

Exploring Alcohol Use Disorder and Alcohol-Associated Liver Disease



Alcohol-associated liver disease (ALD) is one of the most common causes of liver-related morbidity and death globally. Consuming alcohol elevates the risk of ALD development and progression; thus, the relationship between ALD and alcohol use disorder (AUD) is important for clinicians to understand. One of the feature articles in this month's issue of *Gastroenterology & Hepatology* highlights these two diseases. Dr Giovanni A. Roldan, Dr Christopher Tricarico, and Dr Robert S. Brown Jr provide a comprehensive overview of AUD and ALD. They review approaches for screening, establishing the diagnosis, appropriate use of imaging, as well as appropriate management. In particular, the authors examine the role of liver transplantation in ALD, including candidate assessment as well as transplant disparities.

Our other feature article this month explores the use of noninvasive tests (NITs) for the identification of patients who are at risk for metabolic dysfunction-associated steatohepatitis (MASH). As Dr Markos Kalligeros, Dr Pojsakorn Danpanichkul, and Dr Mazen Nouredin point out, although the gold standard for MASH diagnosis remains liver biopsy, this procedure has several disadvantages, necessitating the development and validation of NITs. The authors review numerous NITs, including imaging biomarkers such as proton density fat fraction, combinations of imaging and serum biomarkers such as the FAST (FibroScan–aspartate aminotransferase) score, and advanced serum biomarkers and composite scores such as the MASEF (metabolomics–advanced steatohepatitis fibrosis) score. The authors also discuss the potential role of artificial intelligence.

This issue also features a liver-related column. Our *Advances in Hepatology* column, which is authored by Dr Gideon M. Hirschfield, examines suboptimal response in primary biliary cholangitis (PBC) treatment. Topics of discussion include the evolution of treatment goals for PBC, assessment of response at 6 months vs 12

months, second-line treatment options, and the possibility of triple therapy.

Our *Advances in IBS* column highlights clinical practice guidance from the American Gastroenterological Association and American College of Gastroenterology for pharmacologic treatment of patients with chronic idiopathic constipation. Dr Lin Chang describes the aim and development of this joint guideline and offers an overview of the updated recommendations. Additionally, she explains the strength of the evidence for newer treatment options and the impact of the recommendations on gastroenterology practice. She also provides pointers on choosing between therapies for chronic idiopathic constipation, as well as other advice.

Our *Advances in IBD* column features an interview with Professor Geert D'Haens on performing surgery early on in patients who have ileal Crohn's disease. Among other issues, he discusses the current literature on outcomes associated with early surgery in this patient population, different surgical techniques, overall advantages and disadvantages of this treatment approach, and the general reception from the medical community.

Finally, our quarterly content partnership with the Crohn's & Colitis Foundation continues with a focus on mental health. Readers can scan the QR code on page 660 to access the first consensus statement on inflammatory bowel disease and mental health, which was recently developed by a panel of experts.

I hope that this issue provides valuable insights for your clinical practice.

Sincerely,

Gary R. Lichtenstein, MD, AGAF, FACP, FACG