



We are pleased to share with you a report from the Wessex AHSN 'Treatment of Alcohol Related Liver Disease (ARLD) by Acute Trusts in Wessex'. This comprehensive report has been updated and includes acute admission data for patients with liver disease from all nine Trusts across Wessex. The data we have analysed contains information on all liver disease admissions between January 2011 and December 2015. The information comprises 26,900 admission episodes with over 350 data fields for each admission. There is also a specific report for each Trust detailing the analysis of your local data. Further evaluation of this data will be carried out and shared later this year.

We hope that by sharing this data intelligence with you that we will stimulate discussion and catalyze action in this area to drive evidence-based decision making, enabling development of services, reduce service use and improve outcomes for patients.

Key findings from this report show:

- In 2015, across Wessex an average of 38% of Liver Disease admissions were for alcohol-specific conditions, this increased to 46% at one Acute Trust;
- ARLD patients are on average 10 years younger than other Liver Disease patients and more likely to be male;
- The probability of death for an ARLD diagnosed patient after 3 years is 47%, compared with 28% for a non-ARLD patient\*;
- ARLD patients have a greater number of admissions and longer lengths of stay than other Liver Disease patients;
- The estimated annual cost of treatment for all Alcohol Related Liver Disease (ARLD) patients across the 9 Wessex Acute Trusts is **£25.3m**.
- It is estimated that improving patient management in Acute Trust settings could save *at least* £12.9m-£17.2m per year\*\* across the 9 Acute Trusts.

\* Figures based on Trust recorded data only, hence probability of death may be under-reported here \*\*Range determined by ARLD diagnosis either 1 or 2 years earlier.

In addition to this report, the Reducing Harm from Alcohol Programme has also supported completion of an audit across Wessex looking at the identification and treatment of harmful drinkers by acute Trusts – final submissions of data is expected by September with results of the analysis planned to be released early 2018. Novel approaches for achieving the new CQUIN for the completion of AUDIT C (identification of harmful drinkers), and the subsequent treatment of those at risk, are also being piloted.

As this programme draws to its conclusion in March 2018, plans are being developed to ensure that work to identify and treat patients with ARLD earlier across Wessex is continued.

Please contact [alcohol@wessexahsn.net](mailto:alcohol@wessexahsn.net) with any queries.

Kind Regards

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