

# Drinking coffee may slow progression of liver disease

26 February 2016



= 0.517) or other liver disease entities ( $P = 0.652$ ). Coffee consumption of PSC and ALD patients remained as an independent risk factor (odds ratio, 1.94;  $P = 0.013$ ) in multivariate analysis, along with Model for End-Stage Liver Disease score (odds ratio, 1.13;  $P = 0.000$ ). Long-term survival was also improved in coffee drinkers following liver transplantation (61.8 months) versus non-drinkers (52.3 months;  $P = 0.001$ ).

"Coffee consumption delayed disease progression in ALD and PSC patients with ESLD and increased long-term survival after liver transplantation," the authors write.

**More information:** [Abstract](#)

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(HealthDay)—Regular coffee consumption seems to delay disease progression in alcoholic liver disease (ALD) and primary sclerosing cholangitis (PSC) patients with end-stage liver disease (ESLD) and increase long-term survival following liver transplantation, according to a study published online Feb. 15 in the *Journal of Gastroenterology and Hepatology*.

Kilian Friedrich, M.D., from the University Hospital of Heidelberg in Germany, and colleagues assessed [coffee consumption](#) habits in 379 patients with ESLD awaiting [liver transplantation](#) and 260 patients after liver transplantation.

The researchers found that 195 patients with ESLD consumed coffee on a daily basis, while 184 patients did not. Actuarial survival was lessened ( $P = 0.041$ ) in non-coffee drinkers (40.4 months) compared to coffee drinkers (54.9 months). The survival of patients with ALD ( $P = 0.020$ ) and PSC ( $P = 0.017$ ) was increased with coffee intake, but unaffected in patients with chronic viral hepatitis ( $P$

APA citation: Drinking coffee may slow progression of liver disease (2016, February 26) retrieved 11 September 2022 from <https://medicalxpress.com/news/2016-02-coffee-liver-disease.html>

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