What Are the Myths Vs. Facts About Alcohol and the Liver?

True or False?

- Many victims of liver disease are not alcoholics.
- Even moderate social drinkers may risk liver damage.
- People who never drink alcoholic beverages may still get serious liver problems.

Answer: All statements are true. How many did you get right?

If you were surprised by the answers, don't be discouraged. You are not alone. Most people are confused about the relationship between alcohol and the liver. The American Liver Foundation has found that there is much misunderstanding on this subject. Because myths can be harmful, here are straight answers to some of the most common questions about alcohol and the liver.

Does alcohol cause liver disease?
Yes, but it is only one of the many causes, and the risk depends on how much you drink and over how long a period. There are more than 100 liver diseases. Known causes include viruses, hereditary defects, and reactions to drugs and chemicals. Scientists are still investigating the causes for the most serious liver diseases.

How much alcohol can I safely drink?
Because some people are much more sensitive to alcohol than others, there is no single right answer that will fit everyone. Based on current dietary guidelines, moderate drinking for women is defined as an average of 1 drink or less per day. Moderate drinking for men is defined as an average of 2 drinks or less per day (USDA, 2000). A standard drink is one 12-ounce beer, one 5-ounce glass of wine, or one 1.5-ounce shot of distilled spirits. Each of these drinks contains about half an ounce of alcohol.

Are there dangers from alcohol besides the amount that is consumed?
Yes. Even moderate amounts of alcohol can have toxic effects when taken with over-the-counter drugs containing acetaminophen. If you are taking over-the-counter drugs, be especially careful about drinking and don't use an alcoholic beverage to take your medication. Ask your doctor about precautions for prescription drugs.

Can "social drinkers" get alcoholic hepatitis?
Yes. Alcoholic hepatitis is frequently discovered in alcoholics, but it also occurs in people who are not alcoholics. People vary greatly in the way their liver reacts to alcohol.

What kinds of liver diseases are caused by too much alcohol?
Alcoholic hepatitis is an inflammation of the liver. Symptoms include loss of appetite, nausea,
vomiting, abdominal pain and tenderness, fever, and jaundice. It is believed to lead to alcoholic cirrhosis over a period of years. Cirrhosis involves permanent damage to the liver cells. "Fatty liver" is the earliest stage of alcoholic liver disease. If the patient stops drinking at this point, the liver can heal itself.

**How can alcoholic hepatitis be diagnosed?**
Alcoholic hepatitis is not easy to diagnose. Sometimes symptoms are worse for a time after drinking has stopped than they were during the drinking episode. While the disease usually comes on after a period of fairly heavy drinking, it may also be seen in people who are moderate drinkers. Blood tests may help in diagnosis. Proof is established best by liver biopsy. This involves taking a tiny specimen of liver tissue with a needle and examining it under a microscope. The biopsy is usually done under local anesthesia.

**Are men or women more likely to get alcoholic hepatitis?**
Women appear to be more likely to suffer liver damage from alcohol a woman's body handles alcohol differently than a man's body.

**Do all alcoholics get alcoholic hepatitis and eventually cirrhosis?** No. Some alcoholics may suffer seriously from the many physical and psychological symptoms of alcoholism but escape serious liver damage. Alcoholic cirrhosis is found among alcoholics about 10-25 % of the time.

**Is alcoholic hepatitis different from "fatty liver?"** Yes. Anyone who drinks alcohol heavily, even for a few days, may develop a condition in which liver cells are swollen with fat globules and water. This condition is called "fatty liver." It may also result from diabetes, obesity, certain drugs, or severe protein malnutrition. Fatty liver caused by alcohol is reversible when drinking of alcohol is stopped.

**Does alcoholic hepatitis always lead to cirrhosis?**
No. It usually takes many years for alcoholic hepatitis to produce enough liver damage to result in cirrhosis. If alcoholic hepatitis is detected and treated early, cirrhosis can be prevented.

**Is alcoholic hepatitis dangerous?**
Yes. It may be fatal, especially if the patient has had previous liver damage. Those who have had nutritional deficiencies because of heavy drinking may have other ailments. These medical complications may affect almost every system in the body. It is important to recognize and treat alcoholic cirrhosis early, so that these life-threatening consequences are prevented.

**How can alcoholic hepatitis be prevented?**
The best treatment is to stop drinking. Treatment may also include prescribed medication, good nutrition, and rest. The patient may be instructed to avoid various drugs and chemicals. Since the liver has considerable ability to heal and regenerate, the prognosis for a patient with alcoholic hepatitis is very hopeful - if he or she totally abstains from drinking alcohol.

**Is cirrhosis different from alcoholic hepatitis?**
Yes. Hepatitis is an inflammation of the liver. In cirrhosis, normal liver cells are damaged and replaced by scar tissue. This scarring keeps the liver from performing many of its vital functions.
What causes cirrhosis?
There are many causes for cirrhosis. Long-term alcohol abuse is one. Chronic hepatitis is another major cause. In children, the most frequent causes are biliary atresia, a disease that damages the bile ducts, and neonatal hepatitis. Children with these diseases often receive liver transplants.

Many adult patients who require liver transplants suffer from primary biliary cirrhosis. We do not yet know what causes this illness, but it is not in any way related to alcohol consumption.

Cirrhosis can also be caused by hereditary defects in iron or copper metabolism or prolonged exposure to toxins.

Should alcoholics receive a liver transplant?
Some medical centers will not perform liver transplants on alcoholics because they believe a substantial percentage of these patients will return to drinking. Other centers require abstinence from drinking at least six months before and after surgery, plus enrollment in a counseling program.

The information contained in this sheet is provided for information only. This information does not constitute medical advice and it should not be relied upon as such. The American Liver Foundation (ALF) does not engage in the practice of medicine. ALF, under no circumstances, recommends particular treatments for specific individuals, and in all cases recommends that you consult your physician before pursuing any course of treatment.