



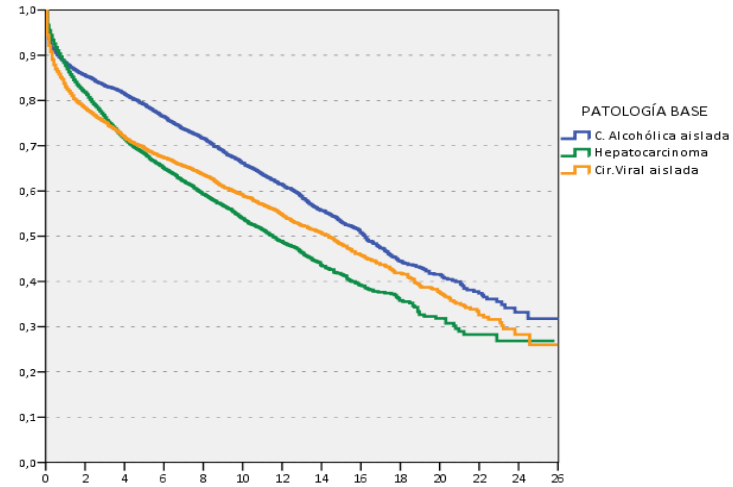
# Receptores de alto riesgo: Podemos predecir y evitar la recaída alcohólica?

Dr Santiago Tome

Hosp. Univ. Santiago de Compostela

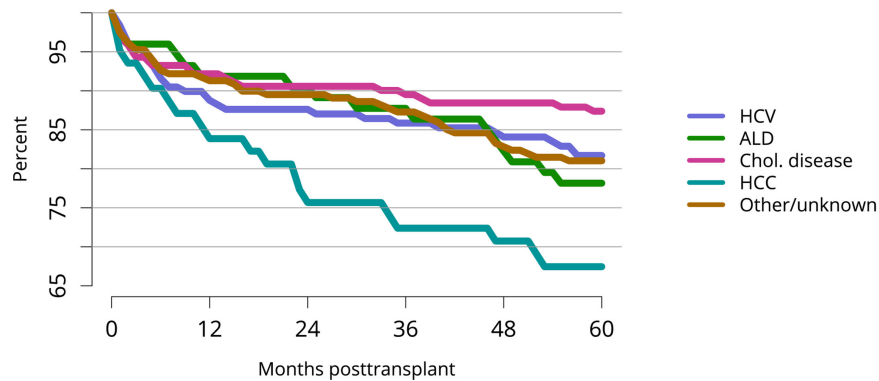
SETH 16 de Octubre, 2019

## ONT datos 1991-2016 Cirrosis alcohólica ( azul)



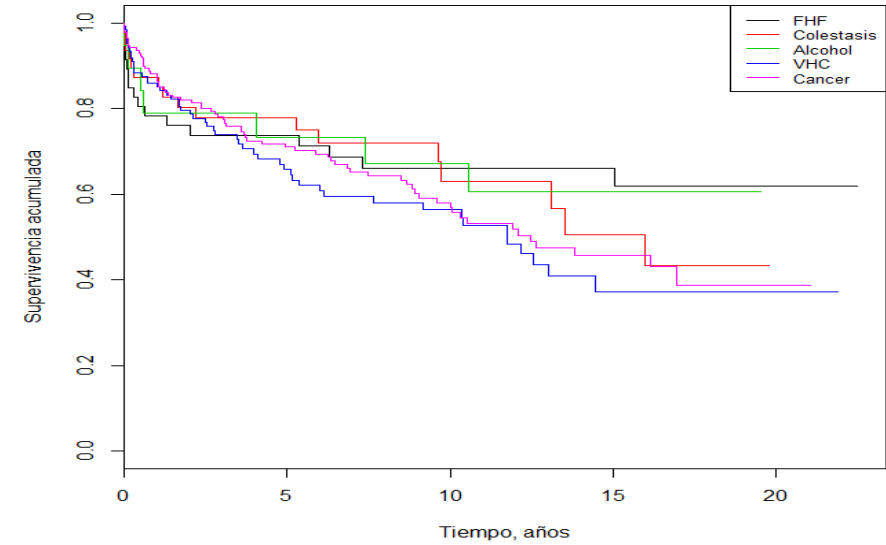
Supervivencia	1 mes	3 meses	1 año	3 años	5 años	10 años	15 años	20 años
Cirrosis alcohólica aislada* (4648)	95.9%	92.3%	88.3%	83.2%	79.1%	66.1%	53%	41.4%
Hepatocarcinoma (5493)	96.7%	94.4%	87.7%	76.3%	68.2%	53.8%	41.5%	31.8%
Cirrosis Viral aislada* (3380)	94.4%	90.7%	83%	75.2%	69.3%	58.9%	48.1%	37.3%

\*Sin 2º diagnóstico y ACVHC negativo

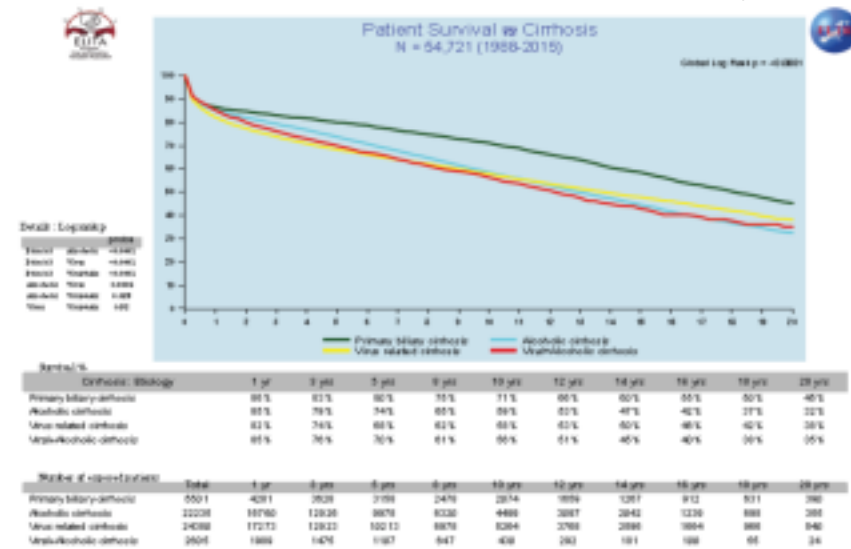


## Datos SRTR 201 Alcohol (verde)

## Supervivencia de Tx Hepatico por Cirrosis Alcohólica ( verde) Datos CHUS 1994-2017



## Datos de ELTR 1988-2015 Alcohol azul)



Author	Reference	Year	No. of Patients	Mandated Abstinence	Follow-up	Relapse Rate	Study Design
Anand et al.	27	1997	39	None	25 months	13%	Retrospective
Bellamy et al.	15	2001	123	None	7 years	13%	Retrospective
Berlakovich et al.	21	1994	44	None	78 months	32%	Retrospective
Bird et al.	28	1990	18	None	4 mo–7 yrs	17%	Retrospective
DiMartini et al.	26	2001	34	None	1 year	38%	Retrospective
Doffoel et al.	50	1992	57	6 months	Not stated	33%	Retrospective
Everson et al.	29	1997	42	None	Not stated	17%	Retrospective
Fabrega et al.	30	1998	44	None	40 months	18%	Prospective
Foster et al.	31	1997	63	None	49 months	22%	Retrospective
Gerhardt et al.	32	1996	41	None	Not stated	49%	Retrospective
Gish et al.	33	1993	29	None	24 months	24%	Prospective
Gish et al.	34	2001	61	None	83 months	20%	Prospective
Gledhill et al.	22	1999	24	None	14 months	25%	Retrospective
Howard et al.	35	1994	20	None	34 months	95%	Retrospective
Iasi et al.	36	2003	66	None	14 months	15%	Retrospective
Karman et al.	56	2001	49	6 months	3 years	21%	Retrospective
Knechtle et al.	37	1993	32	None	Not stated	13%	Retrospective
Krom	51	1994	30	6 months	Not stated	13%	Retrospective
Kumar et al.	38	1990	52	None	25 months	12%	Retrospective
Lucey et al.	39	1997	50	None	63 months	34%	Retrospective
Mackie et al.	40	2001	46	None	22 months	46%	Retrospective
Osorio et al.	41	1994	43	6 months	21 months	19%	Retrospective
Pageaux et al.	42	2003	128	None	54 months	31%	Retrospective
Pereira et al.	43	2000	56	None	30 months	50%	Retrospective
Stefanini et al.	44	1997	18	6 months	Not stated	27%	Retrospective
Tang et al.	45	1998	56	None	Not stated	50%	Retrospective
Tome et al.	46	2002	68	3 months	38 months	10%	Retrospective
Tringali et al.	47	1996	58	None	49 months	22%	Retrospective
Yates et al.	48	1998	43	6 months	21 months	19%	Retrospective
Zibari et al.	49	1996	29	None	Not stated	7%	Retrospective

**Recurrencia alcoholica  
postrasplante :  
≈30%**

# Alcoholismo DSM-5



Abuso Alcohólico

Dependencia

Trasplante Hepático

20-25%

4-5%

70-75%

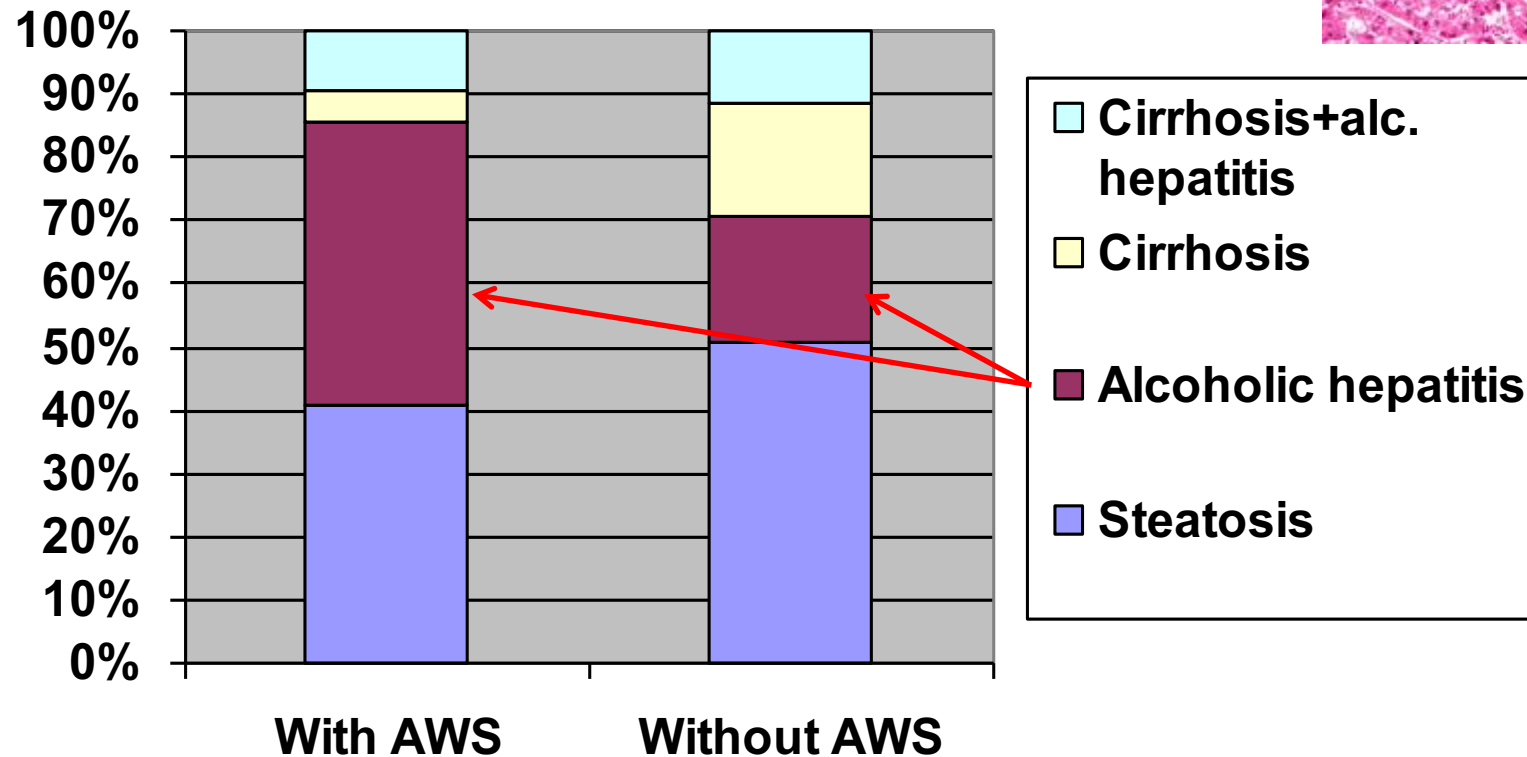
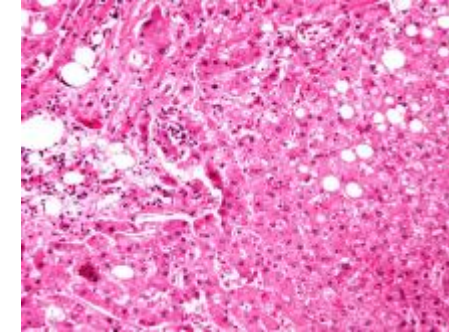
Beresford, 1997 Dimartini, 2004

“Consumo continuado de alcohol a pesar de las consecuencias negativas biológicas, psicosociales y conductuales mantenidas en el tiempo (ultimo año)”

## Liver Disease in Heavy Drinkers With and Without Alcohol Withdrawal Syndrome

E. Barrio, S. Tomé, I. Rodríguez, F. Gude, J. Sánchez-Leira, E. Pérez-Becerra, and A. González-Quintela

A series of 256 consecutive liver biopsies in heavy drinkers admitted to the hospital



# Que tiempo de abstinencia asegura ausencia de recaída?

Valliant's study:

Recurrence (8-10 y follow up)

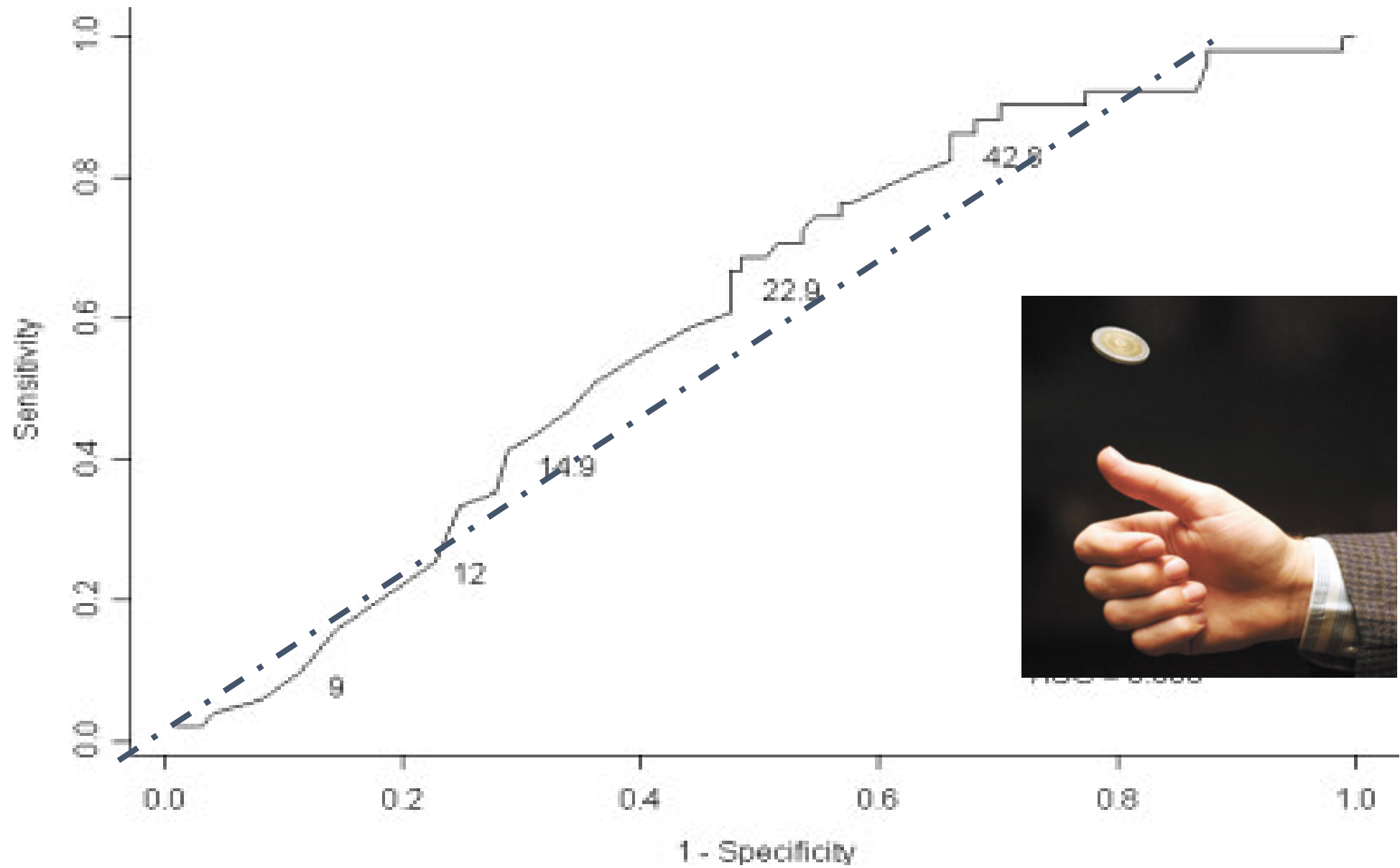
6 months of abstinence : 59%

24 months of abstinence : 41%

Vaillant GE. Liver Transpl Surg 1997

7 years better than 6 months

Vaillant GE. A 60-year follow-up of alcoholic men.  
Addiction, 2003



A.Dimartini, 2006

# Predictive factors of durable abstinence

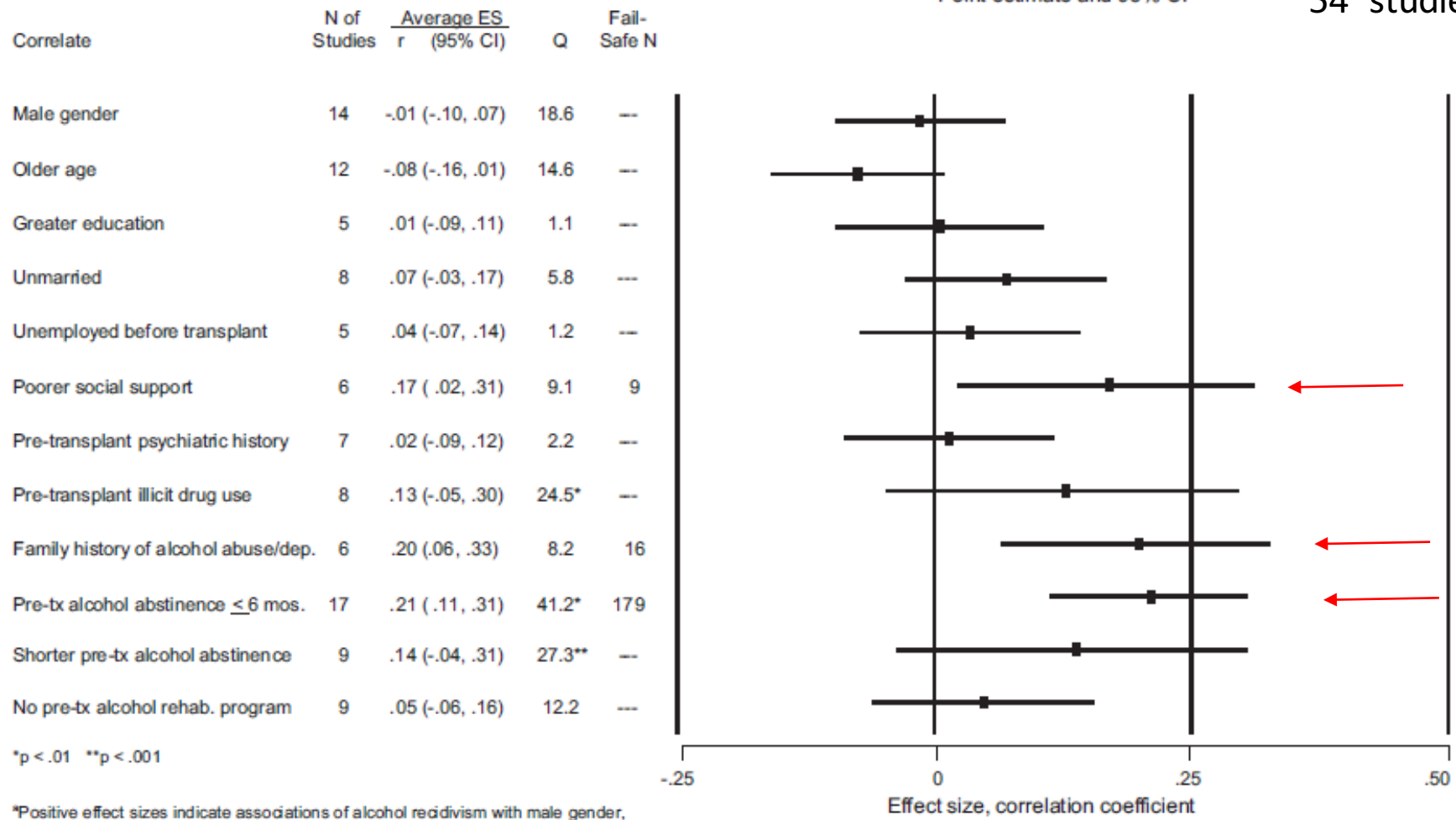
## **Positives**

- ✓ acknowledgment by the patient of his or her addiction
- ✓ strong social support
- ✓ substitute activities
- ✓ a source of improved self-esteem
- ✓ a rehabilitation relationship
- ✓ perception of negative consequences of alcohol relapse

## **Negatives**

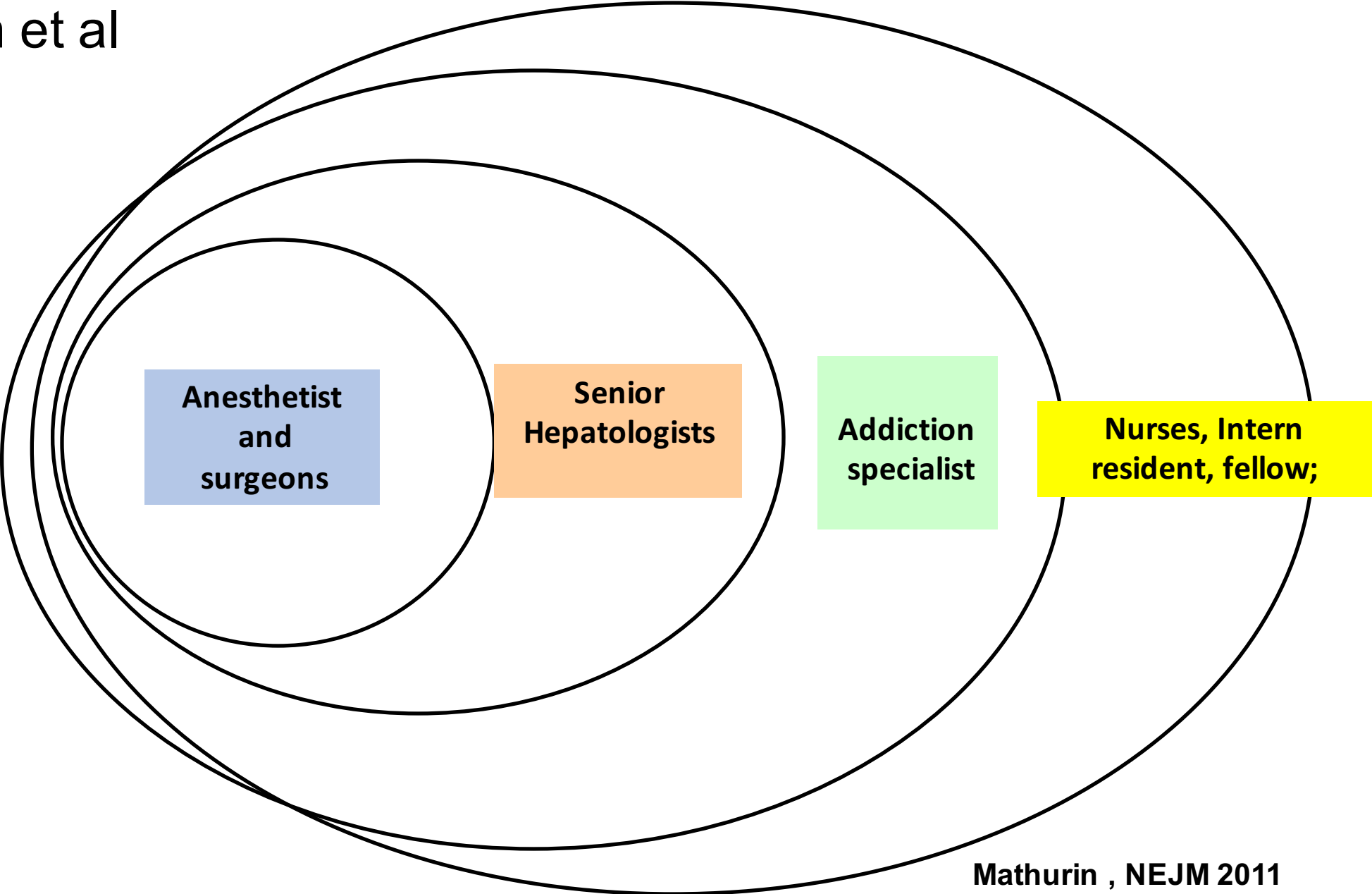
- preexisting psychiatric comorbidities
- unremitting multidrug abuse
- repeated unsuccessful attempts of rehabilitation
- social isolation





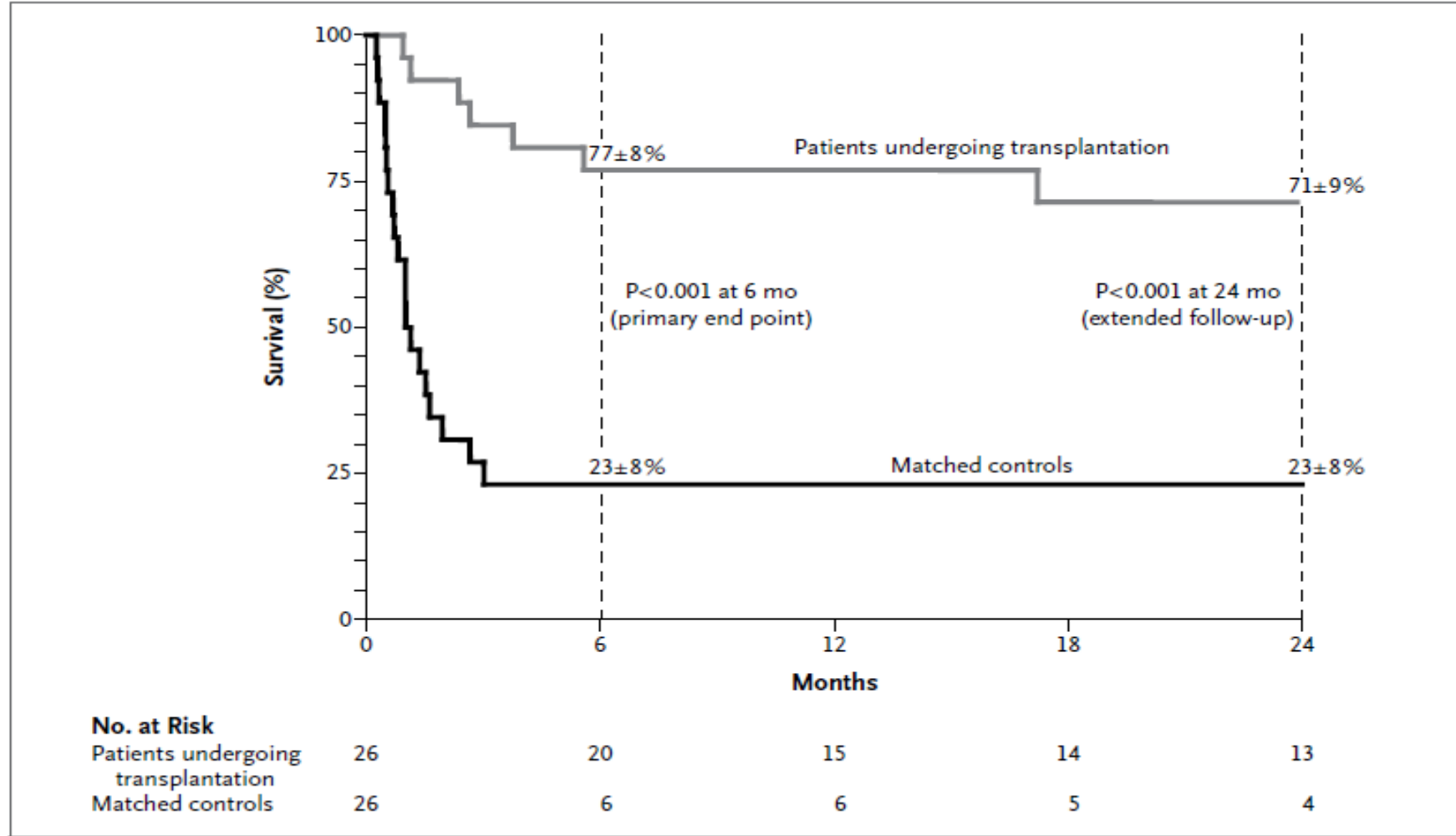
“ No single factor seems to be of major importance as a predictor”

Proceso de selección :  
Mathurin et al



## Early Liver Transplantation for Severe Alcoholic Hepatitis

Philippe Mathurin, M.D., Ph.D., Christophe Moreno, M.D., Ph.D.,



5/6 muertes : infección 4 Aspergilosis invasivas.  
 3/26 recurren en el consumo alcohólico

*American Journal of Transplantation* 2016; 16: 739–740  
Wiley Periodicals Inc.

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doi: 10.1111/ajt.13587

Editorial

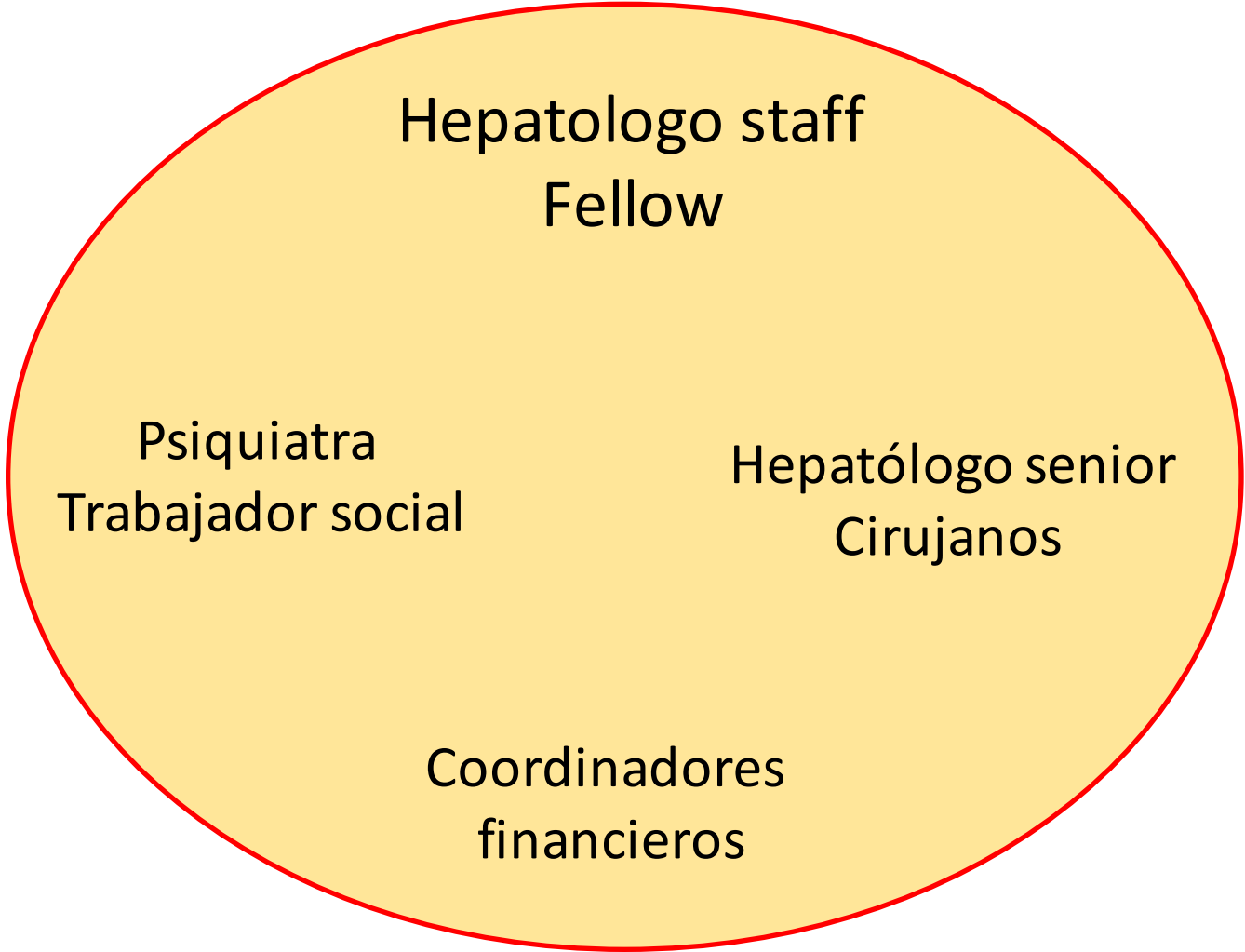
## **Liver Transplantation for Severe Alcoholic Hepatitis Crosses the Atlantic**

**M. R. Lucey\* and J. P. Rice**

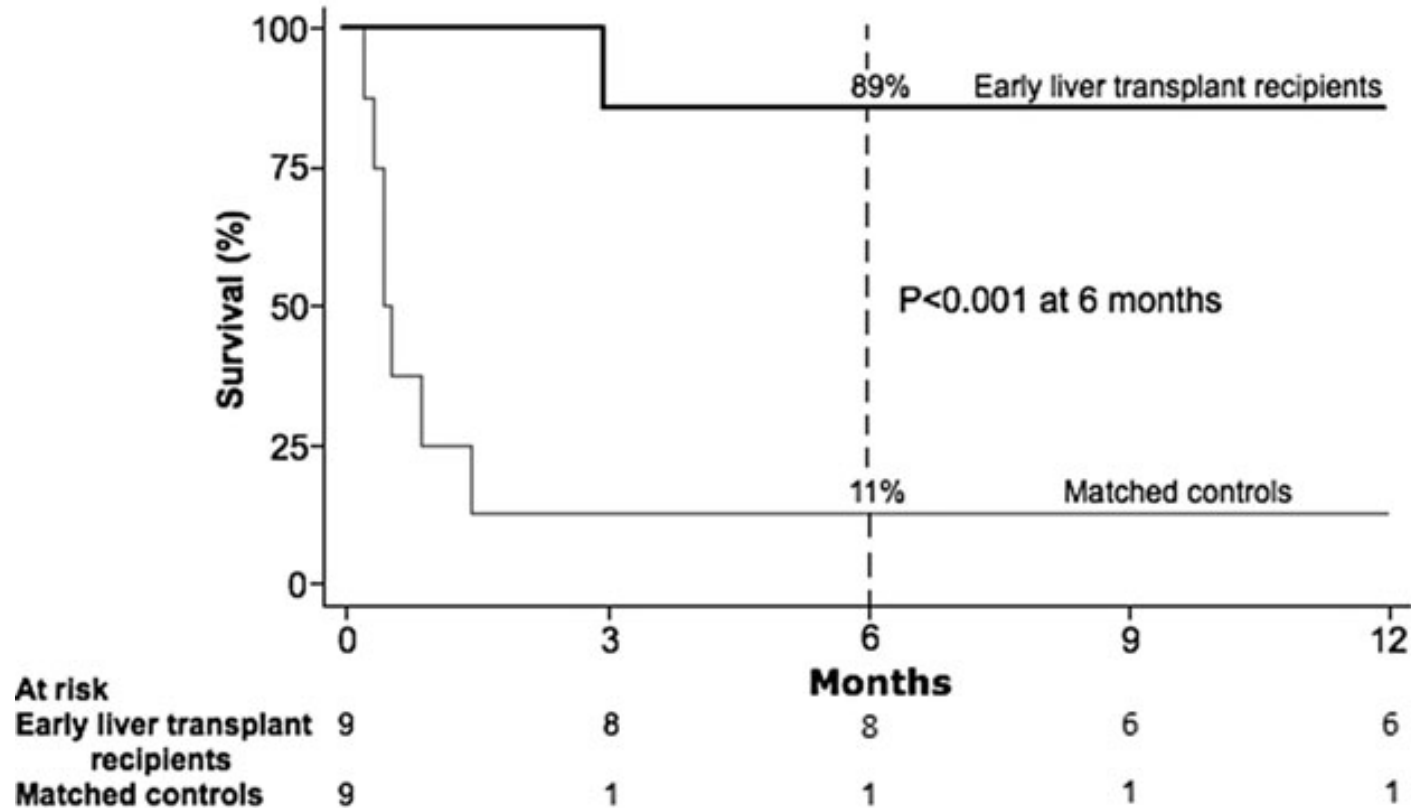
*Division of Gastroenterology and Hepatology,  
Department of Medicine, University of Wisconsin School  
of Medicine and Public Health, Madison, WI*

*\*Corresponding author: Michael R. Lucey,  
mrl@medicine.wisc.edu*

# Proceso de selección de Im GY et al



# Resultados Im et al



Recurrencia 11.5%

# Hopkins Phycosocial Relapse Scale

## Protective Characteristics

	0 Points	+1 Points	+2 Points
Self-admission to hospital	Involuntary	Knew help was needed, but did not seek help	Admitted self for treatment
Drinks/day preabstinence	>17	9 to 17	<9
Insight into diagnosis	No insight (including overt encephalopathy)	Limited insight	Completely accept diagnosis
Marital status	Single / divorced / widowed	–	Married / boyfriend / girlfriend
Abstinence before transplant	≤2 weeks	2–4 weeks	≥4 weeks

## At Risk Characteristics

	–2 Points	–1 Points	0 Points
Psychiatric comorbidity	History of psychiatric disease	–	No history of psychiatric disease
History of other substance abuse	Illicit substance abuse	Active smoker	None
History of failed rehab attempt	Relapse after a formal rehabilitation program	–	No attempt at formal rehab
Family history of alcoholism	Immediate family	Extended family	None
Employment immediately before presentation	Yes	–	No
Legal History (eg, DUI, custody loss because of alcohol abuse, and so on)	Multiple incidents	1 incident	None

# HIGH Risk Alcoholism Relapse (HRAR)

Duración del consumo : <11 años (0)  
12-24 (1)  
>25 (2)

Numero de Unidades  
De bebida standard/ día: <9 (0)  
9-17 (1)  
>18 (2)

Numero de intentos de  
Tratamiento previo Ninguno (0)  
Uno (1)  
>1 (2)

Riesgo de recurrencia:

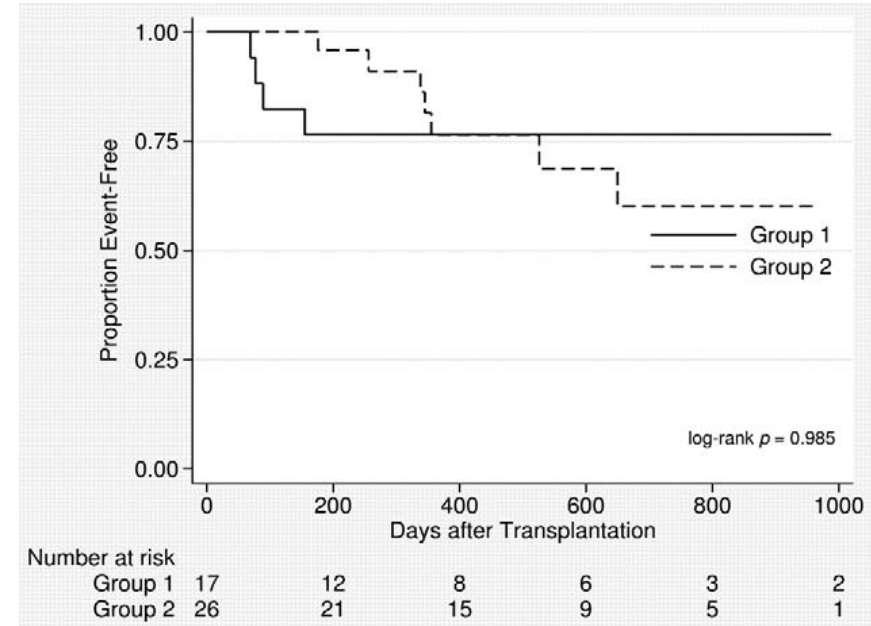
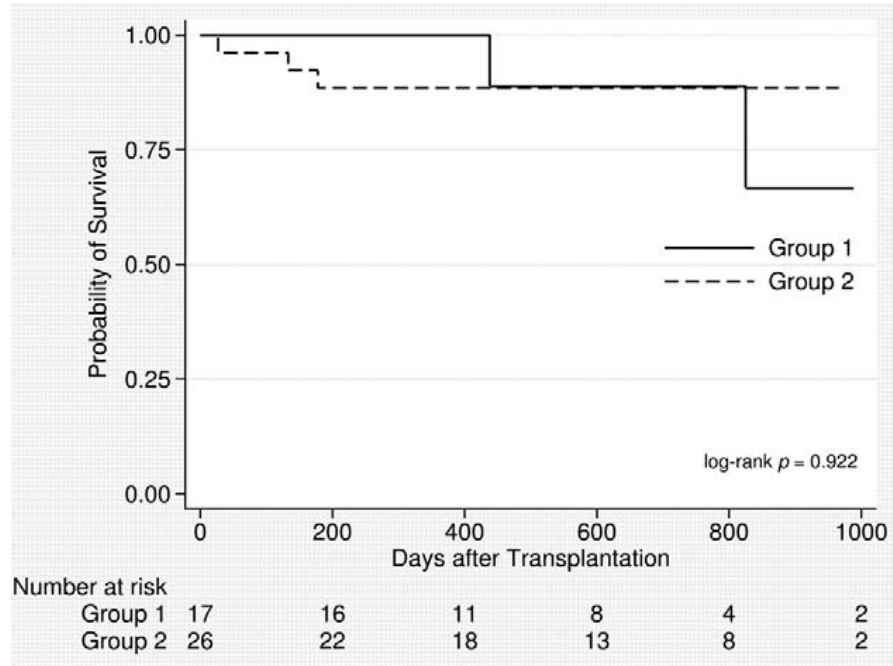
Bajo. 2-3

Medio 3-4

Alto 5-6



# Estudio piloto HAA : 17 vs 26 Cirrosis alcohólica con >6 meses de abstinencia



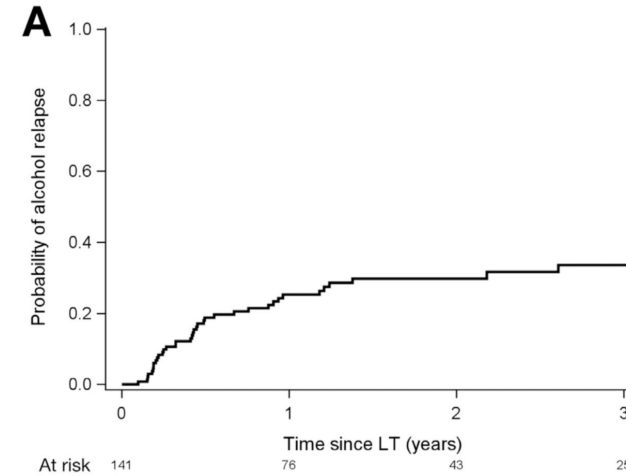
	N	HPSS score – median (min-max)	P	High Risk HRAR – n (%) <sup>†</sup>
No Alcohol Relapse	13	+3 (+1 to +8)*	–	3 (23)*
Alcohol Relapse, Now Sober (“Slip”)	2	+1.5 (+1 to +2)	0.09	0 (0)
Sustained Alcohol Relapse	2	–2.5 (–4 to –1)	0.03	0 (0)

Recaida grupo 1 : 23.5%

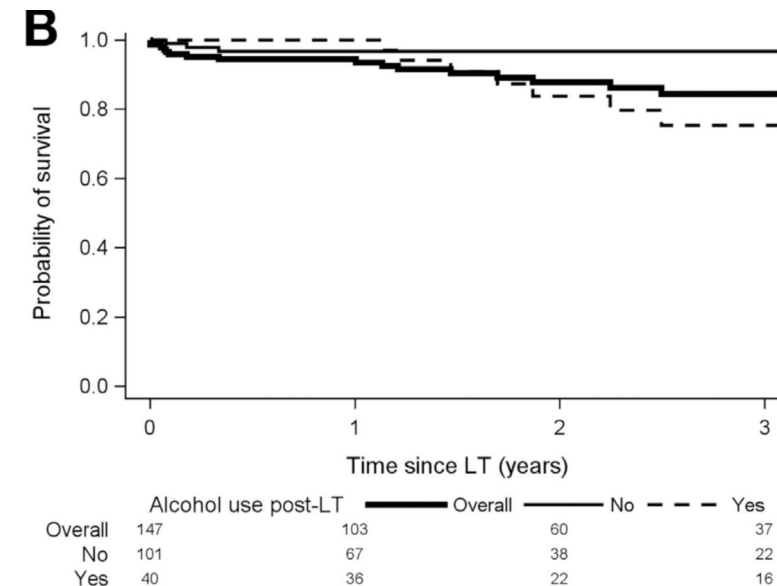
Recaida grupo 2: 29%

Median follow up: 1.5 years

## Probabilidad de recaída alcohólica postrasplante



## Supervivencia de acuerdo al consumo de alcohol



## American Consortium of Early Liver Transplantation for Alcoholic Hepatitis: ACCELERATE-AH

12 centers in 8 UNOS regions

Early Transplant  
= no specific sobriety  
period (n=147)

Mortality without  
transplant up to  
70% at 6 months

Survival

Sustained  
Alcohol Use  
After  
Transplant

### Post-Transplant Outcomes

1 Year

3 Year

94%

84%

10%

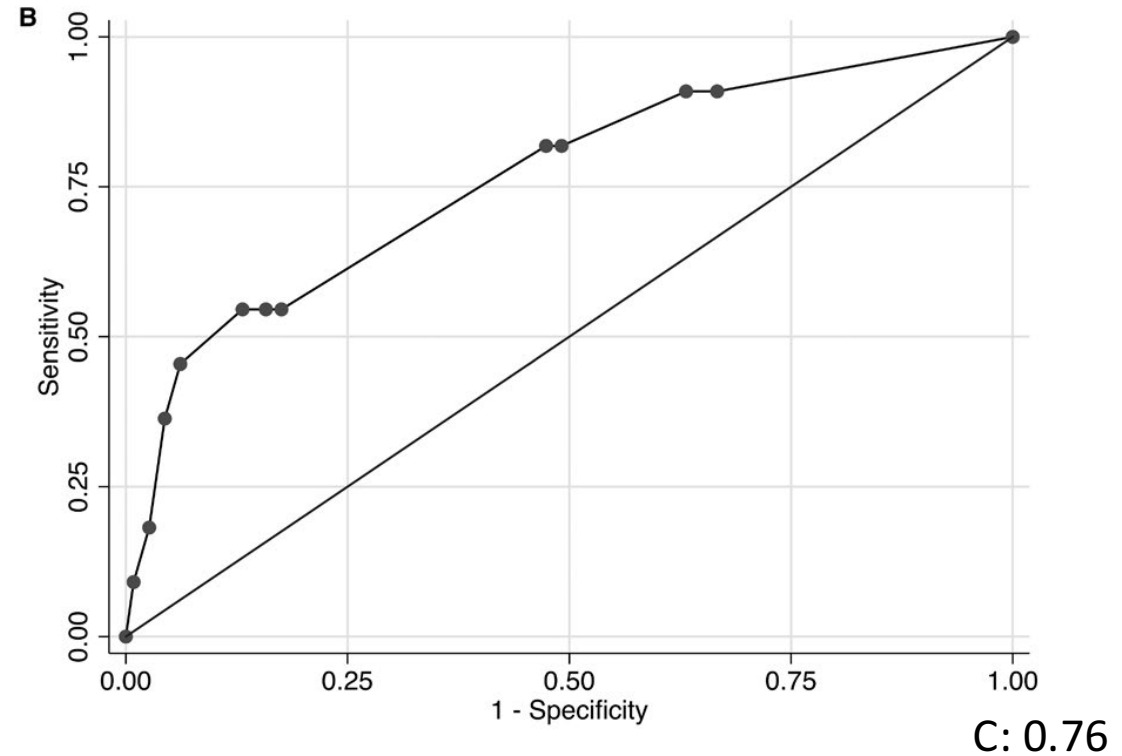
17%

Gastroenterology

Lee et al Gastroenterology, 2018

## Predicting Low Risk for Sustained Alcohol Use After Early Liver Transplant for Acute Alcoholic Hepatitis: The Sustained Alcohol Use Post-Liver Transplant Score

Brian P. Lee<sup>1</sup>, Eric Vittinghoff<sup>2</sup>, Christine Hsu<sup>3</sup>, Hyosun Han<sup>4</sup>, George Therapondos<sup>5</sup>, Oren K. Fix<sup>6</sup>, David W. Victor<sup>7</sup>, Deepti Dronamraju<sup>8</sup>, Gene Y. Im<sup>9</sup>, Michael D. Voigt<sup>10</sup>, John P. Rice<sup>11</sup>, Michael R. Lucey<sup>11</sup>, Sheila Eswaran<sup>12</sup>, Po-Hung Chen<sup>13</sup>, Zhiping Li<sup>13</sup>, Haripriya Maddur<sup>14</sup> and Norah A. Terrault<sup>1</sup>

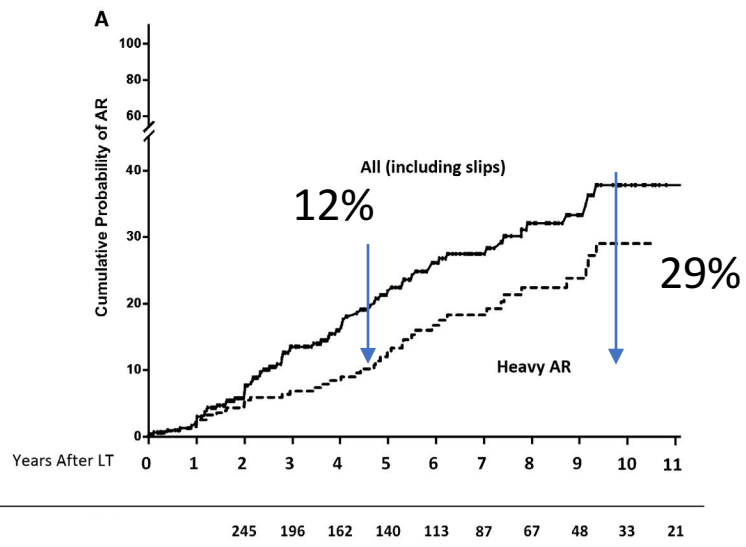


### Variable

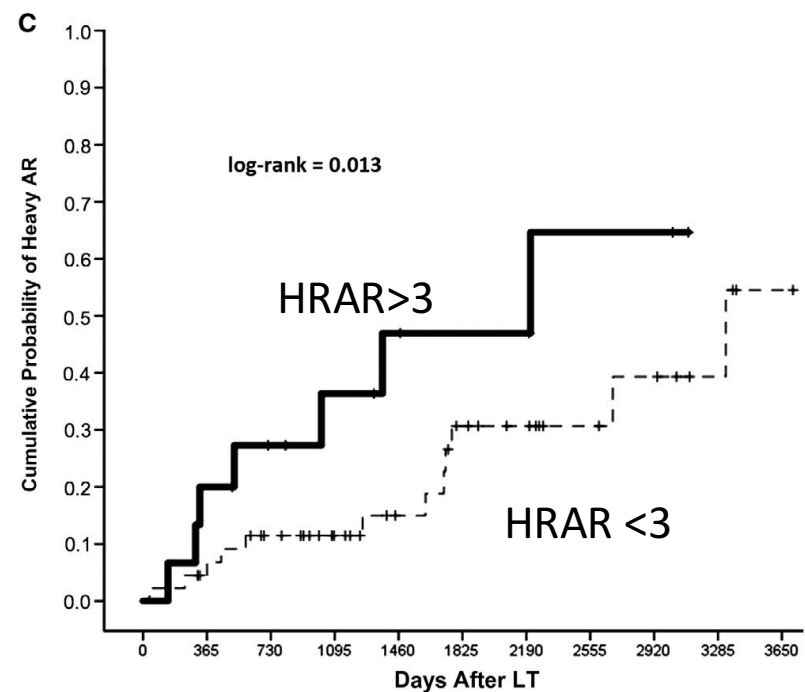
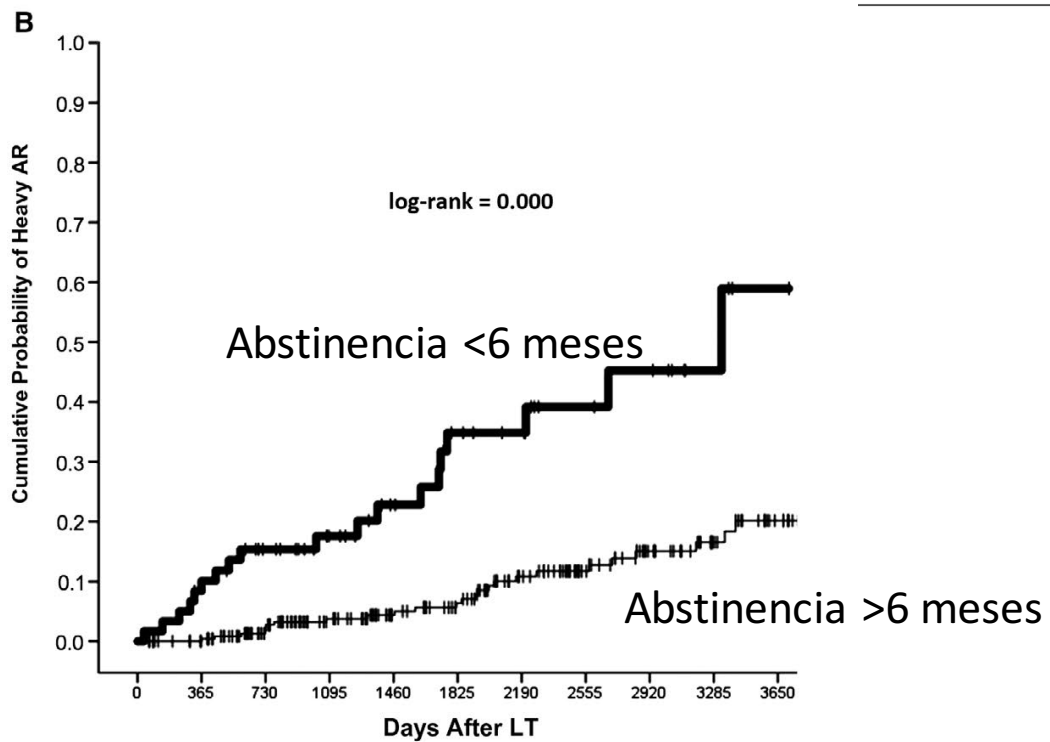
### Points

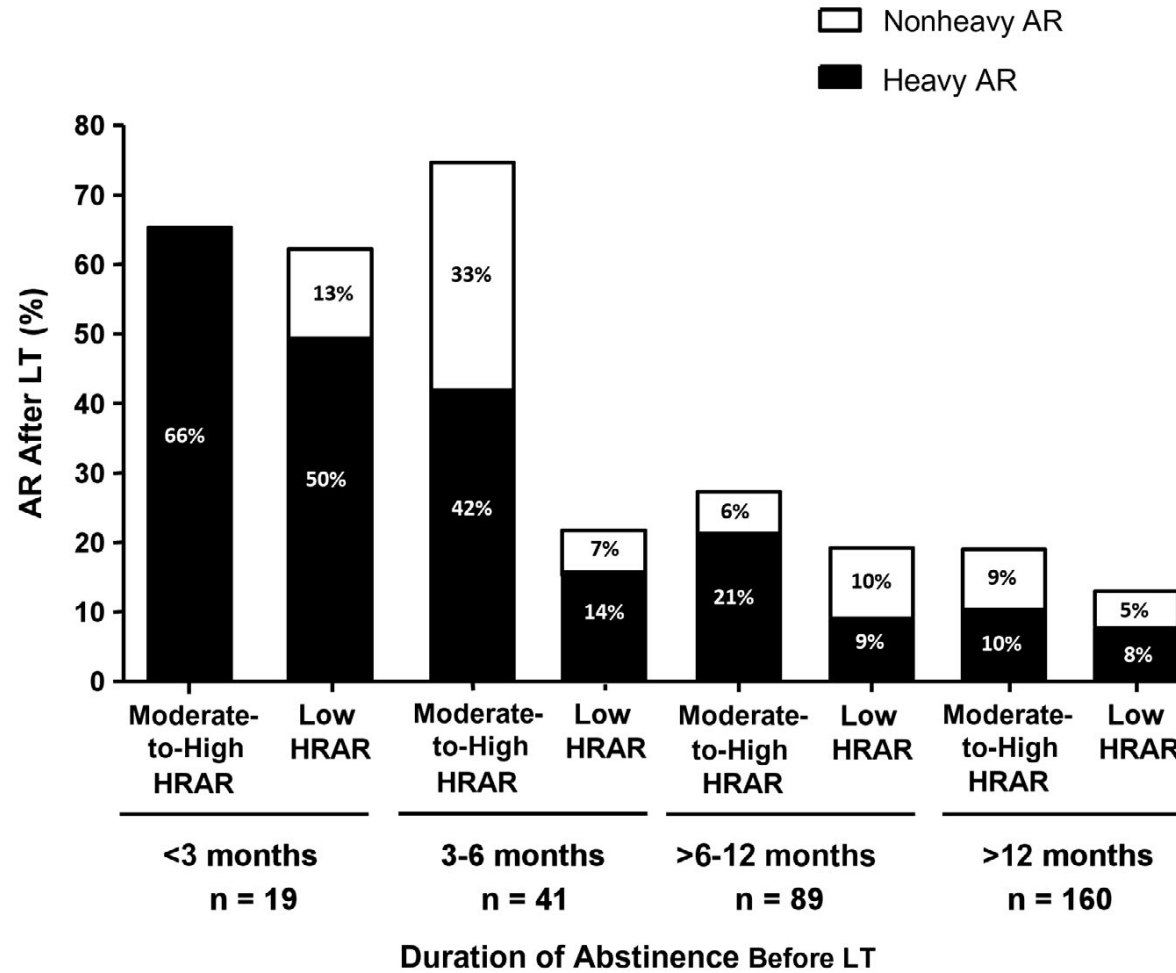
>10 drinks/day at presentation	+4
≥2 prior failed rehabilitation attempts	+4
Any history of prior alcohol-related legal issues	+2
History of non-THC illicit substance abuse	+1

**Score >11 PPV 50% NPV: 92%**



Población de estudio: Tx ALD  
excluidas HAA con diferentes tiempo  
de abstinencia n:309. Periodo 2004-2016





# Recurrence prediction. Other factors

**Superimposed alcoholic hepatitis in the explanted liver does not predict recurrence.**

**The impact of acute alcoholic hepatitis in the explanted recipient liver on outcome after liver transplantation.**

[Wells JT](#), Liver transpl 2007

**Influence of superimposed alcoholic hepatitis on the outcome of liver transplantation for end-stage alcoholic liver disease.**

[Tomé S](#) J Hepatol 2002

**Psychosocial assessment is the best indicator for predicting the recurrence of alcohol use after liver transplantation**

# Modelos de predicción de recaída alcohólica

- HRAR : High Risk Alcohol Relapse
- HPRS: Hopkins Psychosocial Relapse Scale
- SALT : Sustained alcohol use post liver transplantation
- University of Michigan Alcoholism Prognosis score
- ARRA: Alcohol Relapse Risk Assessment
- SIPAT : Stanford Integrated Psychosocial Assessment for Transplantation



Estudios prospectivos

Cohortes de Validación



Muchas gracias