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Evidence based inpatient assessment of alcohol relapse risk in patients undergoing liver transplant evaluation

Background

Psychiatry consultation and liaison services often are utilized by liver transplant teams for screening candidates for emergency liver transplant. A relapse in alcohol use after transplantation entails a worse prognosis (Yu et al., 2020) and therefore should be weighted along with other psychosocial factors in order to establish whether a patient would be an appropriate candidate for a liver transplant. Plenty of research has been done to try to determine how to assess a patient's risk of relapse, but the literature has discrepant findings (Ayyala-Somayajula et al., 2020; Chuncharunee et al., 2019). This presents a challenge to consult liaison psychiatrists who are faced with the task of assessing the risk of alcohol relapse. As medical students on a consult and liaison psychiatry service, we wanted to establish which factors associated with alcohol relapse were most consistent among the literature, in order to create a more standardized approach to assessing these patients and improve the quality and reliability of emergency pre-transplant evaluations.

Methods

PubMed was used to search for meta-analyses or systematic reviews published since 2008. Five papers total were identified and reviewed in this project. The risk factors mentioned in each paper were compared for commonality. The risk factors that were identified in two or more papers were included in our list for risk factors associated with alcohol relapse after liver transplant.

Results

Smoking and sobriety less than 6 months were the most common risk factors identified among the papers (4 out of 5). Following that, comorbid psychiatric illness and family history of alcohol or substance use disorder were identified in 3 out of 5 papers. Younger age, poor social or family support, and prior treatment or failed attempt at treatment (e.g. rehab, AA meetings, inpatient or outpatient programs) were acknowledged in 2 out of 5 papers. Based on these findings we produced a 7point checklist with the above mentioned factors to better inform the transplant board about the number of factors present in each patient that correlate with increased risk of relapse.

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Checklist

Risk factors for alcohol relapse post-transplant

Smoking Sobriety <6 months Comorbid psychiatric illness Family history of alcohol/substance use disorder Younger age Prior treatment

Conclusion

There is an obvious need for a more standardized approach in assessing the risk of alcohol relapse in a patient being considered for a liver transplant. In order to assess these patients in a more evidence-based manner, we reviewed several recent literature reviews and found that certain risk factors were more consistent with predicting alcohol relapse. A future study that tests a systemic approach and its clinical relevance would be needed to have a more meaningful impact on evaluating the risk of alcohol relapse and ultimately the prognosis of a liver transplant in these patients.

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