

Hepatitis linked to alcohol increasingly drives emergency department visits, especially among younger adults: Study

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Hepatitis linked to alcohol, the most severe form of alcohol-associated liver disease, is increasingly prevalent, severe, and likely to involve

emergency departments, according to a new analysis. The findings reflect increased drinking and alcohol-linked liver disease in the general population.

Rising rates of [alcohol](#)-associated [hepatitis](#), including among adults aged 25–44 years, are known to be causing greater disability, mortality, and health care and economic costs. The growing use of emergency departments for alcohol complications, rather than more cost-effective primary care services, further amplifies that burden. A better understanding of how patients with alcohol-associated conditions use emergency departments can potentially inform interventions.

Although most hospitalized patients with alcohol-associated hepatitis are admitted from the [emergency department](#), little is known about emergency department use by people seeking help with this condition. For the study in *Alcohol: Clinical & Experimental Research*, investigators at the Cleveland Clinic aimed to evaluate the rate of emergency department visits for alcohol-associated hepatitis in addition to [disease](#) severity and its complications.

Investigators drew from the Nationwide Emergency Department Sample dataset for 2016–2019; this included visits that did and did not lead to hospital admission across 1,000 emergency departments in 40 US states and DC.

They analyzed the visits of patients aged 18 years and older who were recorded as having primary alcohol-associated hepatitis (the principal diagnosis) or secondary alcohol-associated hepatitis (if the visit was likely linked to that condition); this terminology did not necessarily reflect disease severity. They used [statistical analysis](#) to explore trends in emergency department use by these patients.

Over the three-year study period, emergency department visits remained

steady. Overall, alcohol-associated hepatitis accounted for one-tenth of 1 percent of visits; 85% of those patients required hospitalization. However, the number of visits attributed to this disease increased from 99,000 in 2016 to 125,000 in 2019.

These patients had an average age of 47 years. Those aged 45–64 years had the highest rate of emergency department visits; this decreased during the study period. Meanwhile, the rate increased among those aged 25–44 years. Two out of three presenting patients were male—even though women are more susceptible to liver disease linked to alcohol—perhaps in part because of greater high-risk binge drinking in men.

Most patients with alcohol-associated hepatitis had underlying cirrhosis. The other most frequent liver complications were ascites, acute kidney injury, and pancreatitis. The rate of secondary hepatitis (more common in [older patients](#)) increased more than the rate of primary hepatitis (more common among younger patients).

Patients with secondary alcohol-associated hepatitis had increased rates of complications involving co-occurring liver conditions, higher emergency department use, and a higher death rate during their visit or hospital admission compared to those with primary hepatitis. Medicaid and private insurance were the most common payors.

The findings point to more patients presenting at emergency departments with advanced disease and related severe complications. The increasing emergency department use for alcohol-associated hepatitis, more patients requiring hospitalization, and more younger [patients](#) presenting with this condition may reflect rising binge drinking, targeted alcohol marketing, and increased rates of certain co-occurring conditions.

Notably, the rise in emergency department visits for alcohol-associated

hepatitis occurred before the COVID-19 pandemic, which further drove up the prevalence of this disease.

More information: Shreya Sengupta et al, Emergency services utilization by patients with alcohol-associated hepatitis: An analysis of national trends, *Alcohol: Clinical & Experimental Research* (2024). DOI;10.1111/acer.15223.

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