



ALCOHOL  
and you

# THE LIVER AND ALCOHOL

This fact sheet will help you get a better understanding of Alcohol Related Liver Disease, how it can present, what causes it and how someone with ARLD can be helped.

## → What does the liver do?

The liver is in the upper right part of the abdomen. With the exception of the brain, the liver is the most complex organ in the body. It has many functions which include:

- Helping process fats and proteins from digested food.
- Helping remove or process alcohol, poisons and toxins from the body.
- Regulating blood sugar and cholesterol levels
- Helping fight infection and disease

The liver is very resilient and capable of healing itself. This ability is reduced with ongoing abuse to the liver through alcohol. This can result in serious and permanent damage to your liver.



## → What is Alcohol Related Liver Disease (ARLD)

There are three main stages of ARLD, although there's often an overlap between each stage. Drinking too much alcohol can lead to three types of liver conditions - fatty liver, inflammation and cirrhosis.

### Fatty Liver

Drinking large amounts of alcohol, even for just a few days, can lead to a build-up of fats in the liver. This is called alcoholic fatty liver disease, and is the first stage of ARLD. Fatty liver disease rarely causes any symptoms, but an important warning sign that you're drinking at a harmful level. Being overweight or diabetic also increases the risk of developing a fatty liver. Fatty liver disease is reversible. If you stop drinking alcohol for two weeks, your liver should return to normal. However, some people with fatty liver develop inflammation (hepatitis).

### Hepatitis (inflammation)

Hepatitis means inflammation of the liver. The inflammation can range from mild to severe.

- Mild hepatitis may not cause any symptoms. The only sign of inflammation may be an abnormal level of liver enzymes in the blood which can be detected by a blood test.
- A more severe hepatitis tends to cause symptoms such as feeling sick, jaundice (yellowing of the skin), generally feeling unwell, and sometimes pain over the liver.
- A very severe bout of alcoholic hepatitis can quickly lead to liver failure and is often fatal.



**Cirrhosis is seen with ongoing scarring and the liver tissue is replaced by poorly functioning scar tissue.**

## Fibrosis and cirrhosis

With ongoing alcohol abuse, scarring occurs in the liver. Scar tissue replaces the liver cells and, unlike liver cells, performs no function. Scar tissue can interfere with blood flow to and in the liver. Without enough blood, these cells die, and more scar tissue is formed.

Fibrosis is early scarring within the liver. Fibrosis itself causes no symptoms.

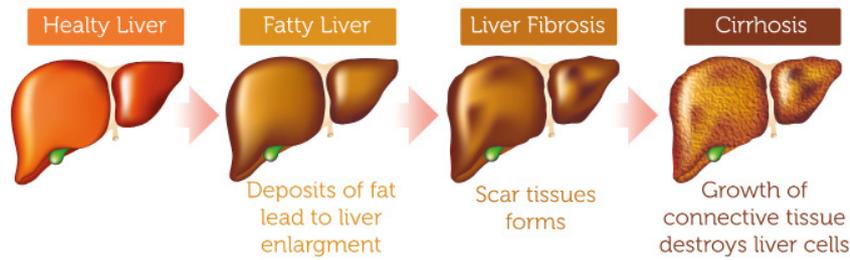
The liver gradually loses its ability to function well. In the early stages of the condition, often there are no symptoms. With time and ongoing pressure on the liver with ongoing ongoing damage complications occur such as development of intra-abdominal fluid (ascites) and swollen veins in the oesophagus ( varices) which can lead to life threatening bleeding.

When the liver damage progresses to cirrhosis, the liver cannot regenerate and the only option is liver transplantation for suitable cases.

## Alcohol withdrawal:

When someone is dependent on alcohol and suddenly stops drinking without medical supervision, this can cause damage to the brain as the body's chemistry tries to re-adjust to not having alcohol.

## → The Stages of Liver Problems



## The Accuracy of Liver Function Tests (LFTs)

The limitations of LFTs in diagnosis are widely misunderstood. Blood tests do not identify the degree of fibrosis and can return negative results in patients with advanced fibrosis which can result in an unwarranted sense of security, that "I am ok". Even in patients with cirrhosis, liver blood tests may be normal.

## Complications

**Death rates linked to ARLD have risen considerably over the last few decades. Life-threatening complications of ARLD include:**

- internal bleeding
- build-up of toxins in the brain (encephalopathy)
- fluid accumulation in the abdomen (ascites) with associated kidney failure
- liver cancer



# → Getting support

## Preventing ARLD

The most effective way to prevent ARLD is to consult with your doctor and stick to the recommended limits:

- men and women are advised advised not to regularly drink more than 14 units a week .
- spread your drinking over three days or more if you drink as much as 14 units a week

**If you do have any signs of ALCOHOL RELATED LIVER DISEASE follow the advice of your doctor.**

**Confused about alcohol units? Dont speculate calculate!**

**If you can see signs of ARLD it is recommended to stop drinking alcohol.**

For more information see [www.britishlivertrust.org.uk/liver-information/liver-conditions/cirrhosis/](http://www.britishlivertrust.org.uk/liver-information/liver-conditions/cirrhosis/)

For drug and alcohol services in Northern Ireland see

[www.drugsandalcoholni.info](http://www.drugsandalcoholni.info)

and click on the 'Services Near You'

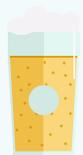
If you are worried see your GP, use the alcohol and drug services in you area which can be found at [www.drugsandalcoholni.info](http://www.drugsandalcoholni.info)

or see the Alcohol and You website that has self-help and a range of information and resources.

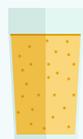
[www.alcoholandyouni.com](http://www.alcoholandyouni.com)

## POCKET ALCOHOL UNITS GUIDE

STANDARD DRINK UNITS - VISIT [ALCOHOLANDYOUNI.COM](http://ALCOHOLANDYOUNI.COM) FOR MORE



Pint of premium beer (5%)  
= 2.8 units



Pint of cider (5%)  
= 2.8 units



Alcopop 275ml (4%)  
= 1.4 units



Can of beer 330ml (4%)  
= 1.7 units



Gin / Vodka / Rum  
35ml (37.5%)  
= 1.3 units



Spirits 1 litre (37.5%)  
= 37 units



Small bottle of wine 187.5ml (12%)  
= 2.3 units



Bottle of wine 750ml (12%)  
= 9.2 units

Developed by Ed Sipler  
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