Alcoholism and Alcohol-Induced Liver Disease. A Modern Society Problem

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Alcoholism and related disorders are a major public health problem and most of the time they present difficult therapeutic challenges to the Healthcare System. Alcoholism is a chronic, evolving and potentially fatal medical condition that may cause several severe physical, psychiatric and social problems or complications [1].

Alcohol consumption is thought to have a causal relationship with almost 60 types of disorders and body injuries. It has been estimated that alcohol may cause 20-30% of esophageal and liver cancer cases, liver cirrhosis cases, murders, epileptic seizures and traffic accidents worldwide [1,2].

Drunkenness (intoxication) from alcohol may lead to poisoning or even death. Chronic alcohol abuse may lead to addiction or a variety of physical and mental disorders. In cases of chronic alcoholism, several neurological disorders may emerge (trembling, polyneuritis, mental confusion, hallucinations, delirium tremens), as well as liver disorders (cirrhosis), and cardiovascular problems (arteriosclerosis), while behavioral disorders may also emerge the most common being unstable emotional state, limited willingness and clear thinking and a general feeling of exhaustion [3]. Apart from all of the above, one should also take into account other negative situations generally linked to malnutrition, since chronic alcohol users may not have a balanced diet, not to mention that ethanol may affect the absorption of lipids, vitamins and carbohydrates. Ethanol consumption during pregnancy may lead to a serious complication known as the fetal alcohol syndrome [4].

According to recent WHO data, alcohol-related mortality has reached 2.5 million deaths, while in Europe alone alcohol is the second most significant behavioral risk factor. Traffic accidents caused mainly by alcohol abuse, make up almost 41% of car accident-related deaths in Europe [5].

In Europe, about 58 million people over-consume alcohol while almost half of them (23 million people) are considered to be addicted to alcohol. The same study concluded that every year 90/100 000 men and 60/100 000 women will die because of alcohol abuse [6].

Regarding alcohol abuse in young people, there are some alarming facts. It seems that 13% of young Europeans (aged 15 - 16) have experienced intoxication by alcohol at least 2 - 3 times in their lives [1,3,7].

The financial burden on the health systems results mainly from the hospitalization and treatment of the patients that usually carries a cost reaching 15% of per capita income, while the pharmaceutical cost is considerably lower; reaching 0.000005%-0.0002% of a country’s GDP [8].

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Alcohol-induced Liver Disease (ALD) is a group of clinical, laboratory and morphological liver disorders that may occur after many years of alcohol consumption, and account for 48% of cirrhosis-related deaths, while 15% - 20% of people who over-consume alcohol may develop cirrhosis at some point [9]. It seems that economic development can lead to increased alcohol consumption as studies from China and India have shown [10,11], consequently ALD-induced mortality is on the rise in both developed and developing nations [12]. The average age of ALD diagnosis is 45 - 55 years with no differences between the USA and Europe, but it is diagnosed in younger ages in countries such as China [13-15].

Prior to any interventions it is important that the alcohol-depended person –as well as their family- fully realize and acknowledge their situation and actively seek professional help.

The treatment of alcoholism requires an interdisciplinary approach that includes pharmaceutical treatment, psychological support and at the same time social and political activation. The main goals of psychotherapy are abstinence from alcohol, commitment to therapy, relapse prevention and improvement of the patient's mental and social situation. Public institutions and policies should encourage and empower patients to avoid consuming alcohol, and turn to better eating habits and abuse prevention. Therapeutic communities, group counseling and mutual help groups may contribute greatly to a person’s rehabilitation efforts with scientifically sound methods.

Modern health systems have to cope with this global problem by creating the appropriate rehabilitation settings and by launching education campaigns aiming at decreasing alcohol-related mortality and morbidity and at offering alcohol-dependent people a better quality of life.

Bibliography


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