

**NIAAA Extramural Advisory Board  
Consensus Recommendations  
Alcoholic Hepatitis  
February, 2012**

The sense of the panel and the Extramural Advisory Board was to encourage support for:

1. Multi-center collaborative trials using common protocols/including biomarkers addressing the spectrum of Alcoholic Hepatitis (AH).
  - a. Clinical studies should collect and bank genetic and other biological samples (including explant livers) and consents to allow translational studies of basic mechanisms, genetics (including pharmacogenomics), epigenetics, and systems biology of the disease and of treatment response.
  - b. There is a need for better diagnostic definitions to distinguish alcoholic hepatitis from other clinical syndromes. The definitions need to be related to risk and outcomes, to improve clarity of taxonomy and reduce problems with basic vs. clinical classification and aid in treatment decisions (both short term and long term).
  - c. Clarification of AH through innovative approaches including studies of gene expression, epigenetics, metabolism, inflammatory markers, gender, fibrosis and biome.
  
2. Investigate mechanisms of AH through
  - a. Studies on systems biology of multiorgan involvement, stem cell responses, cellular and proteomic markers, nutritional markers, endocrine, gut biome and endogenous DANGER signaling molecules.
  - b. Animal models that replicate AH.
  - c. Linkage of markers of regeneration, fibrosis and inflammation to AH pathogenesis and prognosis.