

Liver Disease and Cirrhosis Deaths in Oregon

Background

Long-term alcohol consumption is a major cause of chronic liver disease and cirrhosis. Continued alcohol use over time causes scar tissue to build up in the liver, preventing it from performing critical functions such as managing infections, removing harmful substances from the blood, and absorbing nutrients. In Oregon, over 600 deaths were due to chronic liver disease and cirrhosis in 2016, and more than 4 in 5 (84%) of those deaths were directly caused by alcohol consumption.

Excessive alcohol use has a substantial public health impact and costs everyone. Most excessive drinkers (90%) are not alcohol dependent.¹ Excessive alcohol use costs the Oregon economy \$3.5 billion per year or about \$2.08 per drink in lost workplace productivity, health care expenses, criminal justice costs, and motor vehicle crashes.²

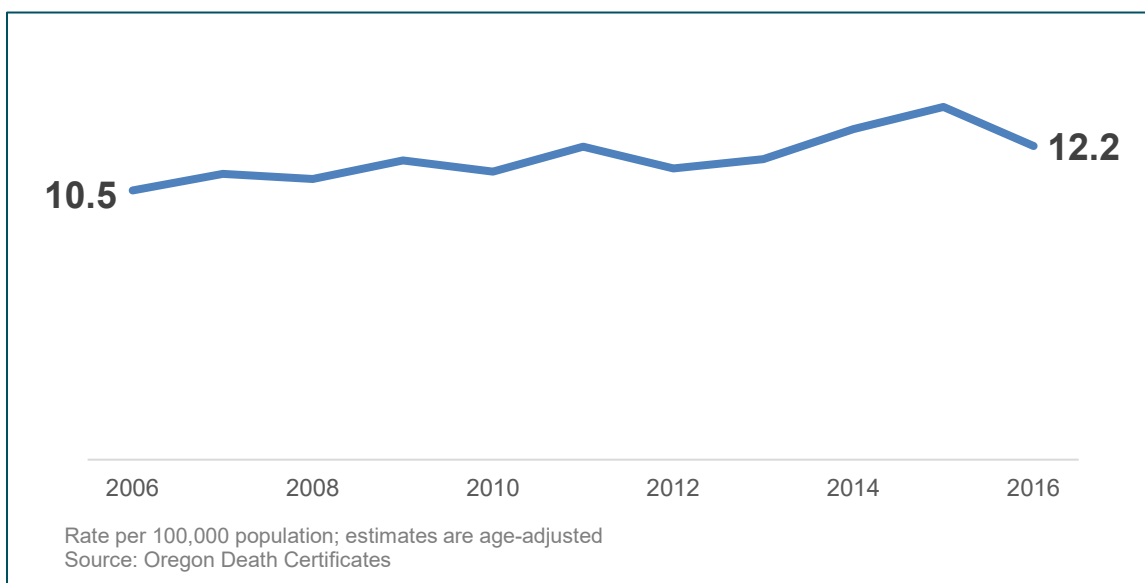


Figure 1. Chronic liver disease and cirrhosis death rate, Oregon, 2006–2016

- The rate of liver disease and cirrhosis deaths in Oregon has increased 20% over the past 10 years.
- 605 deaths in Oregon were caused by liver disease or cirrhosis in 2016.

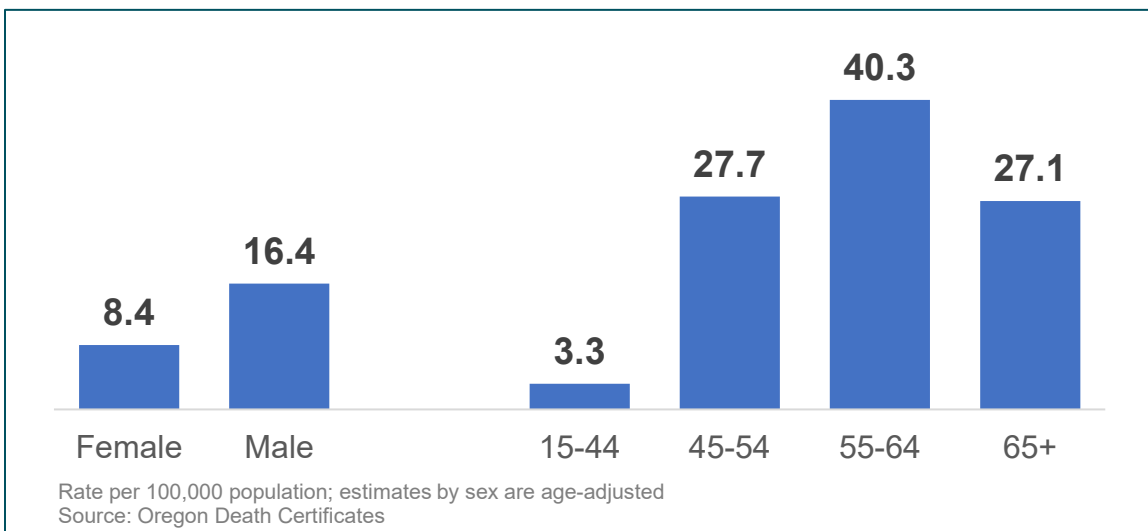


Figure 2. Chronic liver disease and cirrhosis death rate by sex and age, Oregon, 2016

- The liver disease and cirrhosis death rate among men (16.4 per 100,000) is nearly double compared to women (8.4 per 100,000)
- The highest liver disease and cirrhosis death rate occurs among those aged 55 to 64 years (40.3 per 100,000).
- Among middle aged men (45 to 54 years), the liver disease and cirrhosis death rate has more than doubled over the past 25 years (from 16 per 100,000 in 1990 to 33 per 100,000 in 2016). [data not shown]

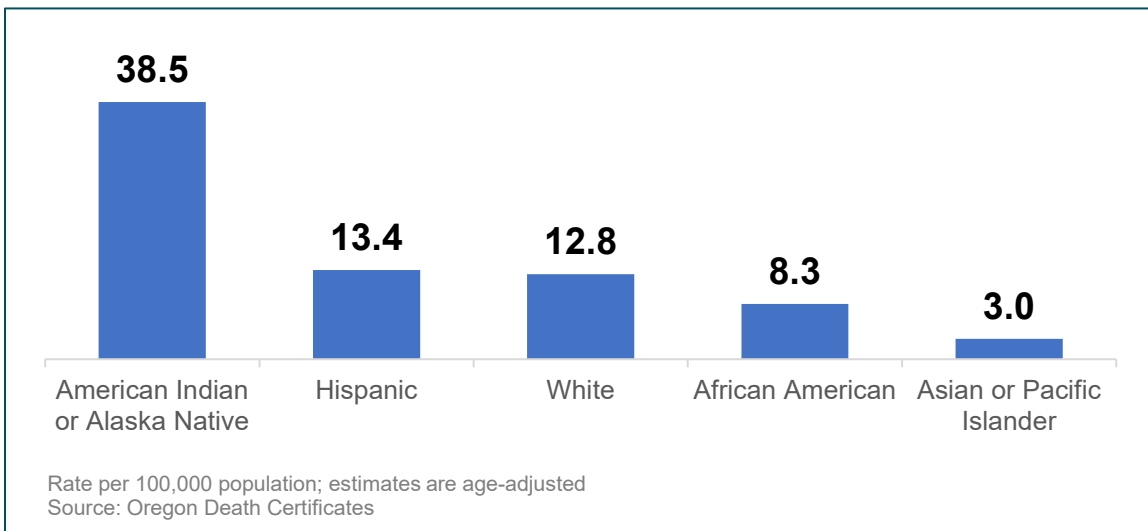


Figure 3. Chronic liver disease and cirrhosis death rate by race and ethnicity, Oregon, 2013–2016

- The liver disease and cirrhosis death rate is more than three times higher among American Indian or Alaska Natives (38.5 per 100,000) compared to other racial and ethnic groups.

Alcohol and substance use is an Oregon State Health Improvement Plan (SHIP) priority. For more information, see: <http://www.oregon.gov/OHA/PH/ABOUT/Pages/ship-substance-use.aspx>

References:

1. Esser MB, Hedden SL, Kanny D, Brewer RD, Gfroerer JC, Naimi TS. [Prevalence of alcohol dependence among US adult drinkers, 2009–2011.](#) *Prev Chronic Dis.* 2014;11:140329. Available from: doi: <http://dx.doi.org/10.5888/pcd11.140329>.
2. Sacks JJ, Gonzales KR, Bouchery EE, Tomedi LE, Brewer RD. [2010 national and state costs of excessive alcohol consumption.](#) *Am J Prev Med.* 2015;49(5):e73–e79.

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