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Letter

Socioeconomic inequalities in the incidence of alcohol-related liver disease in the Latin American context

Juan Pablo Roblero^{1,*}, Luis Antonio Díaz², Juan Pablo Arab², Pablo Roblero³, Ramón Bataller⁴

¹ Sección Gastroenterología, Departamento de Medicina Interna, Hospital Clínico Universidad de Chile Escuela de Medicina Universidad de Chile, Santiago, Chile

² Departamento de Gastroenterología, Escuela de Medicina, Pontificia Universidad Católica de Chile, Santiago, Chile

³ Instituto de Sociología, Pontificia Universidad Católica de Chile, Santiago, Chile

⁴ Center for Liver Diseases, Division of Gastroenterology, Hepatology and Nutrition, University of Pittsburgh Medical Center, PA, USA

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We read with great interest the study by Askgaard and colleagues [1]. Alcohol-related organ damage results from the complex association between the degree of consumption, socioeconomic inequalities, comorbidities, and other unknown factors, mainly affecting vulnerable populations. This problem has been described in the United Kingdom and Nordic countries but may occur at a global scale. As members of the Special Interest Group on Alcohol-Associated Liver Disease (ALD) of the Latin-American Association for the Study of the Liver (ALEH), we would like to raise several important points.

Latin-America has great ethnic heterogeneity, high alcohol consumption, and lack of public health policies related to alcohol [2,3]. In fact, there are profound socioeconomic and healthcare access inequalities, where low-income countries of the region have higher mortality from ALD, despite reporting lower alcohol consumption [4]. Furthermore, inequality in access to healthcare is one of the most critical problems in the poorest countries of Latin-America [4].

For instance, Chile is a relatively high-income country, with a significant inequality issue, and among the highest alcohol consumption in Latin-America. In a nationwide study, the proportion of Chilean current drinkers with ALD was higher among people with low-income levels, despite having a lower prevalence of alcohol consumption [5]. Therefore, these data are consistent with the presence of the ALD harm-paradox in our region [4,5]. Finally, we propose that public health policies, such in Latin-America, should be designed considering regional and cultural aspects. Such policies represent an

essential tool for prevention, and timely treatment of ALD, especially in the most vulnerable populations.

Contributors

- Juan Pablo Roblero: conceptualization, writing, review, and editing.
- Luis Antonio Díaz: writing, review, and editing.
- Juan Pablo Arab: writing, review, and editing.
- Pablo Roblero: writing, review, and editing.
- Ramon Bataller: writing, review, and editing.

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Declarations of Interests

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References

- [1] Askgaard G, Fleming KM, Crooks C, et al. Socioeconomic inequalities in the incidence of alcohol-related liver disease: A nationwide Danish study. *The Lancet Regional Health - Europe* 2021;8:100172. doi: 10.1016/j.lanepe.2021.100172.

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* Corresponding author: Juan Pablo Roblero MD, Sección Gastroenterología, Departamento de Medicina Interna, Hospital Clínico Universidad de Chile Escuela de Medicina Universidad de Chile, Dirección: Dr. Carlos Lorca Tobar 999. Independencia. RM Chile. Código postal: 8380456

E-mail address: jproblero@gmail.com (J.P. Roblero).

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- [2] Arab JP, Roblero JP, Altamirano J, et al. Alcohol-related liver disease: Clinical practice guidelines by the Latin American Association for the Study of the Liver (ALEH). *Ann Hepatol* 2019;18:518–35. doi: [10.1016/j.aohep.2019.04.005](https://doi.org/10.1016/j.aohep.2019.04.005).
- [3] Díaz LA, Idalsoaga F, Fuentes-López E, et al. Impact of public health policies on alcohol-associated liver disease in Latin America: An ecological multi-national study. *Hepatology* 2021 published online June 16. doi: [10.1002/hep.32016](https://doi.org/10.1002/hep.32016).
- [4] Arab JP, Bataller R, Roblero JP. Are We Really Taking Care of Alcohol-Related Liver Disease in Latin America? *Clin Liver Dis* 2020;16:91–5. doi: [10.1002/cld.916](https://doi.org/10.1002/cld.916).
- [5] Roblero JP, Arab JP, Roblero P, et al. The Alcohol-Associated Liver Disease Paradox in Chile: An Assessment with data from the National Health Survey 2016-2017. *Journal of Hepatology* 2021:S323–4. doi: [10.1016/S0168-8278\(21\)01843-2](https://doi.org/10.1016/S0168-8278(21)01843-2).