

## **EHAAL Position Statement in Support of the WHO Draft Resolution**

### ***Liver Disease – Strengthening the Global NCD Response by Addressing Alcohol Use***

The European Health Alliance on Alcohol (EHAAL) strongly supports the proposed WHO draft resolution on liver disease and welcomes its recognition as a critical and under-addressed component of the global noncommunicable disease (NCD) agenda.

EHAAL's support is grounded in the recognition that this resolution provides an important opportunity to reaffirm the central role of alcohol as a major, preventable driver of noncommunicable diseases (NCDs), including liver disease. By elevating liver health within the global NCD agenda, the resolution brings renewed attention to the extent to which alcohol harms health across the life course.

EHAAL welcomes the resolution's clear recognition that liver disease is not caused by a single factor. Alcohol use and metabolic conditions such as obesity and diabetes often act together to damage the liver. By using the term "Steatotic Liver Disease" (SLD) – an umbrella term covering liver damage linked to both alcohol and metabolic health problems - the resolution reflects modern science and reaffirms that alcohol remains a major and preventable risk factor.

From EHAAL's perspective, it is particularly important that the draft resolution rightly recognises alcohol use as a modifiable risk factors causing liver failure and death. Alcohol consumption is a leading, preventable cause of liver cirrhosis and liver cancer globally and a significant contributor to avoidable mortality and morbidity. Beyond liver disease, alcohol causes cancers, cardiovascular disease, injuries, and mental health disorders, hugely increasing the overall NCD burden.

Alcohol-related harm disproportionately affects working-age populations, resulting in significant health, social, and economic consequences for individuals, families, communities and health systems. Addressing liver disease without addressing alcohol use would leave a significant gap in the global NCD response. This resolution offers a timely opportunity to strengthen coherence between liver health and alcohol policy within national and global NCD strategies.

EHAAL welcomes the growing global political momentum behind this agenda.

#### **Call to Action**

EHAAL calls on all Member States to support the adoption and full implementation of this resolution.

To ensure that liver disease prevention meaningfully reduces the NCD burden, we urge Member States to:

- Prioritise alcohol harm reduction by reducing per capita consumption within national NCD strategies and liver health action plans, recognising alcohol as a major and preventable driver of liver disease.
- Strengthen surveillance and monitoring systems to measure and publicly report alcohol-attributable liver disease and broader alcohol-related burden.
- Implement evidence-based alcohol policy measures, including effective pricing policies, availability control, restrictions on marketing and advertising, and clear health information and warnings for consumers.
- Invest in prevention and early identification of alcohol-related liver disease, particularly in primary health care setting.



- Expand equitable access to early detection, diagnosis, treatment, and care across the liver disease continuum.
- Embed alcohol harm reduction within universal health coverage, ensuring that liver health strategies systematically address alcohol use as a core determinant.

By placing alcohol policy at the centre of liver disease prevention, Member States can significantly reduce premature mortality and morbidity, alleviate pressure on health systems, and accelerate progress toward global NCD targets.

EHAA stands ready to support Member States, WHO, and global partners in advancing and implementing this agenda. We strongly encourage all Member States to endorse and adopt this resolution at the forthcoming World Health Assembly. Without systematically addressing alcohol-related harm as a core driver of liver disease and other NCDs, the global response to NCDs will remain incomplete.

## European Health Alliance on Alcohol (EHAA)

The [European Health Alliance on Alcohol \(EHAA\)](#) is a coalition of 26 European and national health organisations representing over **2 million medical professionals and healthcare providers**. EHAA works to reduce alcohol-related harm across Europe through evidence-based advocacy, education, and engagement with policymakers.

### Members of European Health Alliance on Alcohol (EHAA)

European Association for the Study of the Liver (EASL)  
European Renal Association (ERA)  
United European Gastroenterology (UEG)  
European Psychiatric Association (EPA)  
European Geriatric Medicine Society (EuGMS)  
European Medical Students' Association (EMSA)  
World Family Doctors - WONCA Europe  
European Federation of the Associations of Dietitians (EFAD)  
European Society for Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN)  
European Society of Radiology (ESR)  
European Academy of Paediatrics (EAP)  
Standing Committee of European Doctors (CPME)  
European Society for Clinical Nutrition and Metabolism (ESPEN)  
Association of European Cancer Leagues (ECL)  
European Society of Cardiology (ESC)  
International Society of Addiction Medicine (ISAM)  
European Society of Emergency Medicine (EUSEM)  
European Academy of Neurology (EAN)  
European Cancer Organisation (ECO)  
European Society for Medical Oncology (ESMO)  
Biomedical Alliance in Europe (BioMed Alliance)  
European Federation of Internal Medicine (EFIM)  
European Heart Network (EHN)  
European Board and College of Obstetrics and Gynaecology (EBCOG)  
European Association of Dental Public Health (EADPH)  
European Federation of Addiction Societies (EUFAS)