

**Survey of multicenter management protocols of
pre/post liver transplantation for
alcohol-associated liver disease in Korea
<Questionnaire for AALD-LT>**

This survey is designed to investigate multicenter clinical protocols for patients undergoing liver transplantation for alcohol-related liver diseases in South Korea.

It consists of the following sections:

- 1. Liver transplantation status by center**
- 2. Liver transplantation status for alcohol-related liver diseases**
- 3. Pre-transplant management of patients with alcohol-related liver diseases**
- 4. Post-transplant management of patients with alcohol-related liver diseases**

Supplement

1. Liver transplantation status by center

i. Name and position of the respondent? _____

ii. What is the name of your center? _____

iii. Size of your center?

☐ Secondary healthcare institution

☐ Tertiary referral hospital

iv. Number of liver transplantations performed in 2022?

☐ 0-10

☐ 10-50

☐ 50-100

☐ >100

2. Liver transplantation status for alcohol-related liver disease

- i. Does your center perform liver transplantation surgery for patients with Alcohol-related Liver Disease? (If yes, please check A and B.)

☐ Yes

☐ No

- A. How many years has your center been performing liver transplantation for patients with alcohol-related liver disease?

☐ 0~5 years

☐ >5 years

- B. How many patients with alcohol-related liver disease underwent liver transplantation in 2022?

☐ 0~5 patients

☐ 6~10 patients

☐ 11~20 patients

☐ >20 patients

3. Pre-transplant management of patients with alcohol-related liver disease

- i. Does your center have minimum abstinence requirements before liver transplantation evaluation/registration? (If yes, please check A.)**

☐ Yes

☐ No

- A. How long is the minimum abstinence period required by your center?**

☐ Less than 1 month

☐ 1-6 months

☐ More than 6 months

- ii. Is pre-transplant abstinence monitoring conducted? (If yes, please check A.)**

☐ Yes

☐ No

- A. What methods are used for abstinence monitoring? (Multiple choices possible)**

☐ Direct interview

☐ External reports

☐ Alcohol biomarkers

- iii. Are there protocols to evaluate alcohol use during the waiting period for transplantation? (If you answered "Yes," please check items A and B.)**

☐ Yes

☐ No

- A. If yes, what scoring system is used as a basis for evaluation? (Items for**

each protocol are attached in the supplement.)?

- ☐ SALT
- ☐ SIPAT
- ☐ AUDIT-C
- ☐ Other (please specify) _____

B. Do the protocol components include the following?

- 1) Chemical dependency evaluation ☐ Yes ☐ No
- 2) Visits by transplant surgeons ☐ Yes ☐ No
- 3) Visits by psychiatric team ☐ Yes ☐ No
- 4) Visits by social workers ☐ Yes ☐ No

iv. Is pre-transplant counseling by a psychiatrist conducted for patients with alcohol-related liver disease?

- ☐ Yes
- ☐ No

v. Before liver transplantation for patients with alcohol-related liver disease,

A. Is the patient's awareness of alcohol dependence evaluated?

- ☐ Yes ☐ No

B. Is the family's awareness of alcohol dependence evaluated?

- ☐ Yes ☐ No

C. Is the family's supportive environment for improving alcohol dependence evaluated?

- ☐ Yes ☐ No

D. Is the quantity of alcohol consumed in a single drinking session assessed?

- ☐ Yes ☐ No

E. Is the frequency of alcohol consumption assessed?

☐ Yes ☐ No

F. Is a history of legal issues related to alcohol consumption assessed?

☐ Yes ☐ No

G. Is concurrent substance abuse related to alcohol consumption assessed?

☐ Yes ☐ No

H. Is a history of previous attempts at abstinence assessed?

☐ Yes ☐ No

I. Are other mental health issues assessed?

☐ Yes ☐ No

J. Is family history of alcohol dependence assessed?

☐ Yes ☐ No

vi. Is a treatment plan for alcohol use disorder (AUD) established before liver transplantation? (If you answered "Yes," please check items A and B.)

☐ Yes

☐ No

A. If yes, what methods are used for the treatment plan? (Multiple choices possible)

☐ Inpatient treatment

☐ Outpatient treatment

B. What criteria are used as 'success' criteria for these patients? (Multiple choices possible)

☐ Absolute sobriety

☐ Initiation of alcohol use disorder treatment

☐ Graft survival

☐ Patient survival

4. Post-transplant management of patients with alcohol-related liver disease

i. Is post-transplant abstinence monitoring conducted? (If yes, please check items A and B.)

☐ Yes

☐ No

A. How often is abstinence monitoring conducted?

☐ Monthly

☐ Every 3 months

☐ Every 6 months

☐ Annually

B. By what method is abstinence monitoring conducted post-transplant? (Multiple choices possible)

☐ Direct interview

☐ External reports

☐ Alcohol biomarker

ii. Are alcohol biomarkers routinely checked for patients with alcohol-related liver disease after liver transplantation surgery? (If yes, please check item A.)

☐ Yes

☐ No

A. How often are alcohol biomarkers checked after liver transplantation surgery for patients with alcohol-related liver disease?

☐ Monthly

☐ Every 3 months

- ☐ Every 6 months
- ☐ Annually
- ☐ Other (please specify) _____

iii. Is there a protocol in place for dealing with cases of post-transplant alcohol use? (If yes, please check item A.)

- ☐ Yes
- ☐ No

A. Do the protocol components include the following?

- | | |
|-----------------------------------|----------------------------------------------------------|
| 1) Chemical dependency evaluation | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2) Visits by transplant surgeons | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3) Visits by psychiatric team | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4) Visits by social workers | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Supplement

Instrument name	Target of instrument	Risk factors assessed	Points	Proposed interpretation of score
Sustained Alcohol Use Post-Liver Transplant (SALT)	Prediction of brief relapse ("slip") and sustained relapse to alcohol use in patients undergoing early liver transplant for severe alcohol associated hepatitis	Simplified psychosocial assessment of known risk factors specific for patients with severe alcoholic hepatitis 1. >10 drinks/day at presentation 2. ≥2 prior failed rehabilitation attempts 3. Any history of prior alcohol-related legal issues 4. Hx of non-THC illicit substance abuse	+4 +4 +2 +1	Higher the score the greater risk for relapse (no specific a priori cut off) <i>Hepatology. 2019;69:1477-1487.</i>
Stanford Integrated Psychosocial Assessment for Transplantation (SIPAT)	Comprehensive psychosocial assessment used to predict psychosocial outcomes in patients undergoing solid organ transplant Not specific for alcohol use disorder	Patient's readiness level and illness management 1. Knowledge/understanding of the medical illness 2. Knowledge/understanding of transplantation 3. Willingness/desire for treatment (transplant) 4. History of treatment adherence/compliance 5. Lifestyle factors Social support system level of readiness 6. Availability of social support system 7. Functionality of social support system 8. Appropriateness of living space and environment Psychological stability and psychopathology 9. Psychopathology 10. History of neurocognitive impairment 11. Influence of personality traits versus disorder 12. Effect of truthfulness versus deceptive behavior 13. Overall risk for psychopathology Lifestyle and effect of substance use 14. Alcohol use, abuse, and dependence 15. Alcohol abuse: risk for recidivism 16. Substance use/abuse/dependence 17. Substance use/abuse/dependence: risk for recidivism 18. Nicotine use/abuse/dependence	0-4 0-4 0-4 0-8 0-4 0-8 0-8 0-4 0-14 0-7 0-4 0-8 0-4 0-8 0-4 0-8 0-4 0-8 0-4 0-4 0-8 0-4 0-4 0-8 0-4 0-5	Total score range: 0-110 • 0-6 Excellent candidate • 7-20 Good candidate • 21-39 Minimally Acceptable Candidate • 40-68 High Risk candidate • >69 Poor Candidate <i>Psychosomatics. 2012;53:123-132.</i>
Alcohol Use Disorders Identification Test -Consumption (AUDIT-C)	Screening test to identify patients who are hazardous drinkers or have active alcohol use disorders based on previously validated tools used to screen for problematic alcohol use. Not specific for organ transplant or patients who had reduced or attempted to reduce alcohol consumption	Questions specifically relevant to present heavy alcohol consumption How often did you have a drink containing alcohol in the past year? Never Monthly or less Two to four times a month Two to three times a week Four or more times a week How many drinks did you have on a typical day when you were drinking in the past year? None, I do not drink 1 or 2 3 or 4 5 or 6 7-9 10 or more How often did you have six or more drinks on one occasion in the past year? Never Less than monthly Monthly Weekly Daily or almost daily	0 1 2 3 4 0 1 2 3 4 0 1 2 3 4 0 1 2 3 4 0 1 2 3 4 0 1 2 3 4	Total score range: 0-12 Low Risk: 0-3 points Moderate Risk: 4-5 points High Risk: 6-7 points Severe Risk: 8-12 points <i>Prog Transplant. 2013;23:310-318.</i>