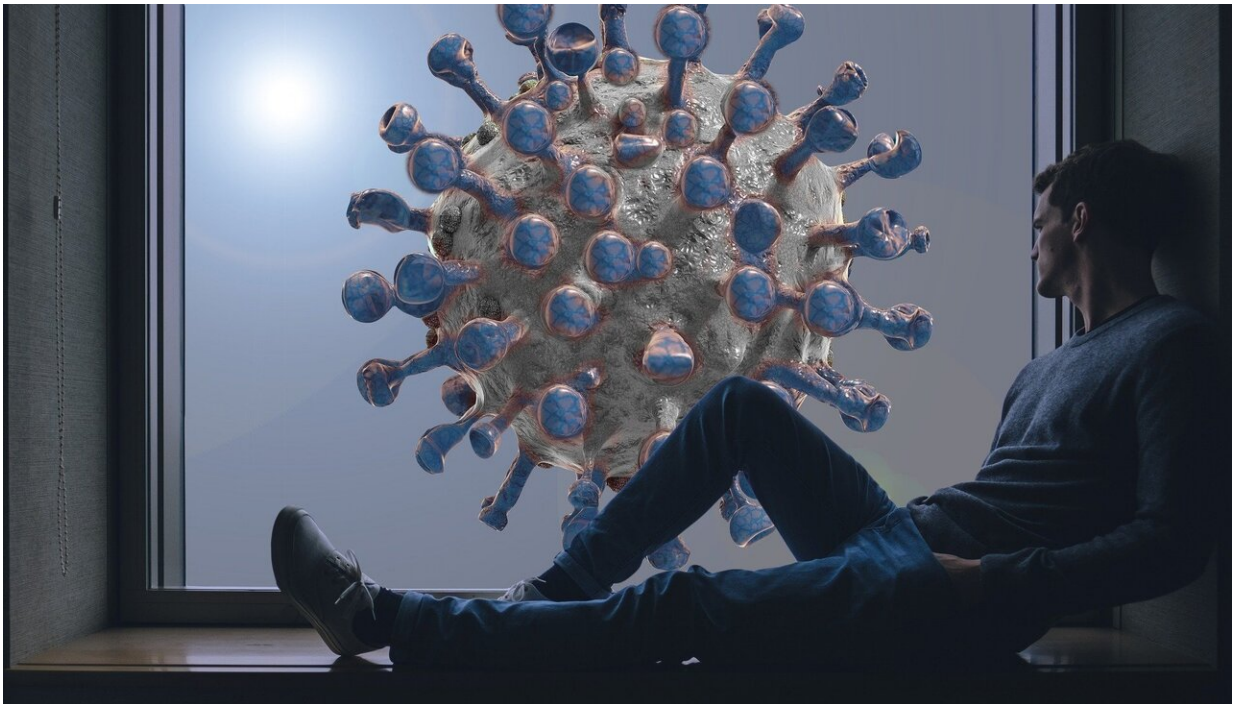


COVID-19 death after liver disease may reveal difference in care: study

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A survey of people hospitalised for COVID-19 found those with chronic liver disease and a history of alcohol abuse were 80 percent more likely to die from the virus and less likely to receive life-saving intubation.

In research to be presented this week at the International Liver Congress,

researchers based in France analysed the [national database](#) of 259,000 COVID patients admitted to hospitals in 2020.

Some 16,300 of those had been previously diagnosed with chronic [liver](#) disease.

The average rate of death among all patients hospitalised with the virus was 15 percent. Among those with chronic liver disease, however, the rate jumped to nearly a quarter.

But while previous studies had looked at [liver failure](#) as a factor in the severity of COVID, this study found that mortality could be linked to which patients were placed on ventilation.

According to the study, patients who suffered alcoholism, advanced cirrhosis or [liver cancer](#) and showed higher COVID-19 morbidity and were less likely to have been intubated.

Patients with milder liver problems—from chronic liver disease unrelated to [alcohol](#) abuse, organ transplants and viral hepatitis for example—were not at heightened risk for COVID-19 mortality but received ventilation at a greater rate.

"Our results suggest that a limitation of the therapeutic effort may have contributed to the excess mortality of patients with a liver-related complication and of patients with alcohol use disorders," the study said.

Thomas Berg, incoming president of the European Association for the Study of the Liver (EASL), told AFP the findings reflected a trend in care for liver patients that pre-dates the pandemic.

"There is already some public data showing that having a liver-related complication and an [alcohol-abuse](#) disorder reduces the likelihood of

being mechanically ventilated by 20-25 percent," he said.

'Important study'

A 2013 US survey of 300 people with mild and advanced liver diseases found the majority of respondents perceived a stigma against their diagnosis.

"Most patients are willing to talk about if they have a cardiac disease or cancer," Berg said, "but when it comes to liver [disease](#) there is always the perception it is self-inflicted, related to drugs or alcohol."

The [national survey](#) is the largest that has looked at the question of how likely [chronic liver disease](#) patients are to survive a coronavirus infection.

France's universal access to hospital care means a wide range of COVID patients were represented, and analysts could look back at 10 years of records from the national discharge database to determine comorbidities.

"It's an important study because the data is coming from a natural registry and the data is quite robust," said Berg.

Other studies to be presented at the conference look at how the pandemic has affected alcohol use in general.

Last month figures from Britain's Office of National Statistics (ONS) showed there had been 7,423 deaths directly caused by misuse of alcohol in 2020—a 20 percent rise from 2019 and a 20-year high.

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