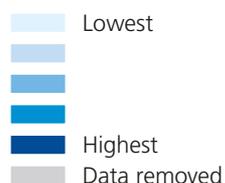


PROBLEMS OF THE GASTRO-INTESTINAL SYSTEM

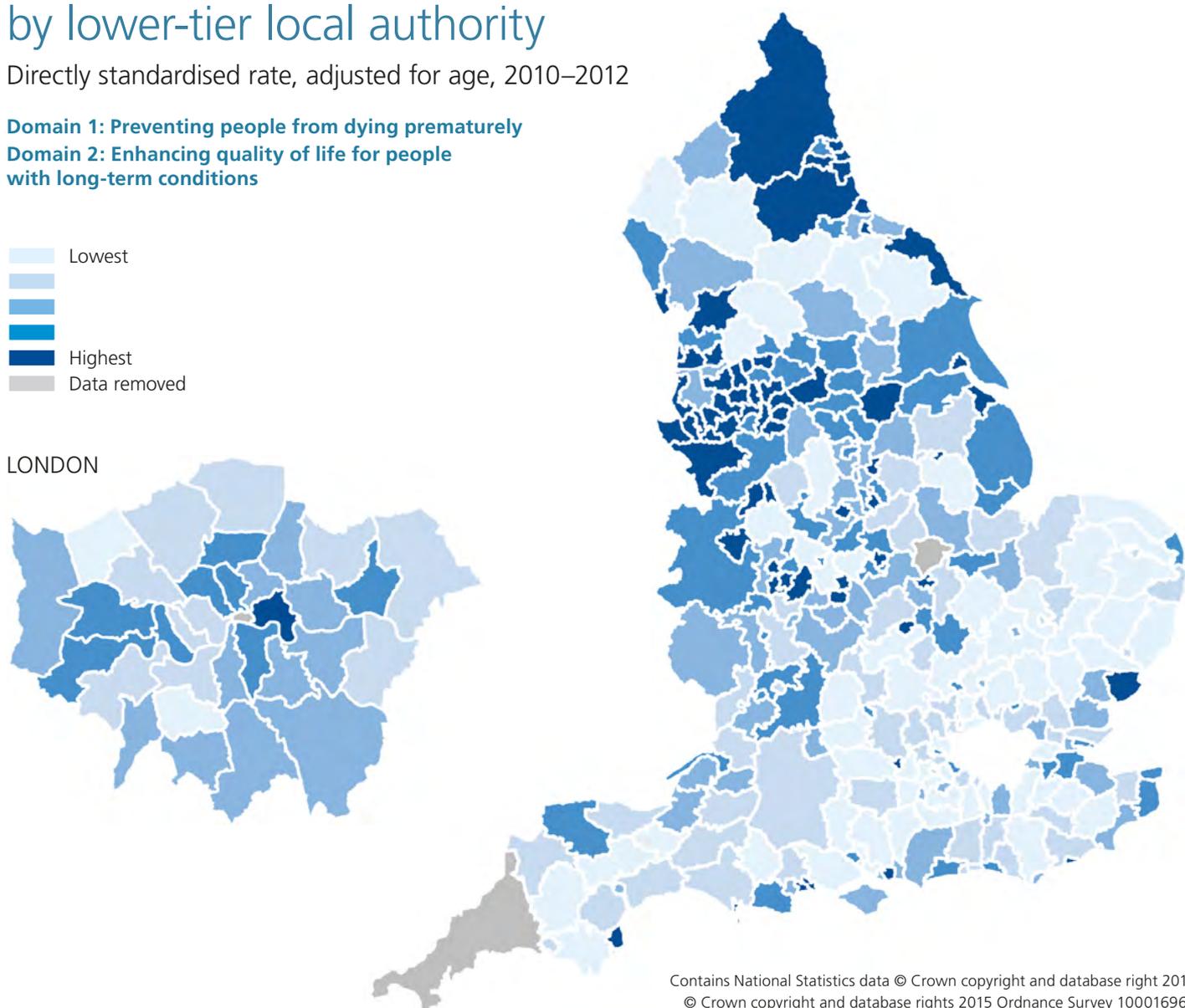
Map 16: Rate of years of life lost (YLLs) in people aged under 75 years due to mortality from chronic liver disease including cirrhosis per population by lower-tier local authority

Directly standardised rate, adjusted for age, 2010–2012

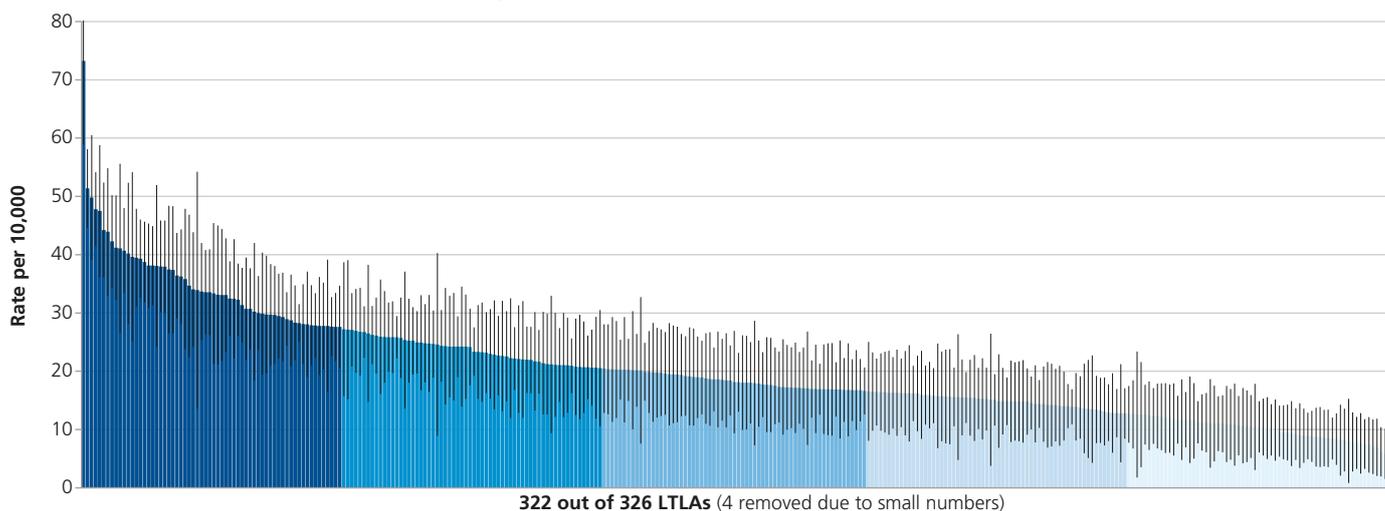
Domain 1: Preventing people from dying prematurely
Domain 2: Enhancing quality of life for people with long-term conditions



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Context

Premature death from chronic liver disease has been rising in recent years, and chronic liver disease is now the fifth largest cause of death. Between 1993 and 2010, the directly age-standardised mortality rate in England increased by 88%.¹ Local Alcohol Profiles for England indicate that chronic liver disease is the leading cause of months of life lost for women under the age of 75 years.² The rate of years of life lost (YLL) from chronic liver disease is higher than that for stroke, land transport incidents and colorectal cancer (see Figure 16.1, page 258).

Chronic liver disease is largely preventable. The major contributing causes of liver disease are:

- alcohol – more people are being diagnosed with alcohol-related liver disease, and at a younger age, due to increasing consumption and the decreasing cost of alcohol;
- hepatitis C due to injecting drug use, and the transfusion of contaminated blood products prior to 1990, as well as being seen in many people born outside the UK; a substantial proportion of people with hepatitis C remain undiagnosed; among those known to have hepatitis C, treatment rates are low;
- chronic hepatitis B, usually acquired at birth or in early childhood, and occurring predominantly in people who now reside in England but were born in other countries where prevalence is higher; a small proportion of adults who acquire acute hepatitis B through sexual transmission or injecting drug use may also develop liver disease;
- obesity and diabetes – people with diabetes or who are obese are susceptible to many health problems, but 5–10% will develop cirrhosis of the liver, and as obesity and diabetes increase the number of people with cirrhosis will increase; England has high rates of obesity and diabetes when compared with many other countries.

People with liver disease die at a younger age than people dying from other diseases, such as cancer, cardiovascular disease or respiratory disease.

Magnitude of variation

For lower-tier local authorities (LTLAs) in England, the rate of YLLs in people aged under 75 years due to mortality from chronic liver disease including cirrhosis ranged from 3.6 to 73.3 per 10,000 population (20.2-fold variation).³ When the ten LTLAs with the highest rates and the ten LTLAs with the lowest rates are excluded, the range is 8.1–40.7 per 10,000 population, and the variation is 5.1-fold.⁴

Potential reasons for the degree of variation observed include differences in:

- incidence of diabetes, obesity, hepatitis B, and hepatitis C;
- level of alcohol consumption;
- extent and effectiveness of preventative measures;
- service configuration;
- timing of diagnosis;
- degree of adherence to guidance;
- level of compliance with prevention or treatment.

1 Health and Social Care Information Centre. Mortality Data and Indicators for Chronic Liver Disease. <https://indicators.ic.nhs.uk/webview/> From the index, click 'Illness or condition', 'Digestive disease and disorders', 'Chronic liver disease' to see Liver Disease indicators.

2 Public Health England. Local Alcohol Profiles for England. <http://fingertips.phe.org.uk/profile/local-alcohol-profiles>

3 Data from four LTLAs have been removed due to small numbers.

4 For 2008–2010 data by PCT, see Liver Disease Atlas, Map 2, pages 48–49.

5 <http://www.makeeverycontactcount.co.uk/>

Options for action

Commissioners and service providers need to review the rates of YLLs from chronic liver disease in people aged under 75 years in the local population, and:

- review prevailing strategies for preventing and treating chronic liver disease;
- consider the reconfiguration of services both for advanced liver disease and for the community identification and care of liver disease.

In localities where liver disease has become concentrated, secondary care providers need to play a role in the community to help reduce the burden of admission.

Commissioners need to specify that:

- primary care providers improve the early identification of liver disease, and intervene early;
- primary and secondary care providers collaborate to ensure patients gain access to appropriate expertise and disease management.

All service providers need:

- to promote healthy lifestyles (Making Every Contact Count⁵), and inform the public about the causes of liver damage, and the harmful effects of excess alcohol consumption and of obesity;
- to have a low threshold for undertaking liver function and hepatitis tests, and policies in place to take action on the results;
- improve self-management through education about prevention and compliance with treatment, using digital and multimedia resources;
- to raise awareness of liver disease among healthcare professionals, and develop skills in the identification and management of liver disease, and the excess use of alcohol.

RESOURCES

- NICE pathways. Liver conditions overview. <http://pathways.nice.org.uk/pathways/liver-conditions>
- NICE. Alcohol-use disorders: Diagnosis and clinical management of alcohol-related physical complications. NICE guidelines [CG100]. June 2010. Alcohol-related liver disease. <https://www.nice.org.uk/guidance/cg100/ifp/chapter/alcohol-related-liver-disease>
- Public Health England. Local Alcohol Profiles for England. <http://fingertips.phe.org.uk/profile/local-alcohol-profiles>
- Public Health England. Liver Disease Profiles. <http://fingertips.phe.org.uk/profile/liver-disease>
- Association of Public Health Observatories. Indications of Public Health in the English Regions 8: Alcohol. August 2007. <http://www.apho.org.uk/resource/item.aspx?RID=39304>
- Health and Social Care Information Centre. Mortality Data and Indicators for Chronic Liver Disease. <https://indicators.ic.nhs.uk/webview/> From the index, click 'Illness or condition', 'Digestive disease and disorders', 'Chronic liver disease' to see Liver Disease indicators.
- Public Health England. Obesity website. <http://www.noo.org.uk>

Additional visualisations

Figure 16.1: Rate of years of life lost (directly standardised) in people aged under 75 years for major causes of death per 10,000 population in England 2008–2010 (source: HSCIC)

