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Summary

MetALD: A new entity in liver disease

Angelo Armandi

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Hepatobiliary | Paediatrics

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The speaker presented MetALD as a newly recognized dual-etiology liver disease combining cardiometabolic risk factors with significant alcohol intake below thresholds for alcohol-related liver disease, reporting an estimated 2-4% general population prevalence and increased risks for fibrosis progression and mortality.

KEY POINTS

- The speaker reported that MetALD showed a dose-dependent increase in significant fibrosis prevalence, ranging from 2.2% in patients with low alcohol intake and few metabolic factors to 28.76% in those with maximum metabolic risk factors and higher alcohol consumption
- A Swedish study the speaker cited found that among 15,000 patients initially diagnosed with metabolic steatotic liver disease, approximately 17% developed additional alcohol-related diagnoses within 5 years, with sixfold increased risk for major adverse liver outcomes if alcohol disorder was diagnosed after the metabolic condition
- The speaker stated that US transplant registry data from 2002-2022 showed nearly threefold increases in both MetALD transplant registrations and completed transplants, with MetALD patients experiencing higher waitlist mortality and graft failure than alcohol-related liver disease patients
- Evidence the speaker presented suggested any alcohol intake above 10 grams daily was associated with increased advanced liver disease incidence in patients with metabolic dysfunction
- The speaker recommended that antifibrotic agents should be explicitly considered as therapeutic targets for MetALD and advocated for biomarkers such as phosphatidyl ethanol to improve alcohol intake assessment beyond patient self-reporting

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