

BASL Alcohol-related Liver Disease SIG

Hospital Episode attribution to ArLD

Steve Hood

What effective tools do we have?

- ArLD in patient burden under-estimated
- Hard to follow group, research challenge
- Clinical research Alc Hep control for relapse?
- Outcome liver disease independent AQA care bundles, effect of ACT integration
- Ideal clinical course v poor outcomes

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Coding of admissions



Presenting complaint 2/52 abdominal swelling & jaundice

Social History Up to 1 bottle vodka per day

Past History Admission for 'detox' 3/12 ago

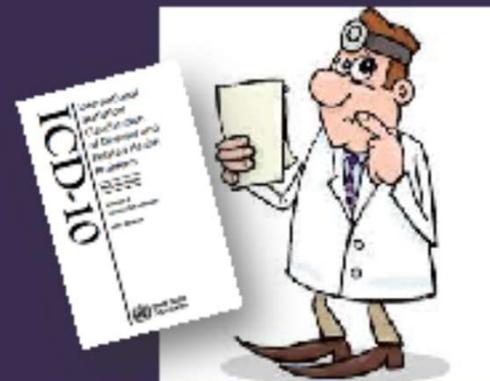
Examination
Jaundice ++
Mildly confused
Abdomen Swollen (moderate ascites)

What's the diagnosis?

Medical Notes



Discharge Coding



Coding of admissions

Presenting complaint 2/52 abdominal swelling & jaundice

Social History Up to 1 bottle vodka per day

Past History Admission for 'detox' 3/12 ago

Examination Jaundice ++
Mildly confused
Abdomen Swollen (moderate ascites)

Diagnosis Alcoholic Cirrhosis

K703 Alcoholic cirrhosis of liver

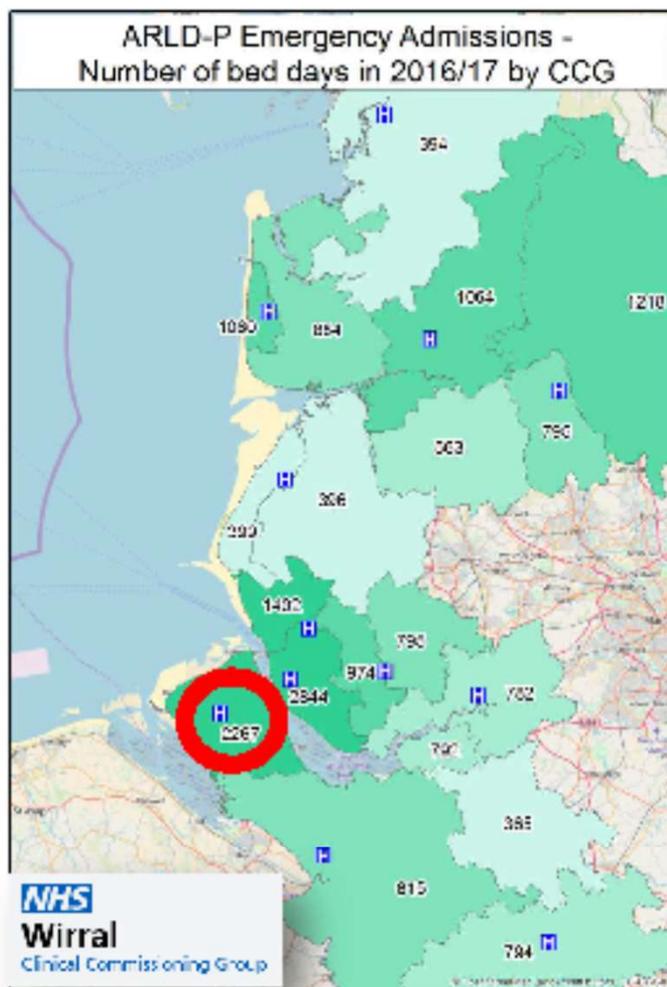
Diagnosis Ascites
Cirrhosis (alcohol-related)

R18X Ascites
K703 Alcoholic cirrhosis of liver

Diagnosis Chronic Liver Disease
Alcohol Dependence

K769 Liver disease unspecified
F102 Mental & Behav ... Alcohol

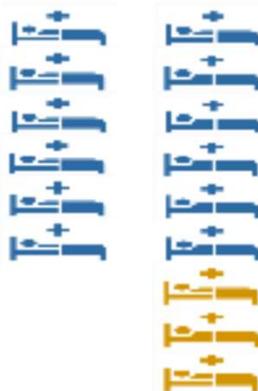
Standard approach: ARLD-Primary



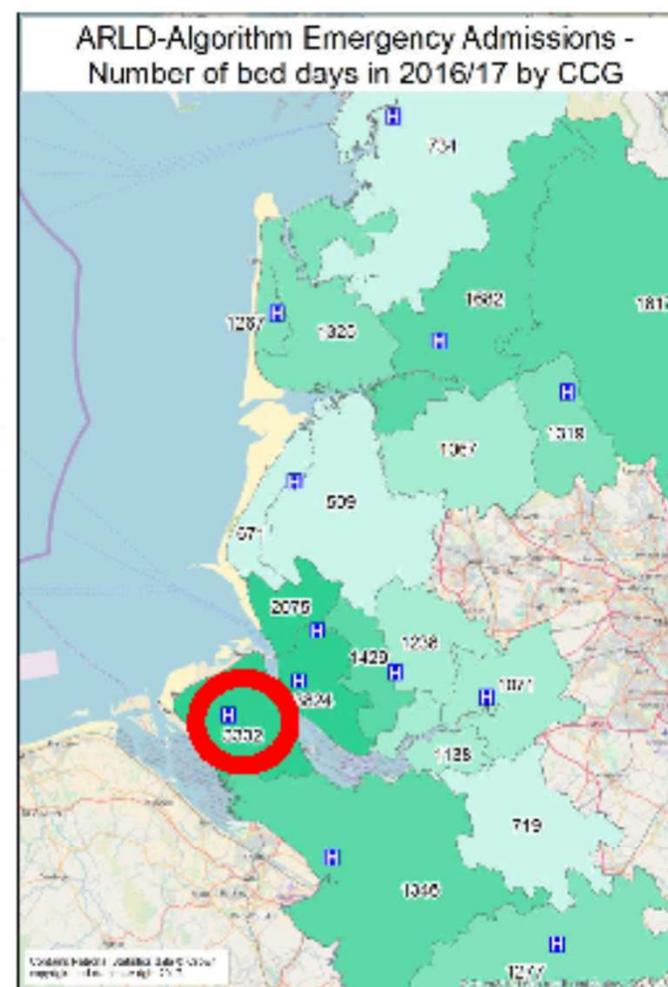
6 diagnostic codes



Liver Beds



Clinical approach: ARLD-Algorithm

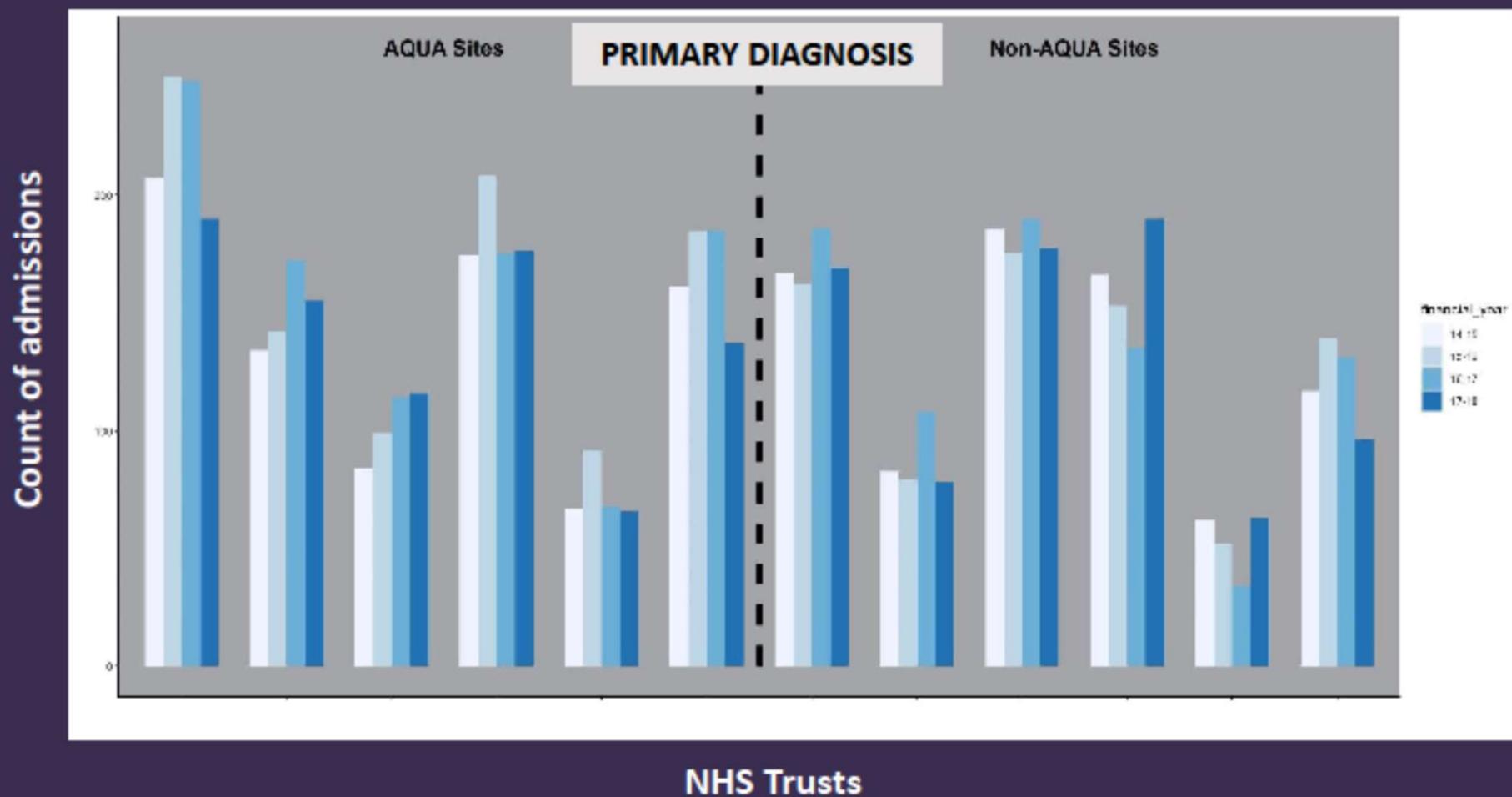


83 diagnostic codes

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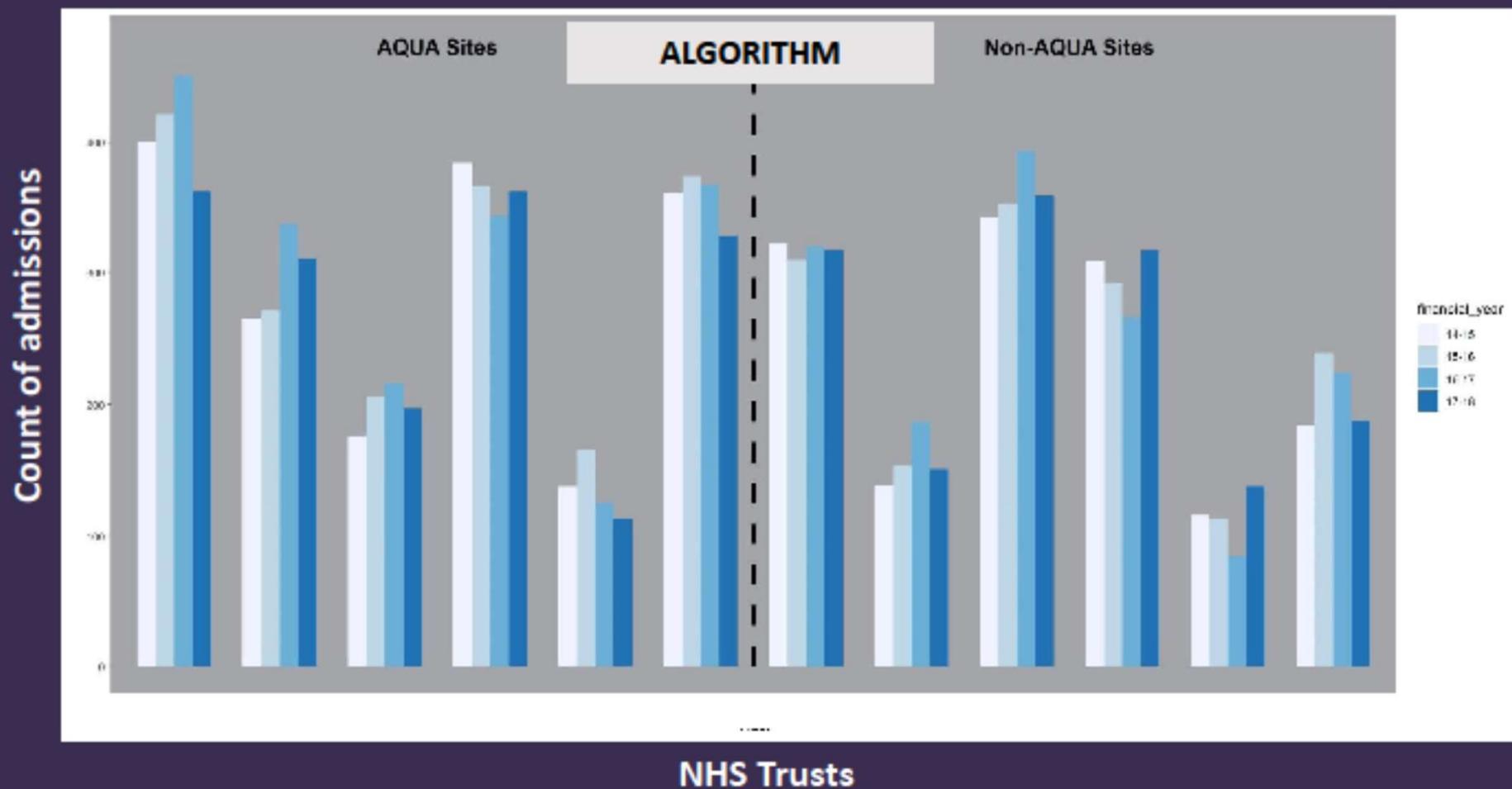
AQuA v Non-AQuA: Workload By Trust



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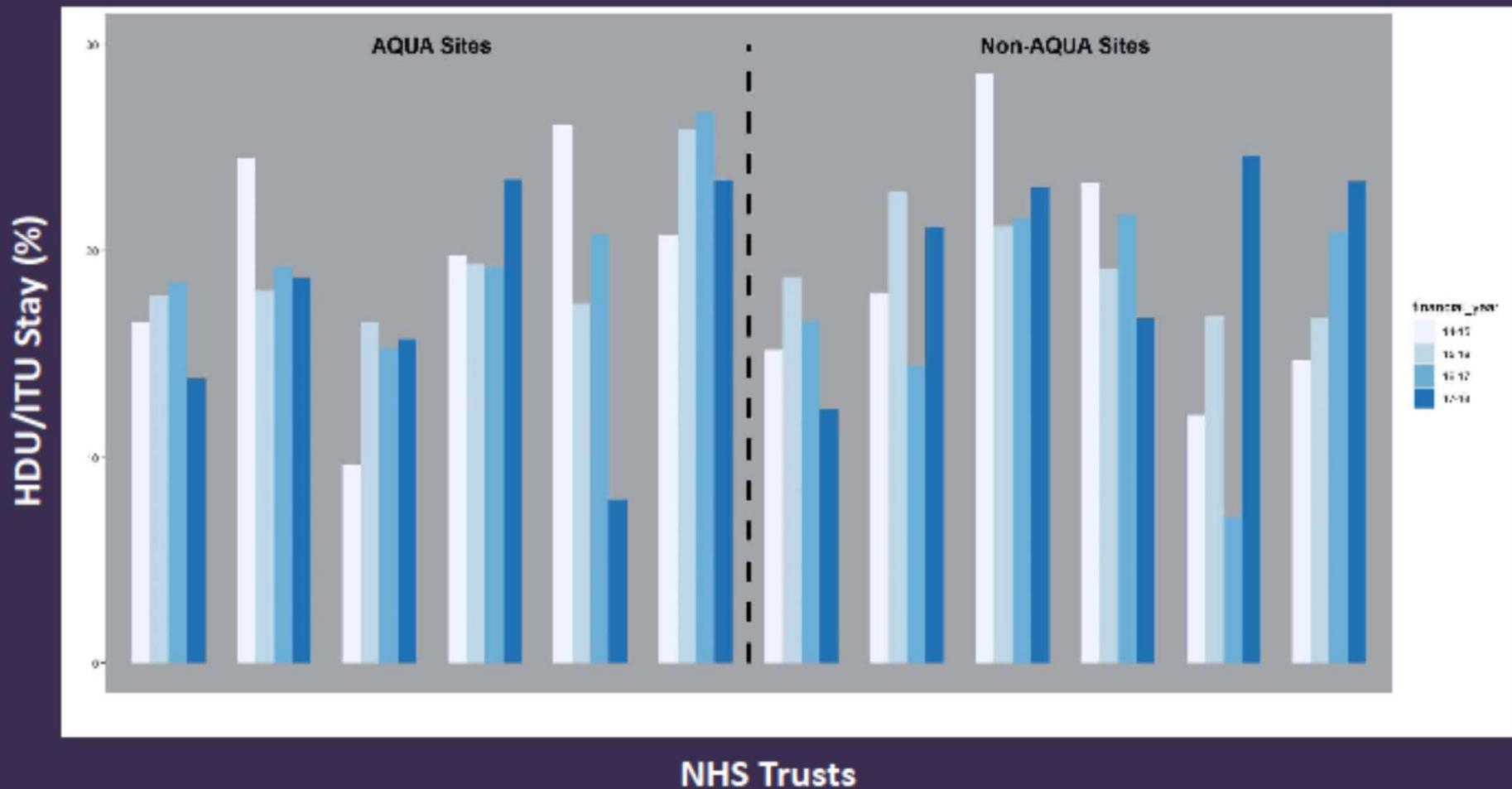
AQuA v Non-AQuA: Workload By Trust



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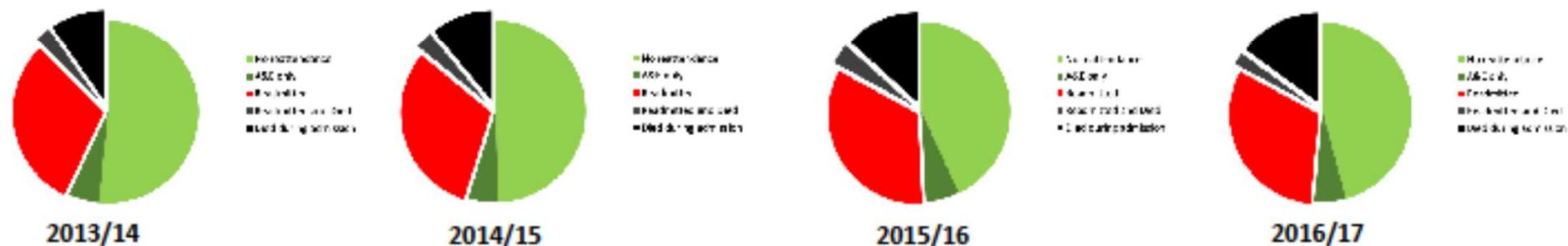


AQuA v Non-AQuA: HDU/ITU Stay (%) By Trust

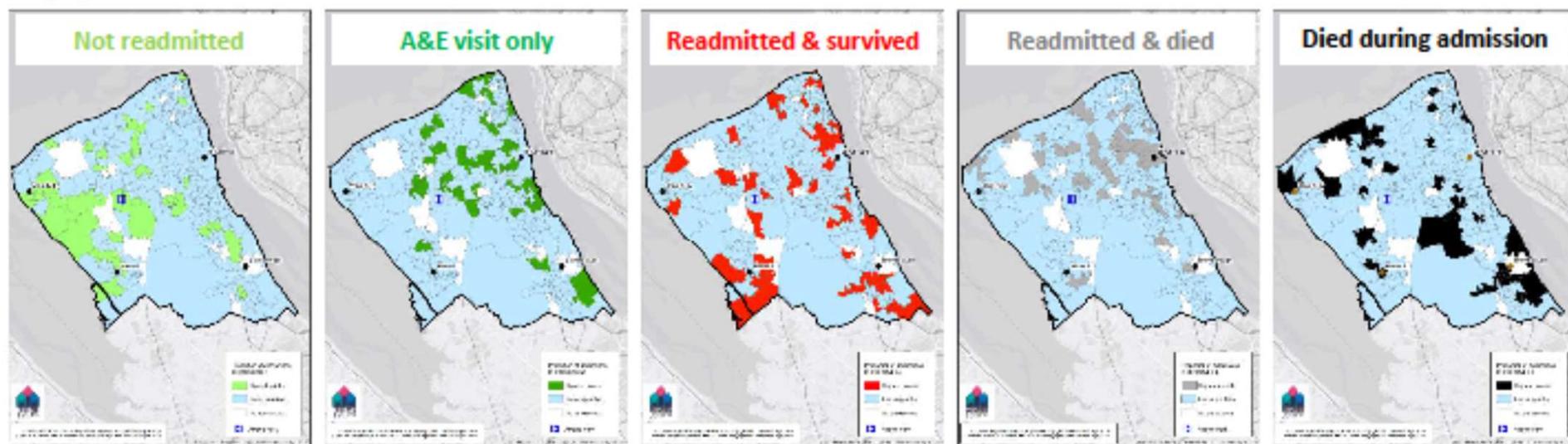


Tracking Journeys: Unplanned Care (30 days)

Over time



By place of residence

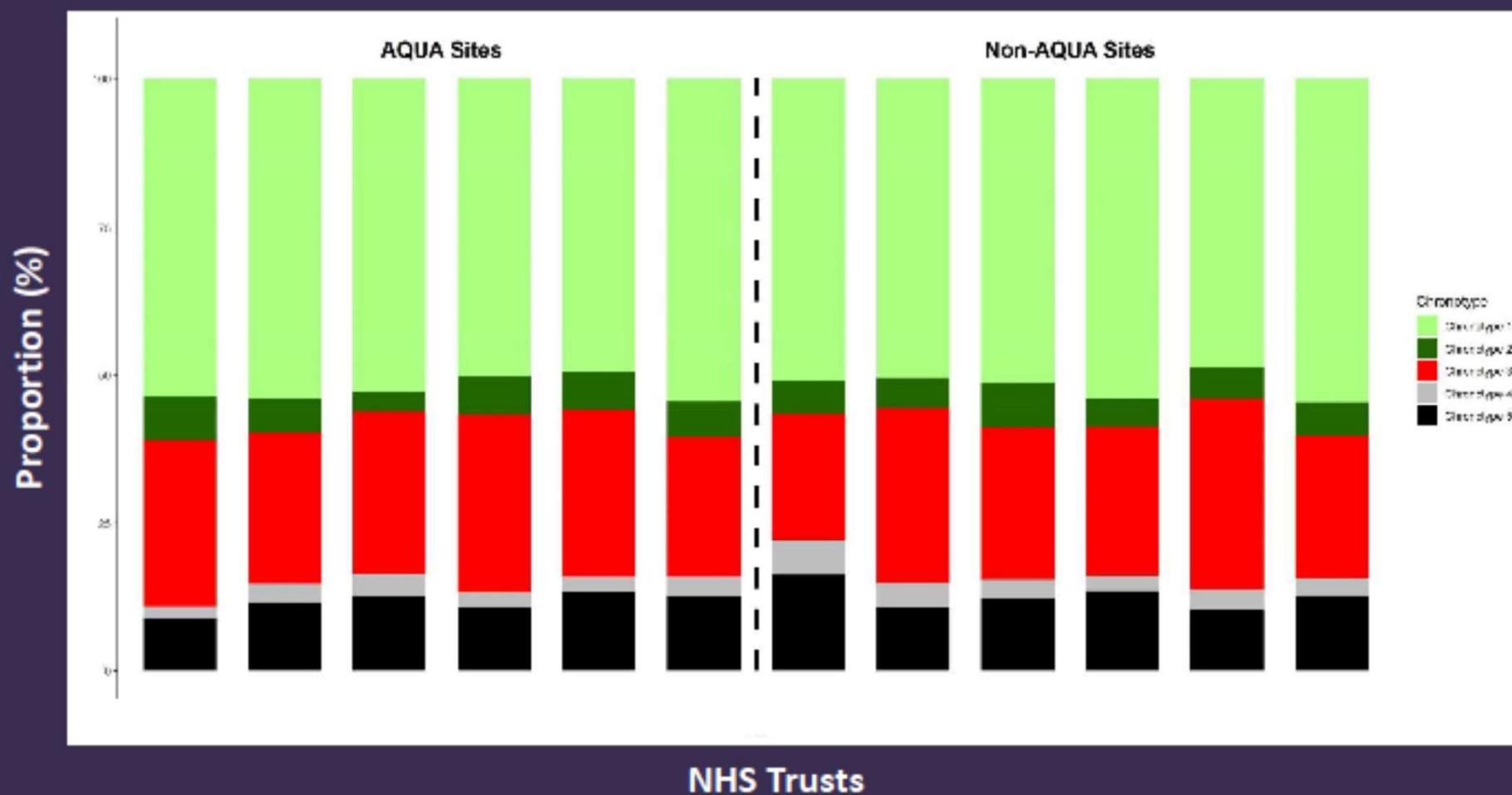


Highest quintile for each metric are highlighted

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AQuA v Non-AQuA: Unplanned Care (30 days)





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Institutional Variation In Outcome

Associations between provider and in-hospital mortality

Treatment Provider	Odds Ratio (95% CI)	P-value
1	Ref.	Ref.
2	1.11 (0.74 – 1.66)	0.617
3	1.52 (1.08 – 2.14)	0.015
4	1.31 (0.99 – 1.74)	0.061
5	1.30 (0.96 – 1.77)	0.090
6	1.62 (1.18 – 2.23)	0.003
7	1.58 (1.20 – 2.09)	0.001
Logistic regression adjusting for case-mix and patient unobserved heterogeneity		

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Whole Journeys What does success look like?



Attendance at a specialist clinic:

- Specialty codes
- Consultant codes (GMC Number)



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Conclusions

- **New ways to interrogate data for your service**
- **Generate reports to compliment existing data**
- **Opportunity to evaluate existing initiatives**
- **Identify and target new interventions**