

Press release: New liver disease atlas shows major variation across England

New data published by Public Health England (PHE) today (14 September 2017) shows a wide variation of premature mortality rates from liver disease across England.

Liver disease is almost entirely preventable with the major risk factors, alcohol, obesity and Hepatitis B and C, accounting for up to 90% of cases. The atlas will help health professionals to allocate their resources to improve patient outcomes.

The atlas shows premature mortality rates – dying before the age of 75 – ranged from 3.9 per 100,000 in South Norfolk clinical commissioning group (CCG) to 30.1 per 100,000 in Blackpool CCG, a 7.7 fold difference.

The atlas paints a mixed picture, with 10 indicators showing improvements including a reduction of premature deaths and fewer alcohol-specific hospital admissions for under 18s.

Nine of the indicators have become worse over time, including a doubling of hospital admission rates for cirrhosis from 54.8 per 100,000 to 108.4 per 100,000 people over the past decade. This indicator also varies significantly across the country with an 8.5 fold variation across CCGs and this gap has widened over the past decade.

Liver disease is responsible for almost 12% of deaths in men aged 40 to 49 years and is now the fourth most common cause of 'years of life lost' in people aged under 75, after heart disease and lung cancer.

Professor Julia Verne, Head of Clinical Epidemiology at PHE said:

Chronic liver disease is a silent killer of young adults, creeping up and showing itself when it's often too late. However, around 90% of liver disease is preventable.

We hope local health professionals will make the most of this rich data source to inform how they reduce the burden of liver disease in their areas.

The atlas also lays bare the impact of the stark health inequalities in England. Inequality plays a role in the significant variation in risk factors of liver disease – excessive alcohol consumption, obesity, and hepatitis B and C.

For example, there is a 7.4 fold difference in the rate of alcohol-specific hospital admissions across the country, with the majority of the higher rates being clustered in the more deprived areas. Also, in the most deprived fifth

of the country, people with liver disease die 9 years earlier than those in the most affluent fifth.

These data will underline the importance of developing a strategy to tackle the rising burden of liver disease, especially in younger adults and even children. Liver disease can take 20 years to show up as symptoms.

The atlas is made up of 39 indicators, 19 of which show trend data over time. It shows the degree of variation across the country, a national figure for comparison and commentary providing options for action and a list of evidence based resources for local health systems to improve.

For further information contact PHE:

[Public Health England](#) exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. It does this through world-class science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. PHE is an operationally autonomous executive agency of the Department of Health. Follow us on Twitter: [@PHE_uk](#) and Facebook: www.facebook.com/PublicHealthEngland.

The [2nd Atlas of Variation in risk factors and healthcare for liver disease in England](#) will be published on the PHE fingertips website.

The 2nd Atlas of Variation in risk factors and healthcare for liver disease in England has been prepared in partnership with a wide range of organisations: