

# **ADDRESS COLLOQUIA**

Venue: Medical University Vienna, Center for Physiology and Pharmacology,  
Institute of Physiology, Großer Hörsaal Physiologie  
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**Thursday 16.05.2019**

**16:00 s.t.**

**Host: Harald Sitte**

## ***AddRes PLUS***

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**Helmut K. Seitz, Prof. Dr. med., Prof. h.c. (VRC)**

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University of Heidelberg  
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***Alcoholic Liver Disease – Update 2019***

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**Daniel König, Dr. med. univ.**

Medical University of Vienna  
Department of Psychiatry and Psychotherapy

***Challenges in Treatment of Alcohol Use Disorder in End  
Stage Liver Disease***

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**Andreas Wippel, Dr. med. univ.**

Medical University of Vienna  
Department of Psychiatry and Psychotherapy

***GDNF - a promising target in Alcohol Use Disorder***

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**Stephan Listabarth**

Medical University of Vienna  
Department of Psychiatry and Psychotherapy

***Physical Exercise in Patients with Alcohol Use Disorder***

## ***Alcoholic Liver Disease – Update 2019***

Prof. Helmut K. Seitz, Center of Alcohol Research, University of Heidelberg

Alcoholic liver disease (ALD) is the most prevalent type of chronic liver disease worldwide. ALD can progress from alcoholic fatty liver (AFL) to alcoholic steatohepatitis (ASH), which is characterized by hepatic inflammation. Chronic ASH can eventually lead to fibrosis and cirrhosis and in some cases hepatocellular cancer (HCC). In addition, severe ASH (with or without cirrhosis) can lead to alcoholic hepatitis, which is an acute clinical presentation of ALD that is associated with liver failure and high mortality. Most individuals consuming >40 g of alcohol per day develop AFL; however, only a subset of individuals will develop more advanced disease. Genetic, epigenetic and non- genetic factors might explain the considerable interindividual variation in ALD phenotype. The pathogenesis of ALD includes hepatic steatosis, oxidative stress, acetaldehyde-mediated toxicity and cytokine and chemokine- induced inflammation. Diagnosis of ALD involves assessing patients for alcohol use disorder and signs of advanced liver disease. The degree of AFL and liver fibrosis can be determined by ultrasonography, transient elastography, MRI, measurement of serum biomarkers and liver biopsy histology. Alcohol abstinence achieved by psychosomatic intervention is the best treatment for all stages of ALD. In the case of advanced disease such as cirrhosis or HCC, liver transplantation may be required. Thus, new therapies are urgently needed.

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## ***Challenges in Treatment of Alcohol Use Disorder in End Stage Liver Disease***

Daniel König, Medical University of Vienna, Department of Psychiatry and Psychotherapy

Thus far, a limited range of data on medical treatment recommendations for alcohol dependent patients with end stage liver disease exist regarding alcohol withdrawal syndrome as well as relapse prevention. Furthermore, even though alcohol use disorder is the most common cause of end stage liver disease, no specialized psychiatric care for patients with end stage liver disease due to alcohol use disorder existed in Austria. We want to present our clinical experience in caring for this patient collective in a psychiatric setting.

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## ***GDNF - a promising target in Alcohol Use Disorder***

Andreas Wippel, Medical University of Vienna, Department of Psychiatry and Psychotherapy

Only a small percentage of individuals transit from social to excessive, uncontrolled alcohol drinking. This suggests the existence of protective mechanisms that prevent the development of alcohol addiction. Several studies in rodents suggest that GDNF plays a unique role in neuroadaptations underlying Alcohol Use Disorder. We want to present our current research project about GDNF as a promising target in Alcohol Use Disorder.

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## ***Physical Exercise in Patients with Alcohol Use Disorder***

Stephan Listabarth, Medical University of Vienna, Department of Psychiatry and Psychotherapy

The beneficial effects of physical exercise as additive treatment in patients with affective disorders has been observed in several studies. However, there is still lack of evidence in this regard, when it comes to addictive disorders. We want to give a short outlook, how we plan to analyze the effect of an individualized training program on drinking behavior, craving severity and the levels of neurotrophic factors.