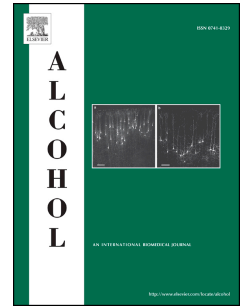


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Mortality and Costs Associated with Alcoholic Hepatitis: A Claims Analysis of a Commercially Insured Population

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Fig**Mortality and Costs Associated with Alcoholic Hepatitis: A Claims Analysis of a Commercially Insured Population**Julie A. Thompson⁽¹⁾Noel Martinson⁽²⁾Melissa Martinson⁽³⁾⁽¹⁾Division of Gastroenterology & Hepatology, University of Minnesota, Minneapolis MN⁽²⁾ Acclaim Data Analytics, Minneapolis MN⁽³⁾ Technomics Research, Minneapolis MN

Abstract

Rising mortality in the United States due to alcoholic liver disease (ALD) and the dearth of effective treatments for ALD have led to increased research in this area, particularly in alcoholic hepatitis. To understand the burden of illness and potential economic value of effective treatments, we conducted a healthcare claims analysis of over 15,000 commercially insured adults who were hospitalized with alcoholic hepatitis (AH) between 2006 and 2013 and followed for up to 5 years. Their average age was 54 years and 68% were male. Over 5 years, about two-thirds of these adults died (44% in the first year), and fewer than 500 received liver transplants. There were nearly 40,000 re-hospitalizations, with over 50% of the survivors re-hospitalized within a year and nearly 75% through the second year. The total costs were nearly \$145,000 per patient, with costs decreasing over time from over \$50,000 in the first year (including the index hospitalization) to about \$10,000 per year in the later years. Total costs for the cohort over 5 years were \$2.2 billion. Patients who received a liver transplant averaged about \$300,000 in transplanted-related costs and over \$1,000,000 in total healthcare costs over 5 years. Average costs in years following the index hospitalization were similar to diabetes. AH has a high mortality and is a high cost condition.

Introduction

Rising mortality among middle- and working-class whites in the United States has garnered a great deal of attention recently. This increase was largely due to increasing death rates from drug and alcohol poisonings, suicide, chronic liver diseases and cirrhosis.^{1,2} Other reports have shown increasing rates of hospitalizations and emergency department use due to alcohol-related conditions.³ Not surprisingly, health care expenditures for alcohol-related diagnoses are increasing. Costs associated with alcohol disorders are reported to account for more than 1% of the gross national product in high- and middle-income countries.⁴ Prevalence of alcohol abuse/dependence is not completely known but is estimated to affect around 8% of adult Americans.⁵

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