

# Alcohol as an Accelerator of MASH

## Distinct Triggers, Shared Outcomes

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# Key Takeaways

## 1. **ALD and MASH are not separate diseases**

They synergize through shared biology, accelerating fibrosis and clinical progression.

## 2. **Lipid flux—not fat itself—is the central driver**

Genetics, alcohol, and metabolic stress converge on impaired hepatocyte lipid handling.

## 3. **Alcohol remains the dominant modifiable risk factor**

Abstinence has the greatest impact on progression, recompensation, and survival.

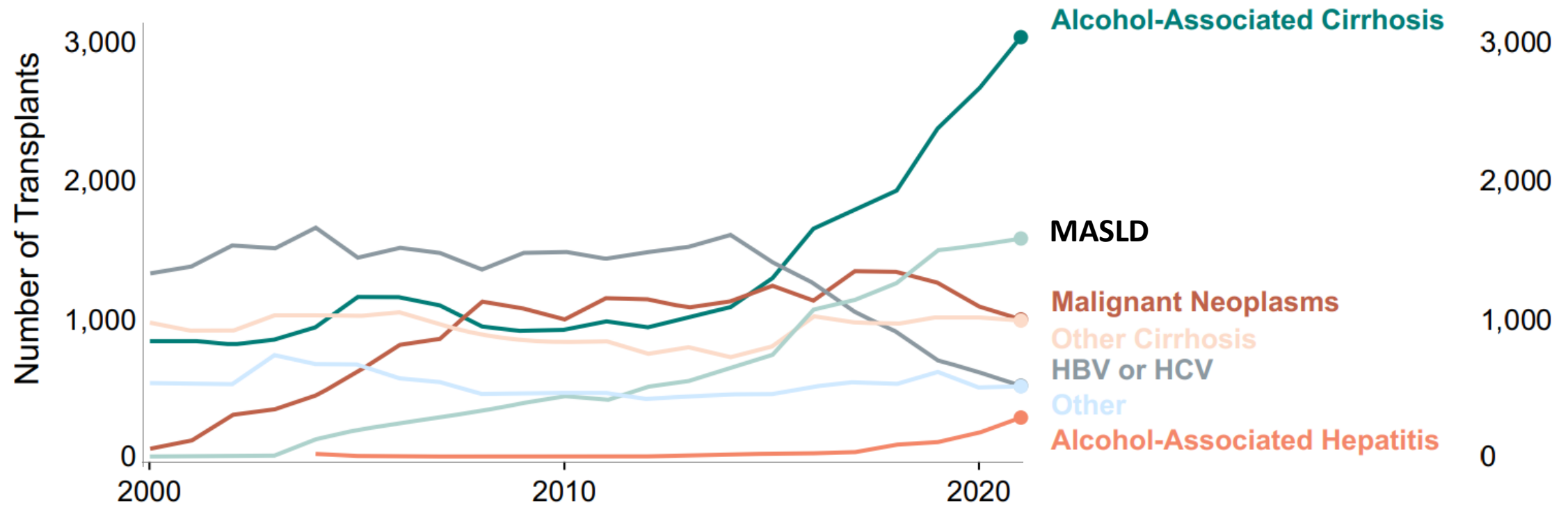
## 4. **Emerging therapies target both biology and behavior**

GLP-1–based and FGF21 therapies address food intake, alcohol craving, and metabolic pathways.

# The New Transplant Reality: Alcohol and Metabolic Liver Disease

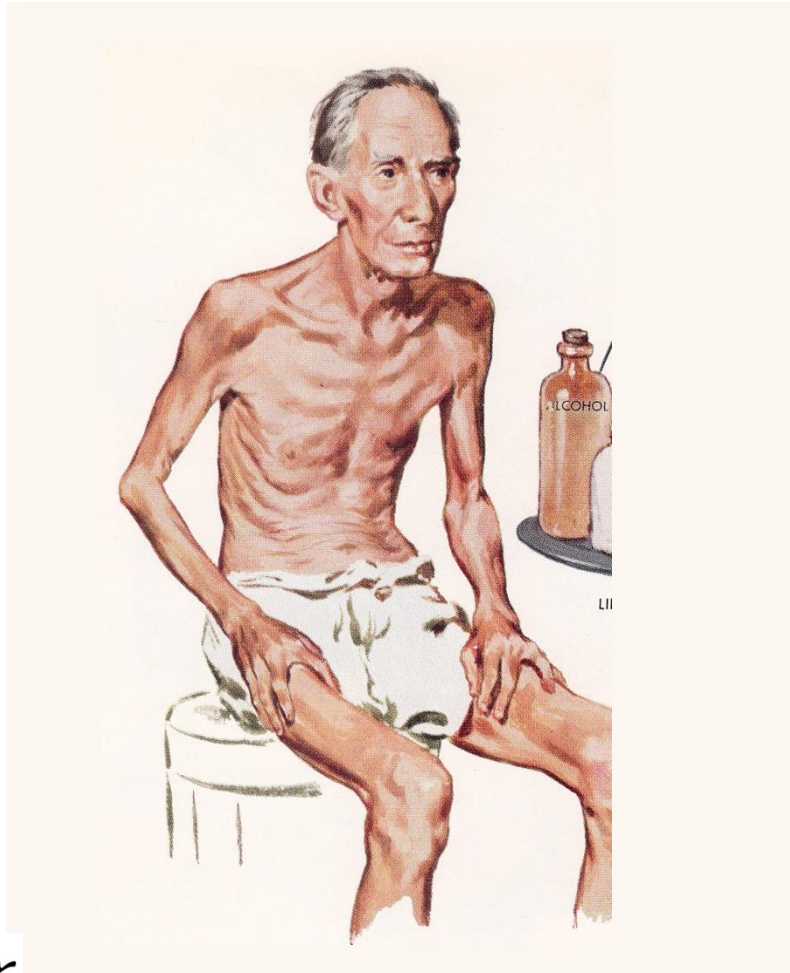
## Liver Transplants per Year

By Primary Disease

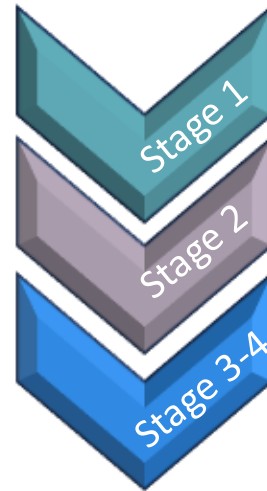


# Fatty Liver: Evolving Concept of a Disease Spectrum

Alcohol



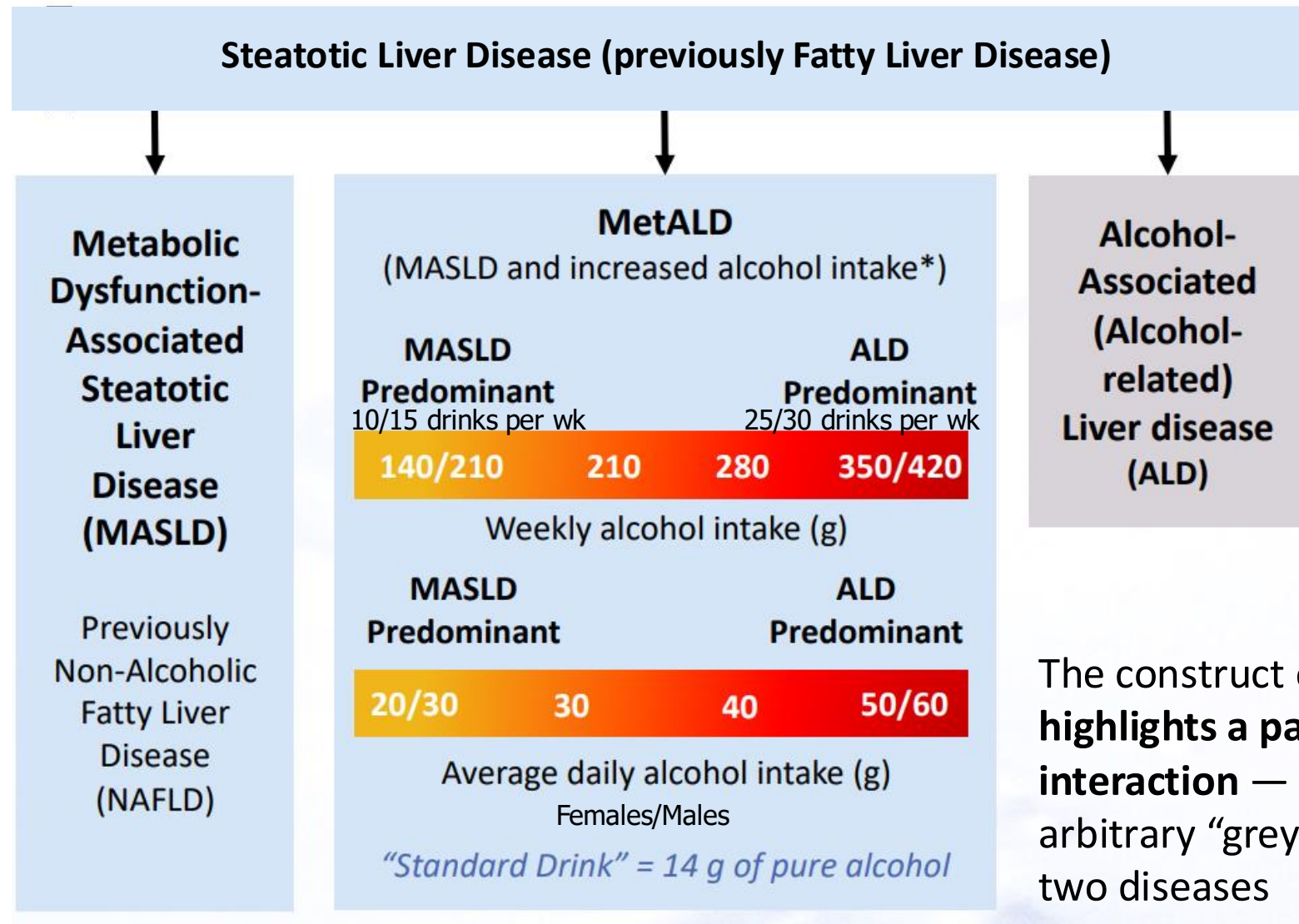
• Synergism



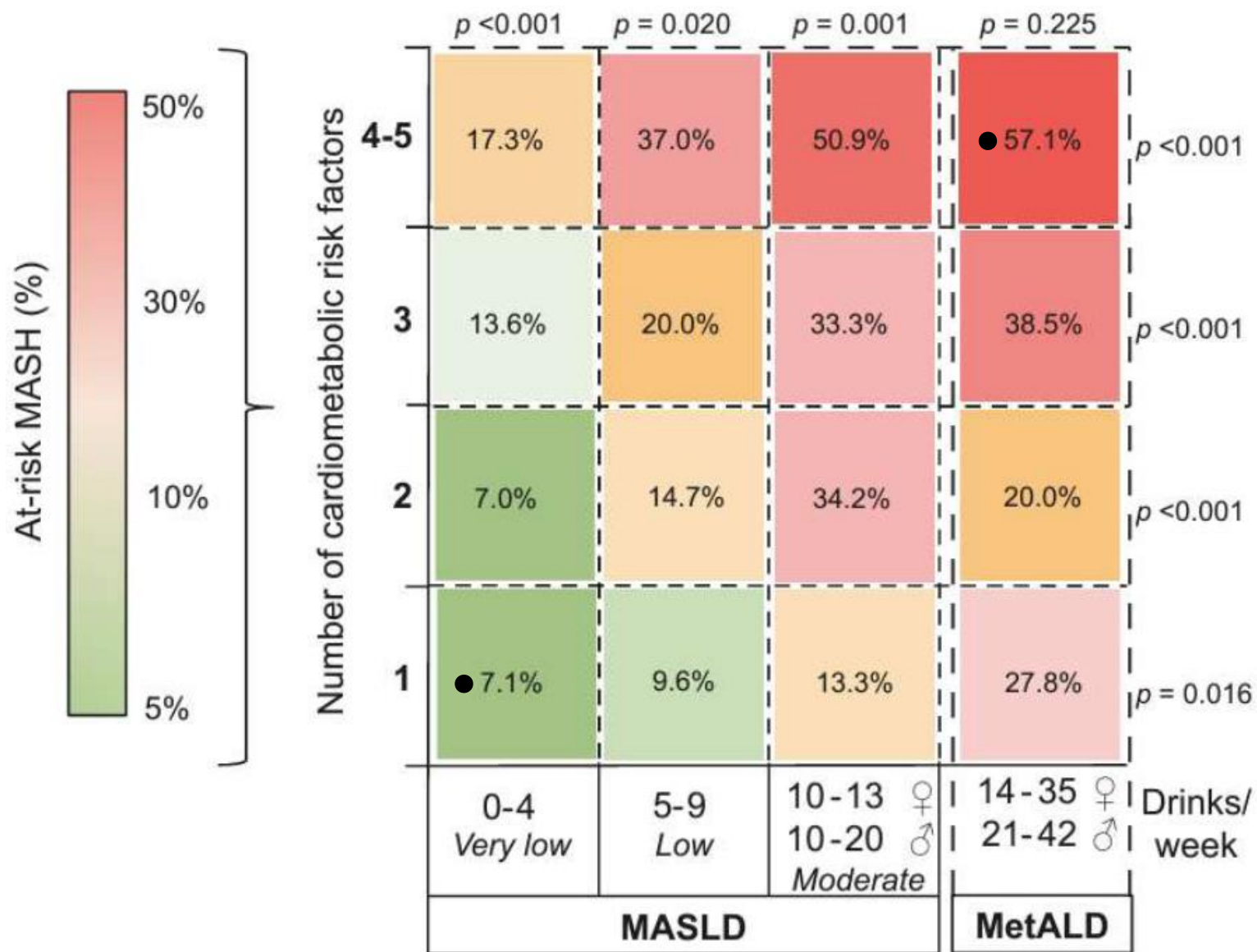
MASH



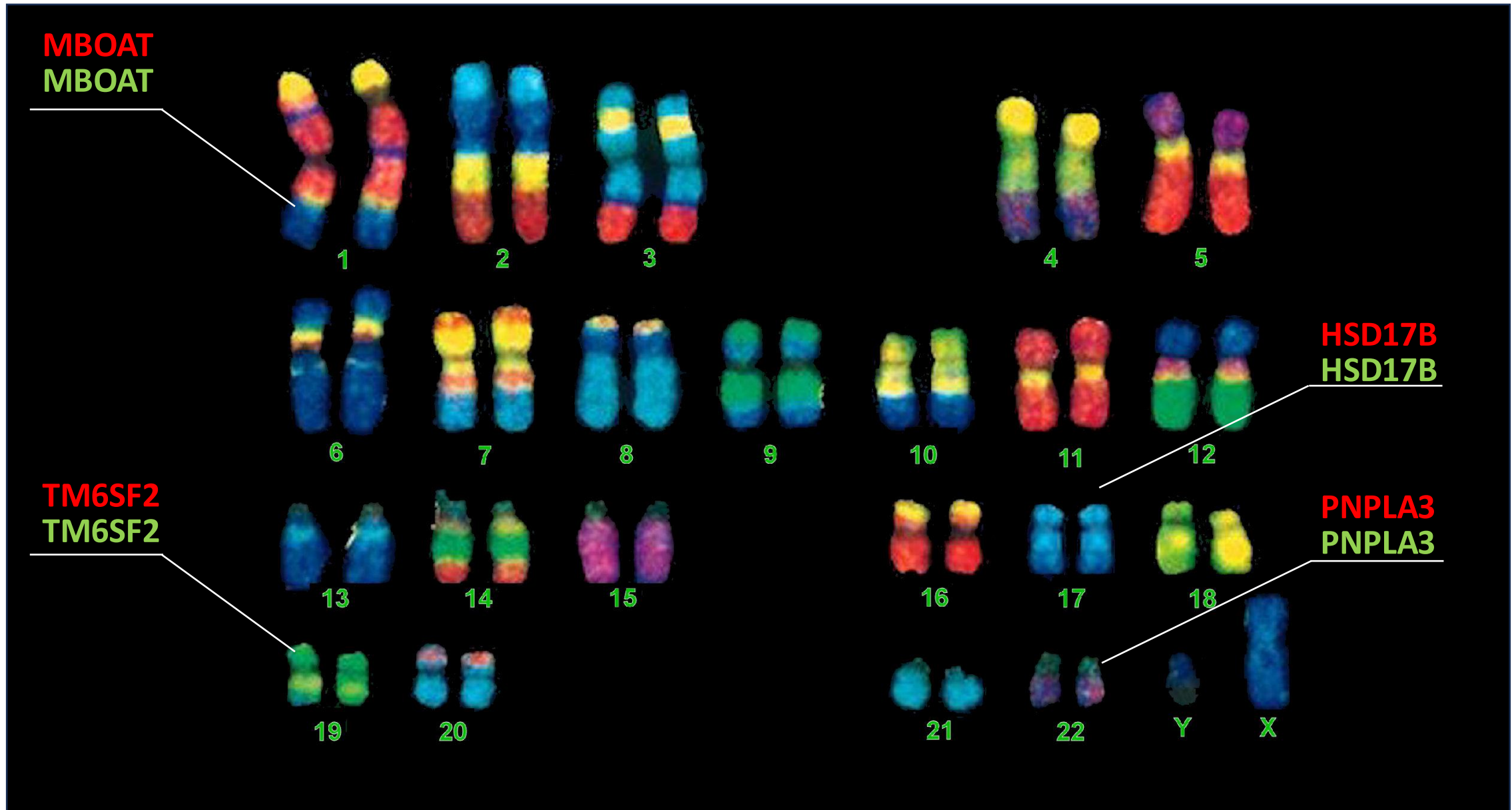
# 2023 Fatty Liver Disease Nomenclature – Cognitive Fallacies



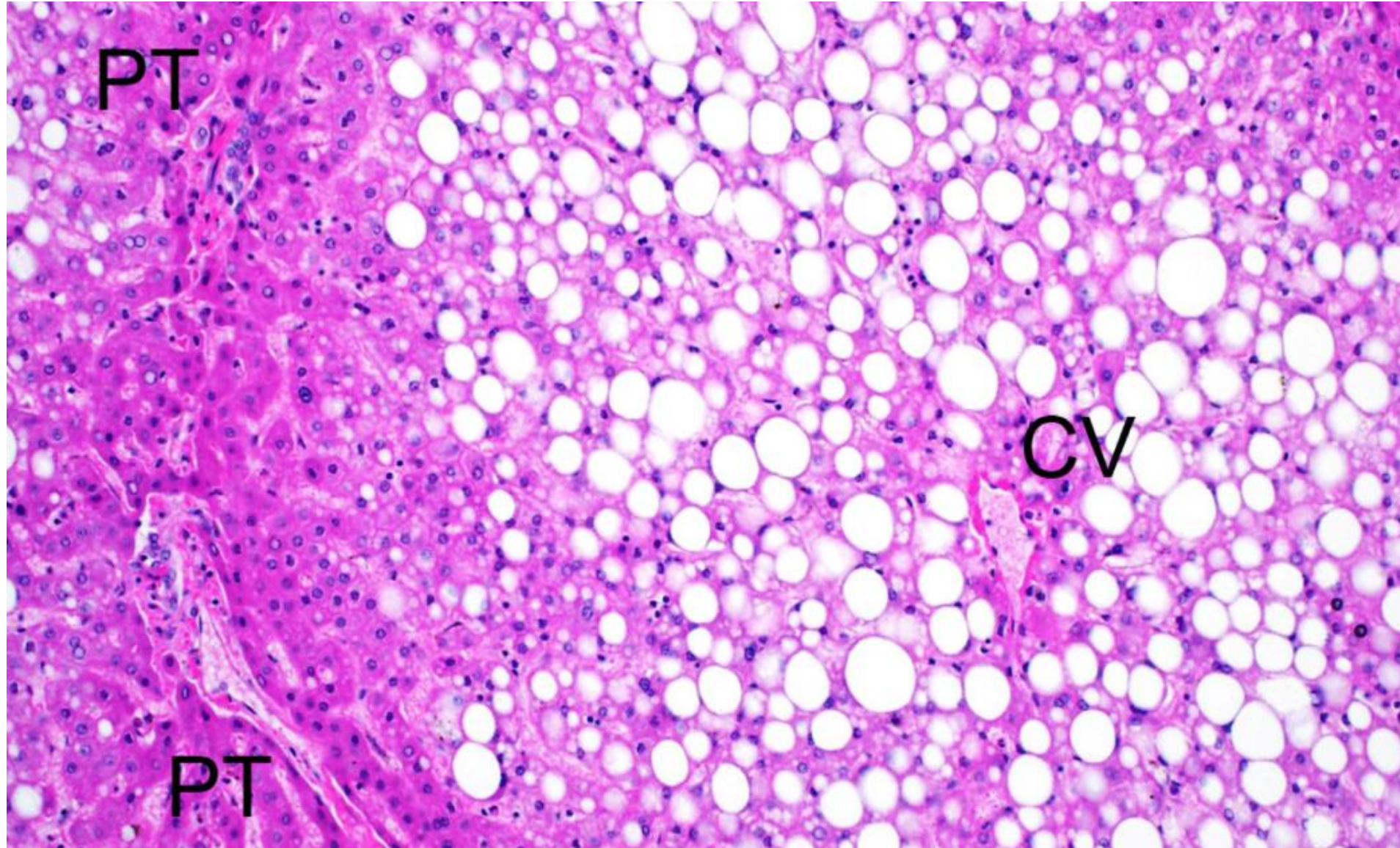
# Synergism in MetALD: Alcohol and Metabolic Risk are Mutual Amplifiers



# Identical Genetic Determinants in **ALD** and **MASH**



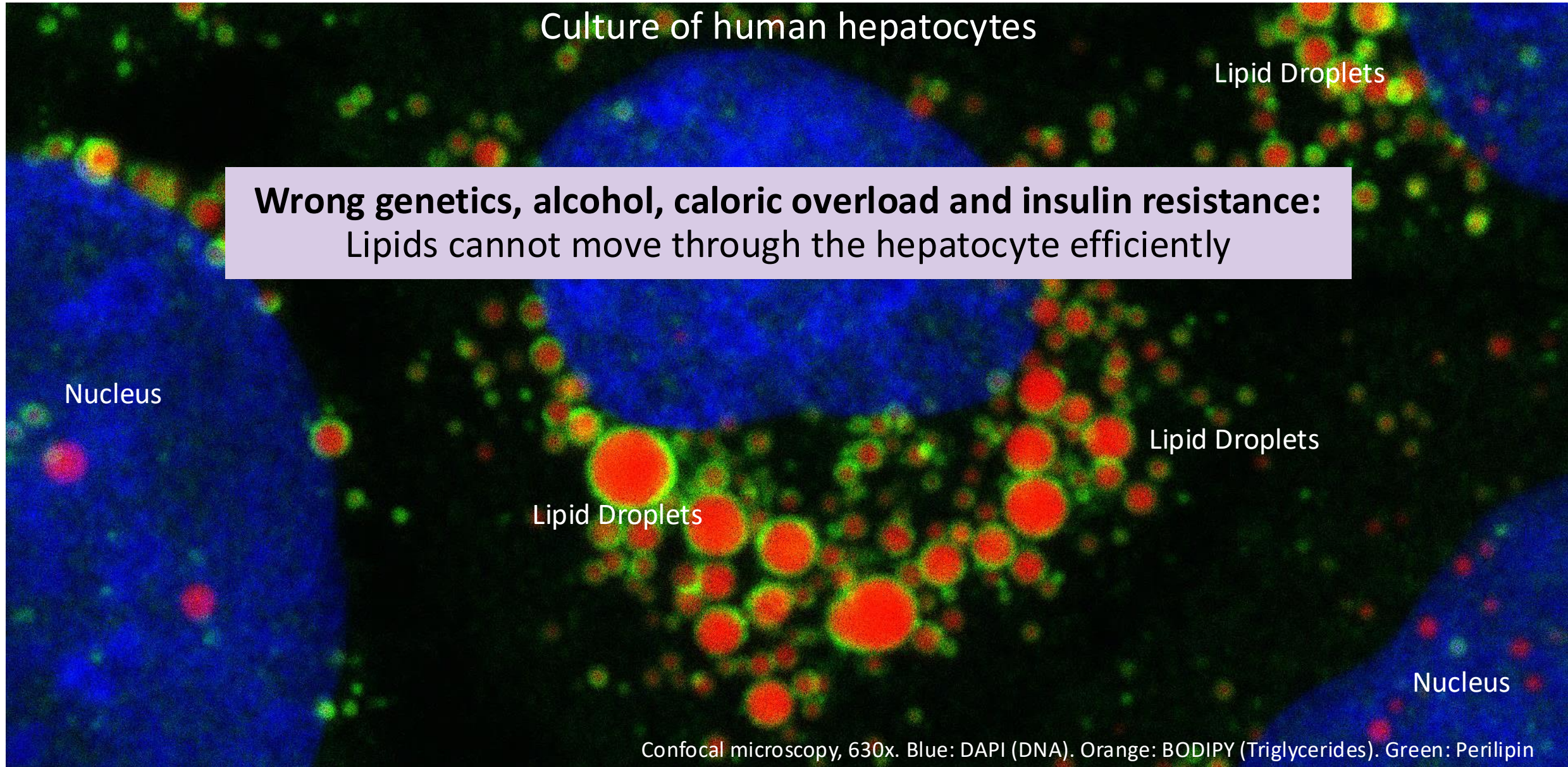
# What Genetics Taught Us: Hepatocyte Lipid Handling in ALD/MASH



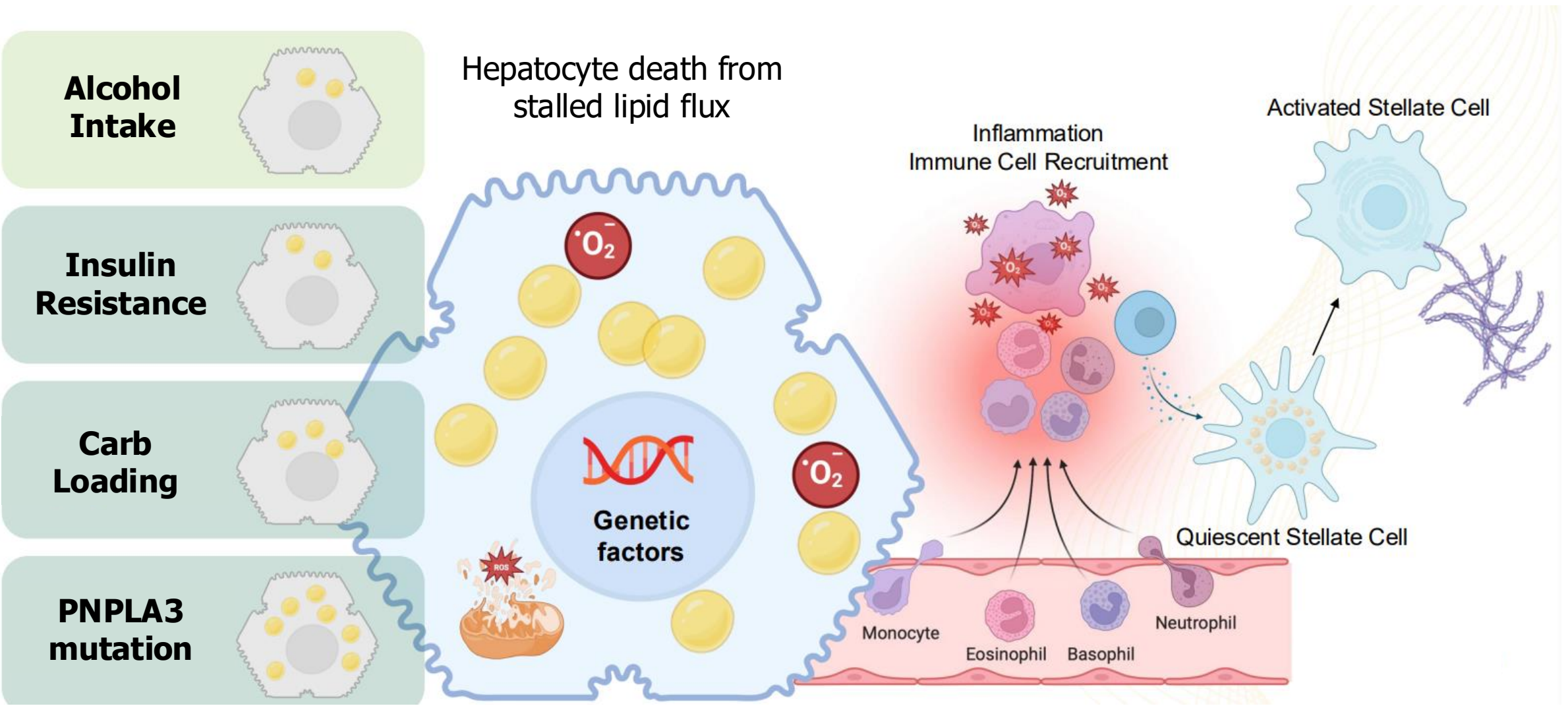
Liver biopsy; H&E, magnification 100x

PT, portal tract; CV, central vein

# The Hepatic Lipid Flux Mechanism



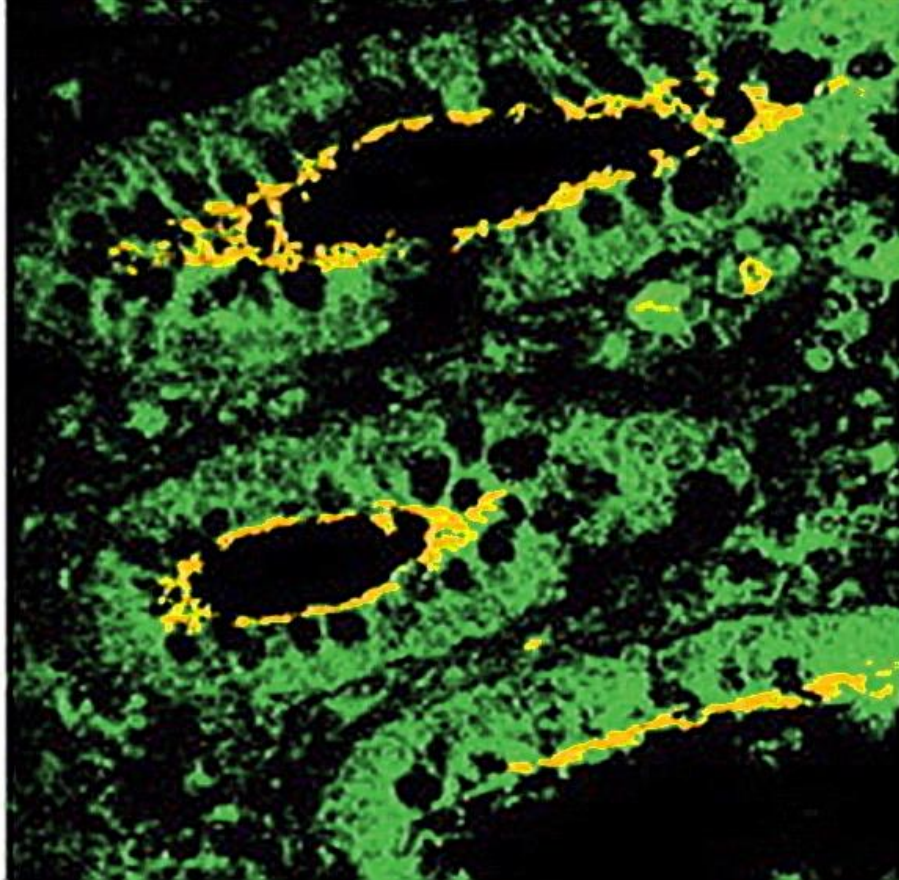
# If Lipid Flux Stalls: Common Pathobiology of MASH & ALD



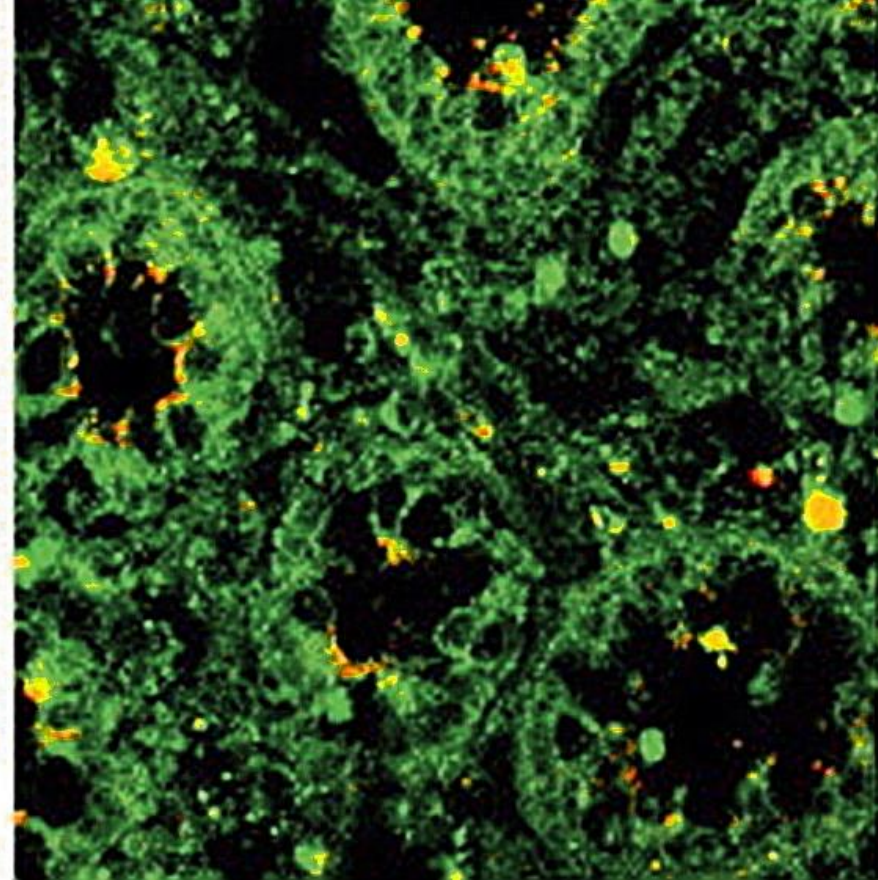
# Disrupted Intestinal Barrier (“Leaky Gut”) in ALD

## Human colonic mucosal biopsies

**Control**

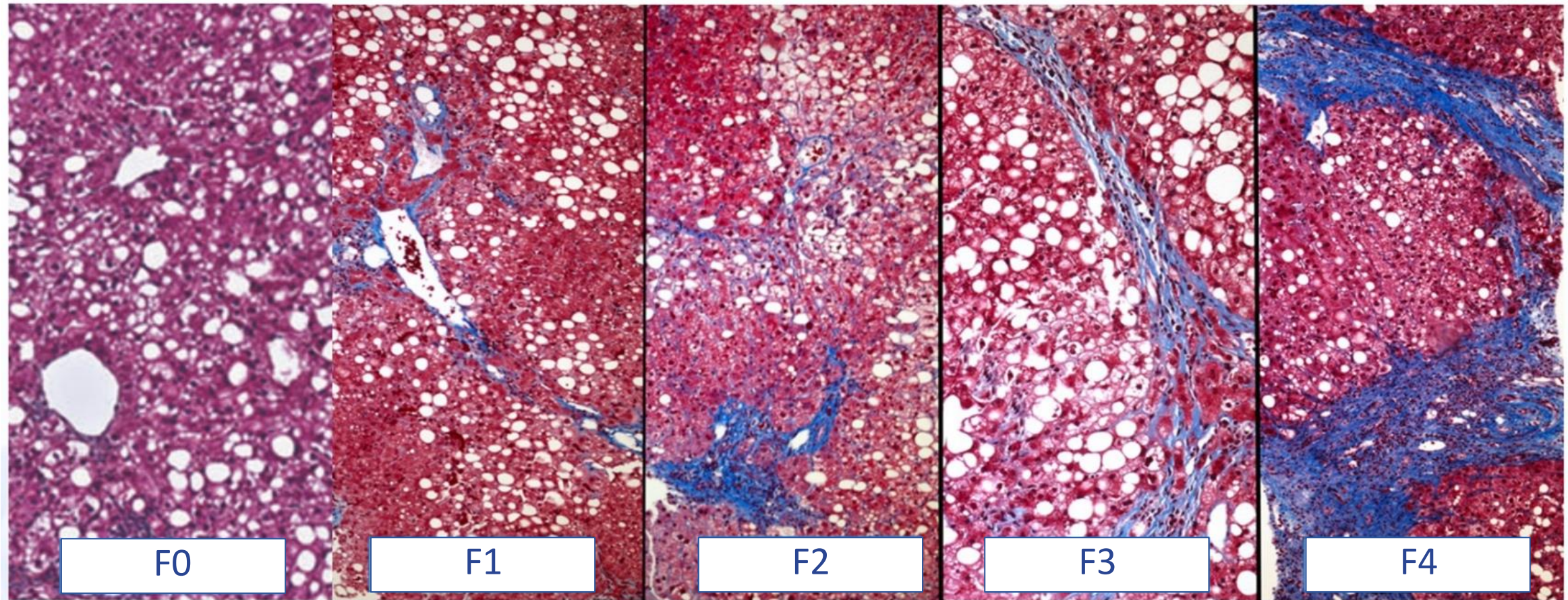


**Alcohol**



**Yellow: ZO-1 (marker of tight junctions). Green: intestinal cells.**  
Confocal microscopy.

# Fibrosis Progression in MASH and ALD



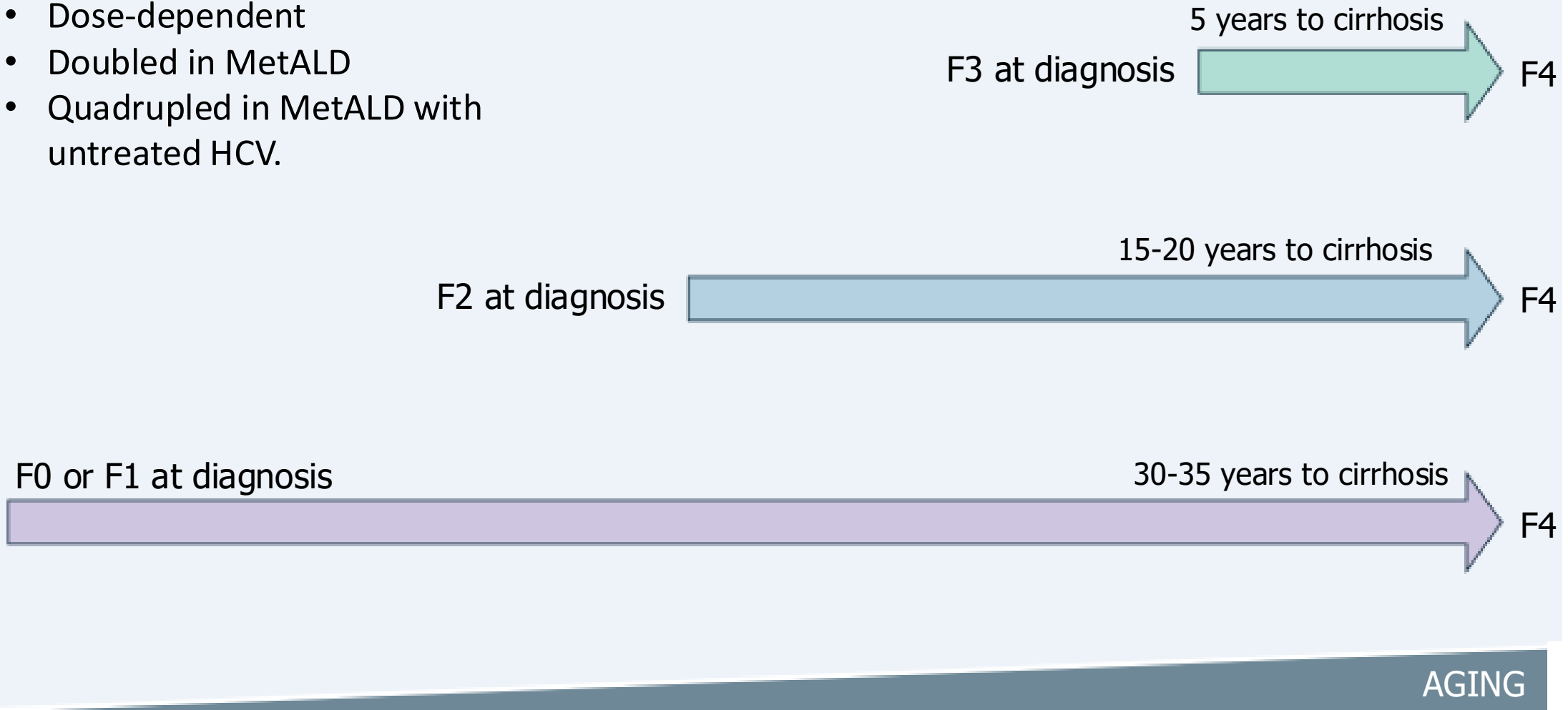
Early Fibrosis

Advanced Fibrosis

# Natural History of ALD or MASH: Fibrosis Stage, and Disease Trajectory

## The rate of fibrosis progression is:

- Dose-dependent
- Doubled in MetALD
- Quadrupled in MetALD with untreated HCV.



# Foundational Interventions are Necessary – But not Sufficient



## LIFESTYLE & WEIGHT LOSS

- **Weight loss  $\geq 7-10\%$**   
MASH resolution  $\rightarrow$  fibrosis regression
- **Mediterranean-style diet**; avoid sugar-sweetened drinks, refined carbs
- **$\geq 150$  min/week activity**



## ALCOHOL COUNSELING

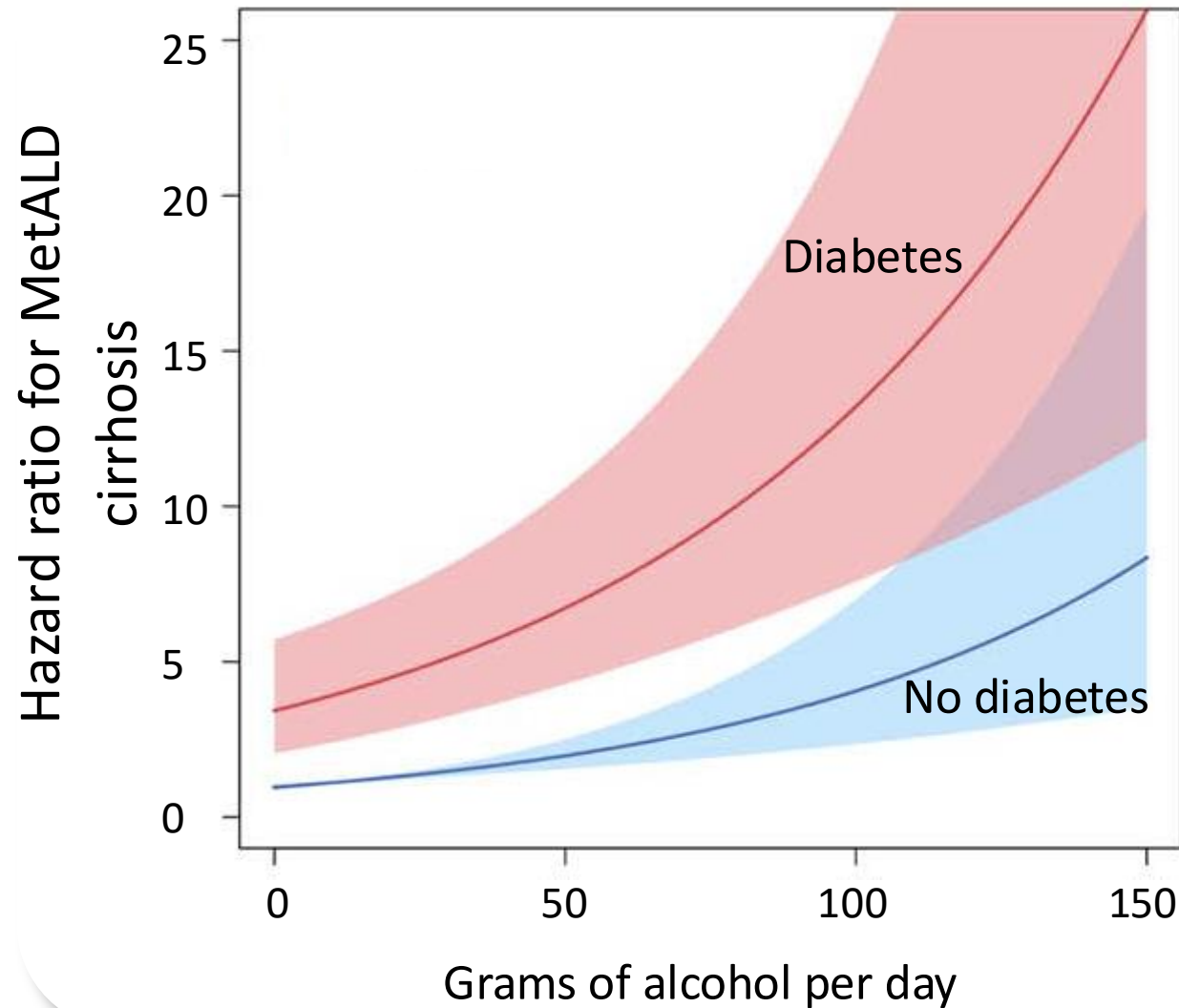
- **High priority**  
Even light/moderate alcohol + metabolic risk =  $\uparrow$  fibrosis
- **No safe threshold** in MASLD
- **Binge pattern especially harmful**  
Oxidative stress, hepatocellular injury
- **Early counseling** to prevent progression to MetALD

**No therapy rivals abstinence in altering outcomes\* in ALD and MetALD.**

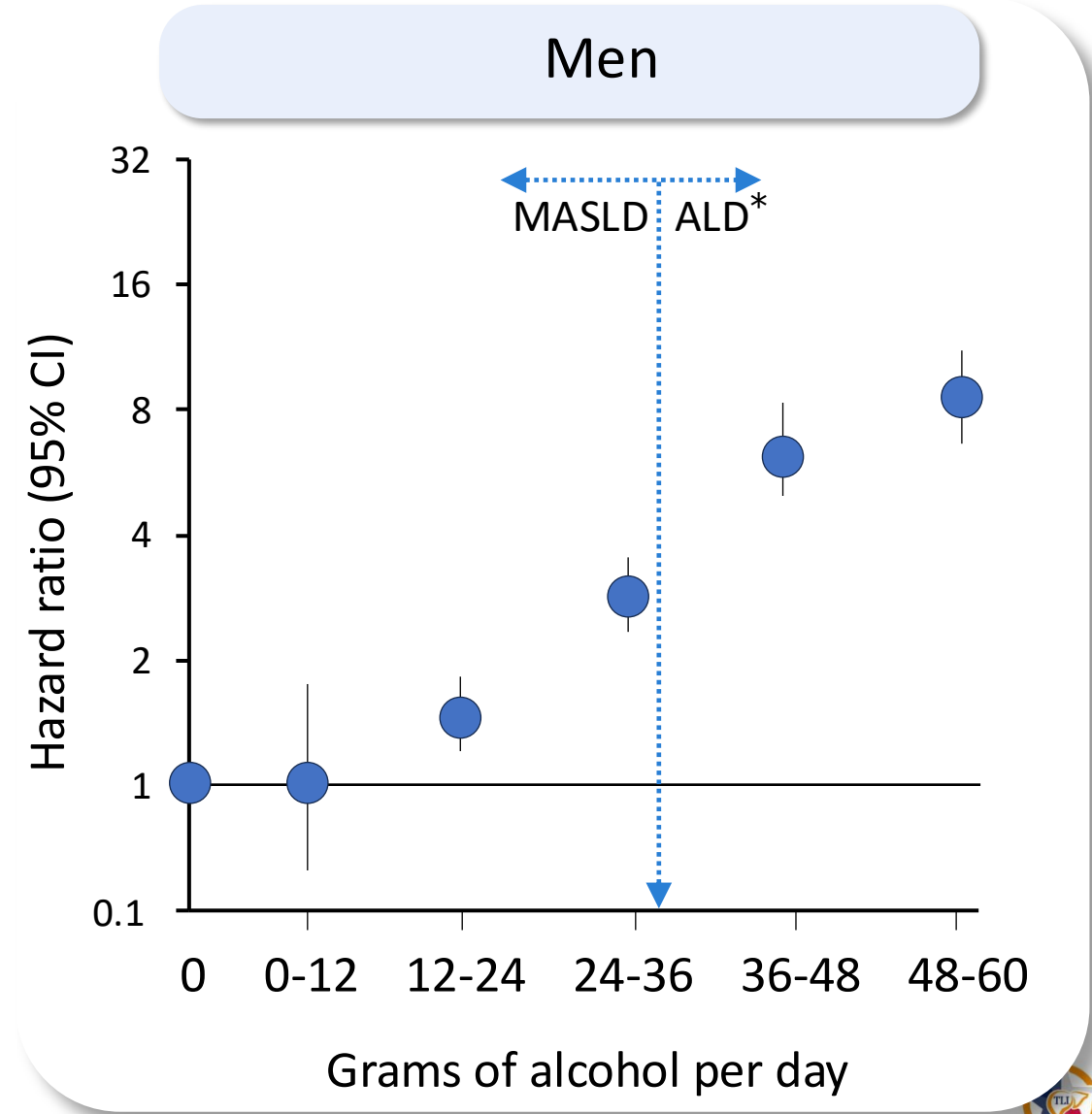
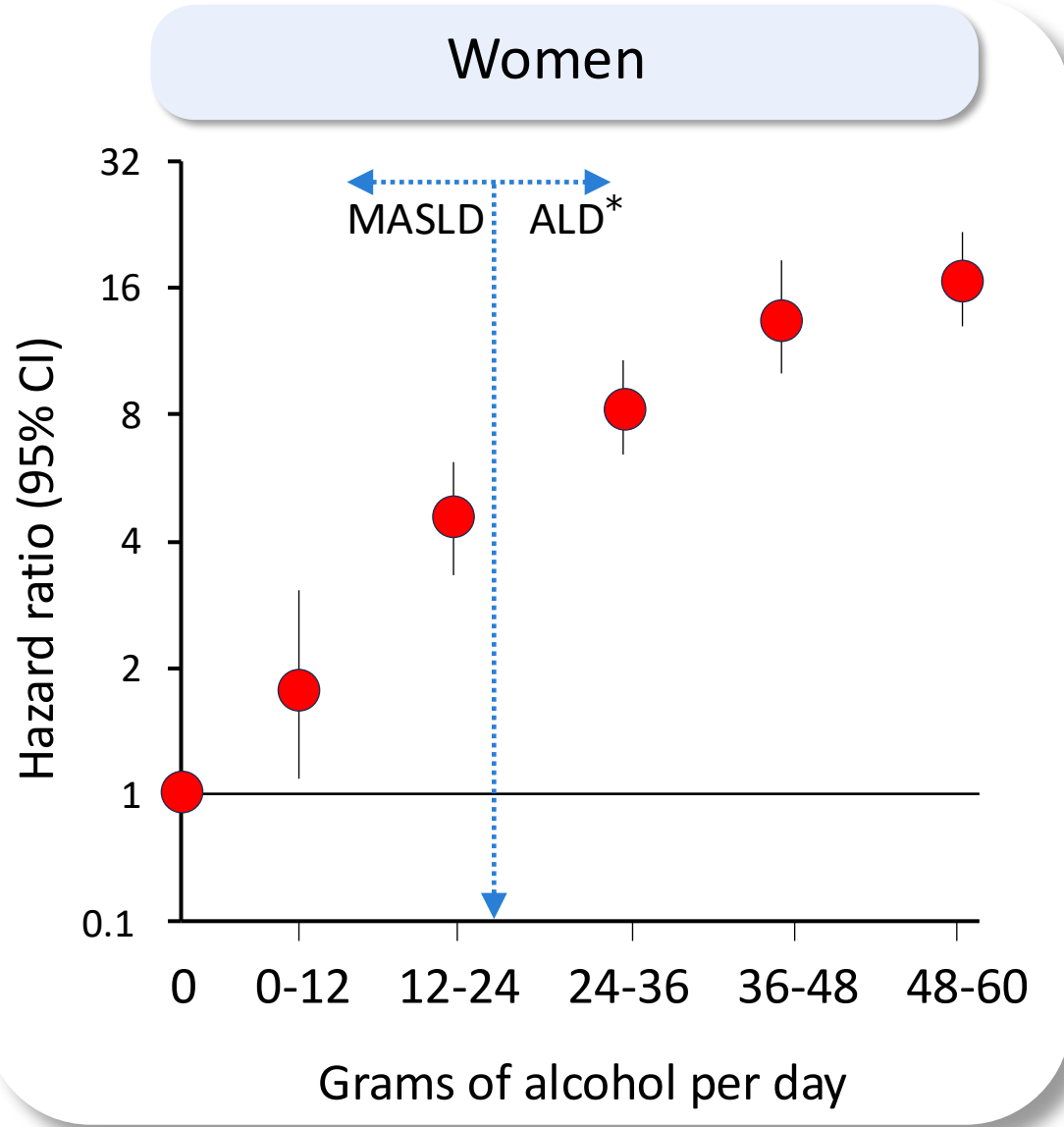
\*) progression, recompensation, survival

# Interaction Between Alcohol and Diabetes in Fatty Liver Disease

Finnish registry study, N ~ 7000. **Outcomes:** Liver-related admissions, mortality, and liver cancer.



# Alcohol Dose and Risk of Cirrhosis: Every Gram Matters



\*) 2023 consensus threshold differentiating MASLD from MetALD

# Biologic Targets of Fatty Liver Disease Therapeutics

Three principal targets: Alcohol craving, Food noise, Lipid Flux and Fibrosis

<b>CNS effects (food noise, reward mechanisms):</b>	<i>FGF21 and GLP-1 agonists</i>
<b>Out-of-control lipid flux and insulin resistance:</b>	<i>FGF21 and GLP-1 agonists</i>
<b>Gut motility:</b>	<i>GLP-1 agonists</i>
<b>Direct antifibrotic effects:</b>	<i>FGF21 agonists</i>
<b>Intrahepatic fat burner:</b>	<i>Resmetirom</i>

# Current Landscape of Fatty Liver Disease Therapeutics



Oral

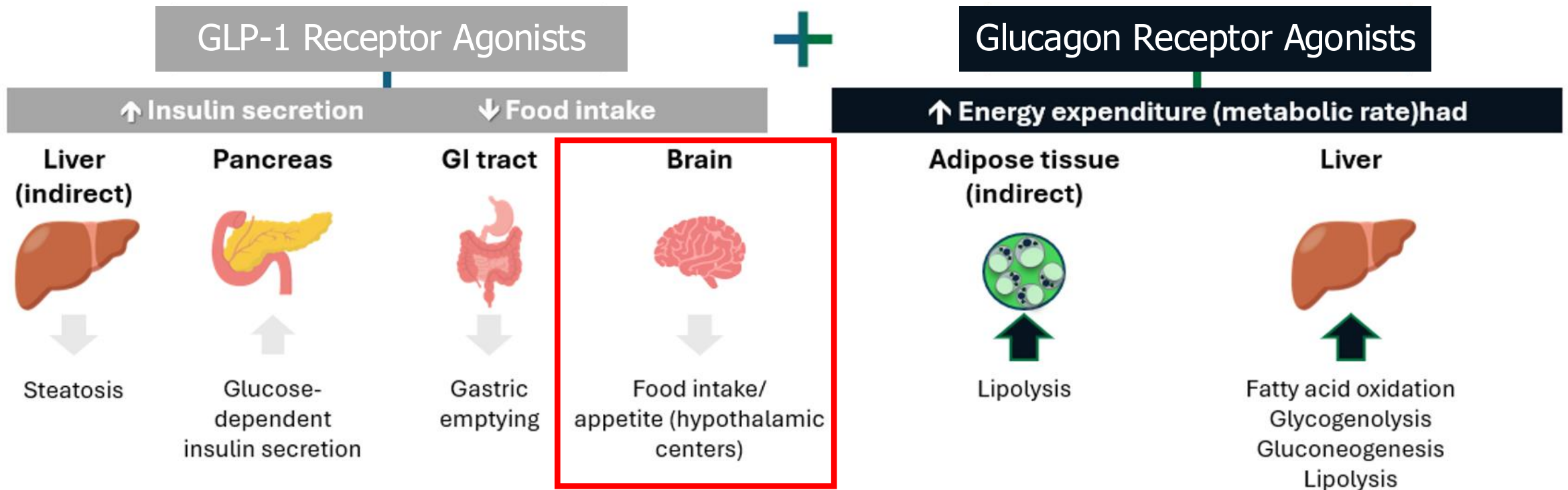
Class	Drug Name	Phase
<b>THR-<math>\beta</math> Agonist</b>	Resmetirom <b>FDA</b>	3
	VK2809	2
	TERN-501	2
<b>PPARs</b>	Lanifibranor (pan-PPAR)	3
	Chiglitizar (pan-PPAR)	2
	Seladelpar (PPAR- $\delta$ )	2
	Saroglitizar (PPAR- $\alpha/\gamma$ )	2
<b>DGAT 2 inhibitor</b>	Ervogastat	2
<b>Acetyl-Co A Carboxylase Inhibitor</b>	Clesacostat	2



Injectable

Class	Drug Name	Phase
<b>Incretins</b> Reduced alcohol craving	Semaglutide (GLP-1) <b>FDA</b>	3
	Survodutide (GLP-1/GCG)	3
	Tirzepatide (GLP-1/GIP) <b>Off-label</b>	2
	Pemvidutide (GLP-1/GCG)	2
	Efinopegdutide (GLP-1/GCG)	2
	Retatrutide (GLP-1/GIP/GCG)	2
	Efocipegtrutide (GLP-1/GIP/GCG)	2
<b>FGF-21</b> Reduced alcohol craving	Efruxifermin	3
	Pegozafermin	3
	Efimosfermin alfa	2
<b>Galactin-3 inhibitor</b>	Belapectin	2b/3

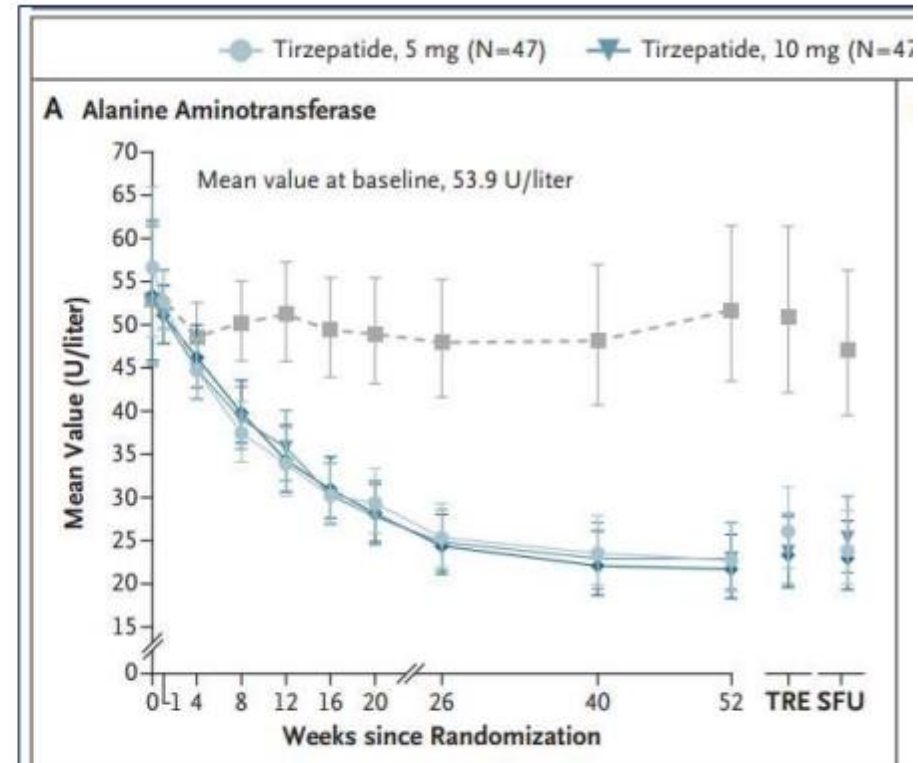
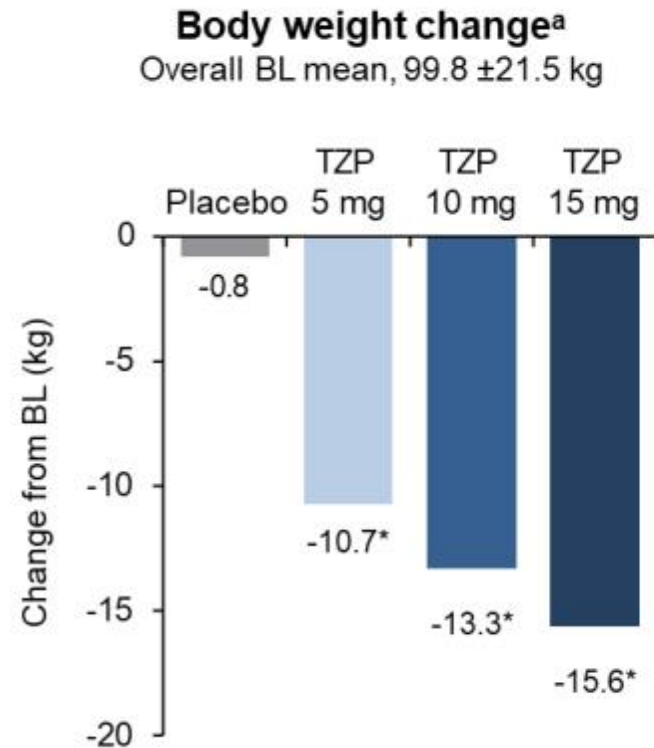
# GLP-1 Agonists Act Beyond the Liver



Administration of dual GLP-1/glucagon receptor agonists resulted in superior weight loss, lower glucose levels and reduced food intake compared with pure GLP-1 receptor agonists alone.

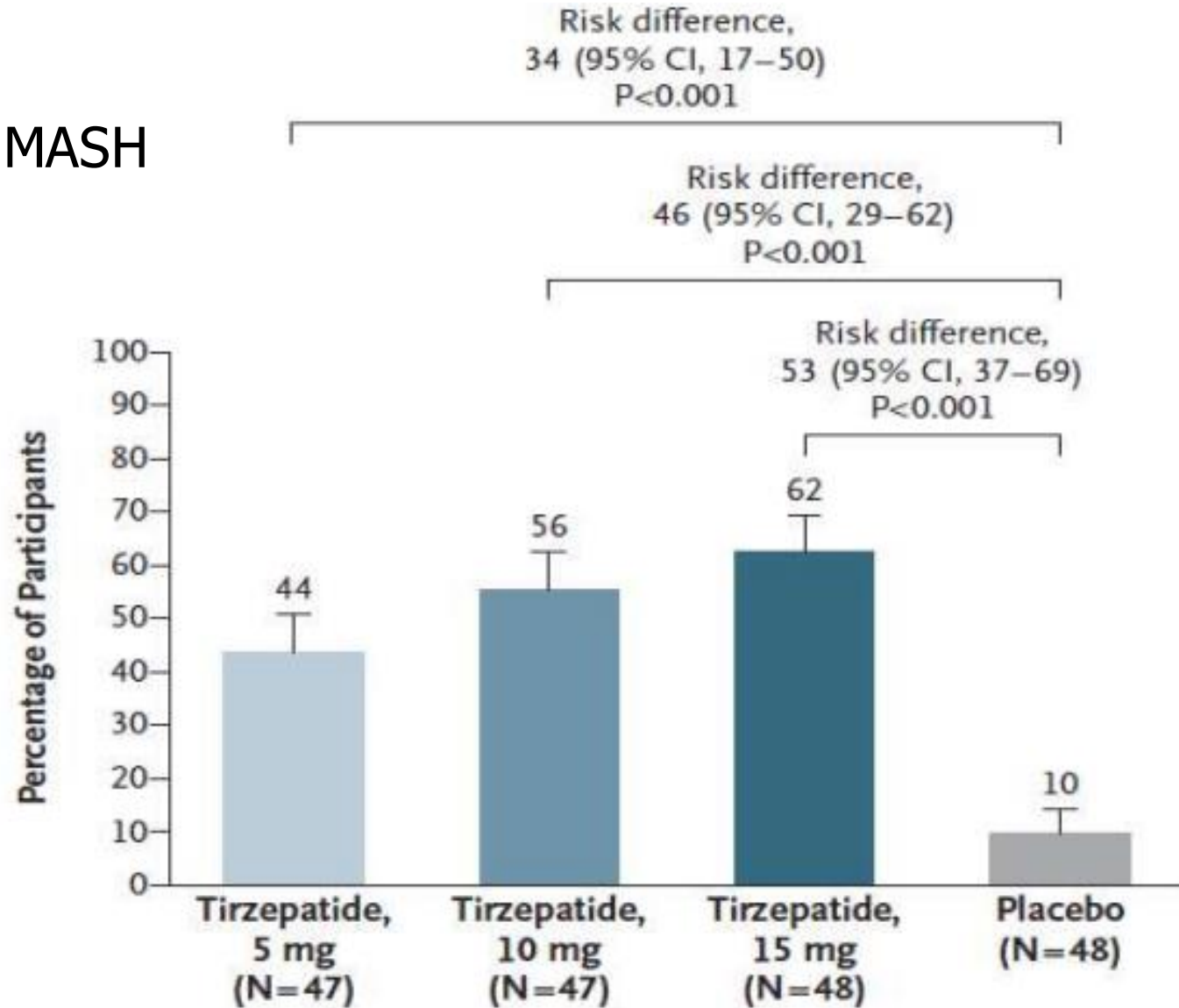
# Tirzepatide, a dual GIP and GLP-1 agonist, in MASH F2-3

## Body weight and liver enzymes



# Tirzepatide, a dual GIP and GLP-1 agonist, in MASH F2-3

## Resolution of MASH

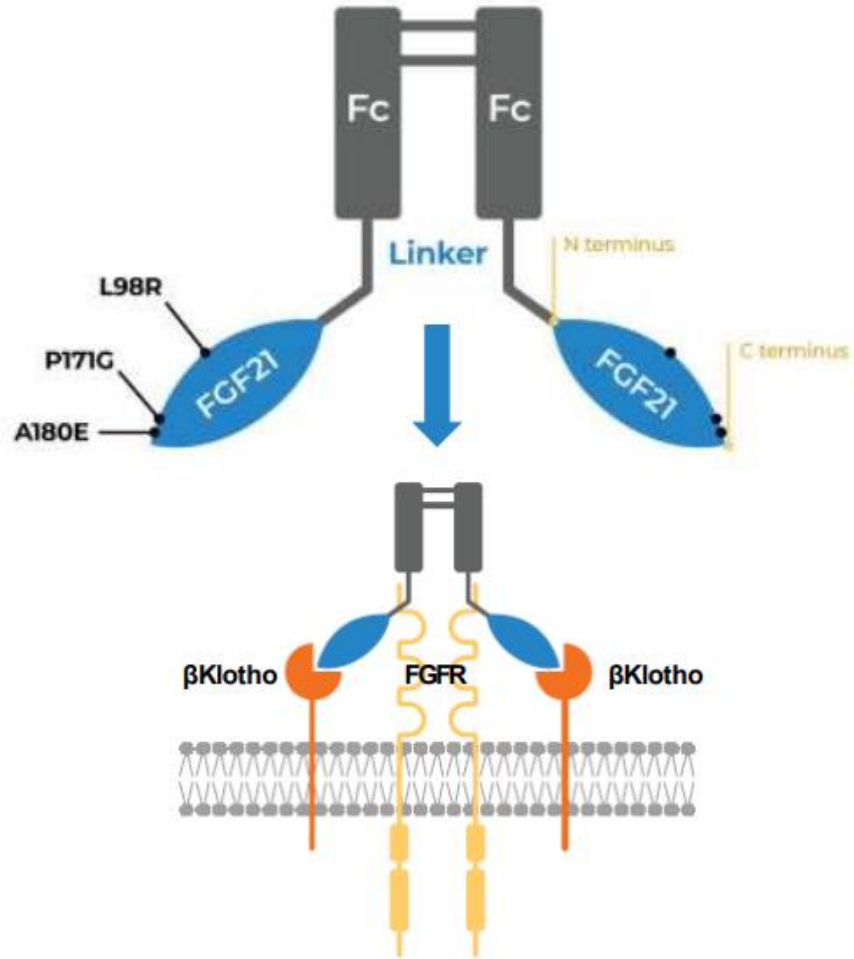


# Tirzepatide and Semaglutide Reduce Alcohol Cravings

153 patients with obesity and concurrent alcohol use.  
Analysis of 68000 social media posts before and after  
the initiation of semaglutide or tirzepatide



# Pegozafermin is an Engineered Bivalent FGF21 Analog



Akero proprietary Fc-FGF21, Point mutations



Increases half-life from < 2 hours to ~3 days



High affinity for  $\beta$ -Klotho



Better translation to **human** pharmacology



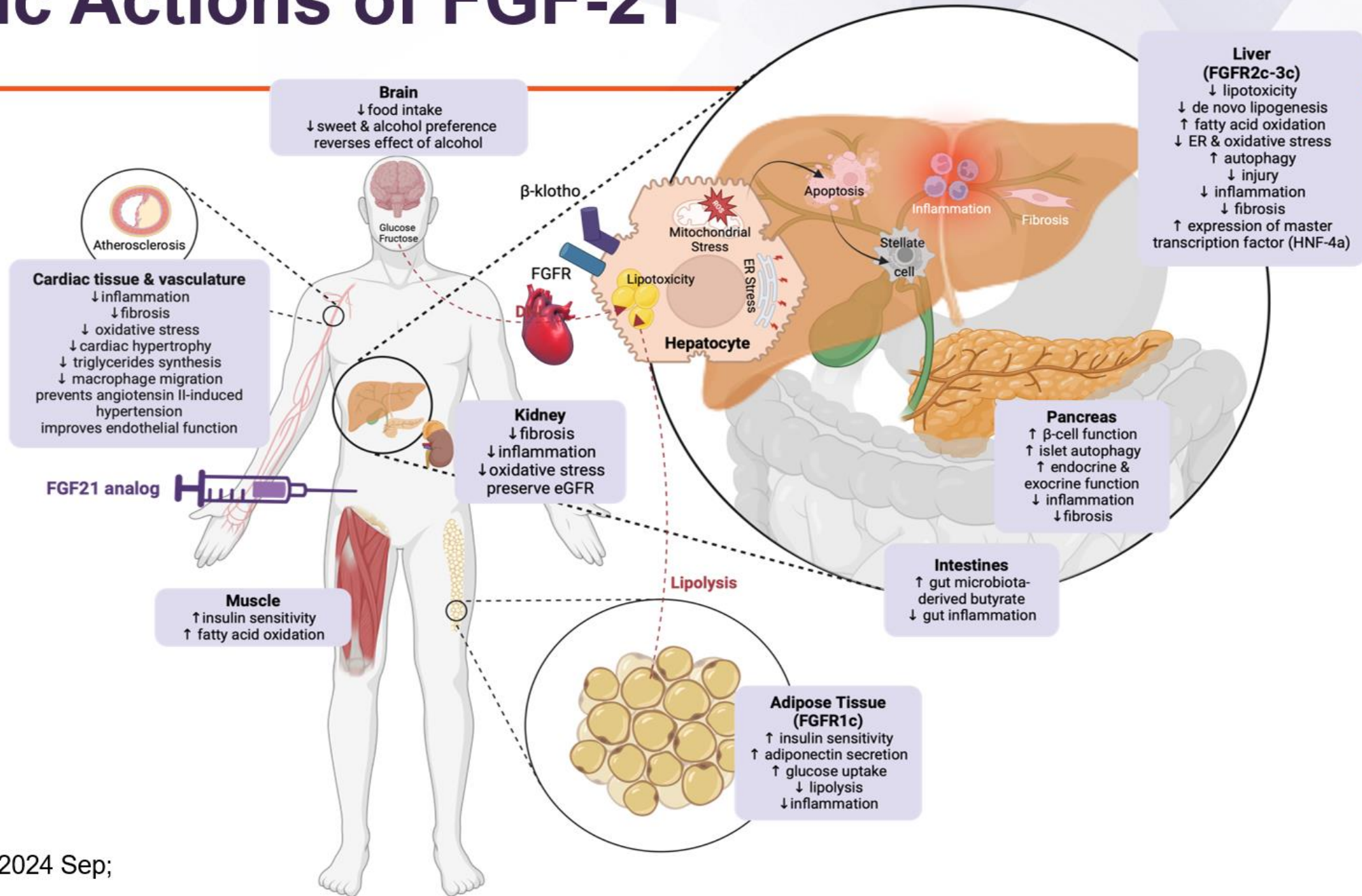
Balanced potency at FGFR1c, 2c, 3c



Inactive at FGFR4

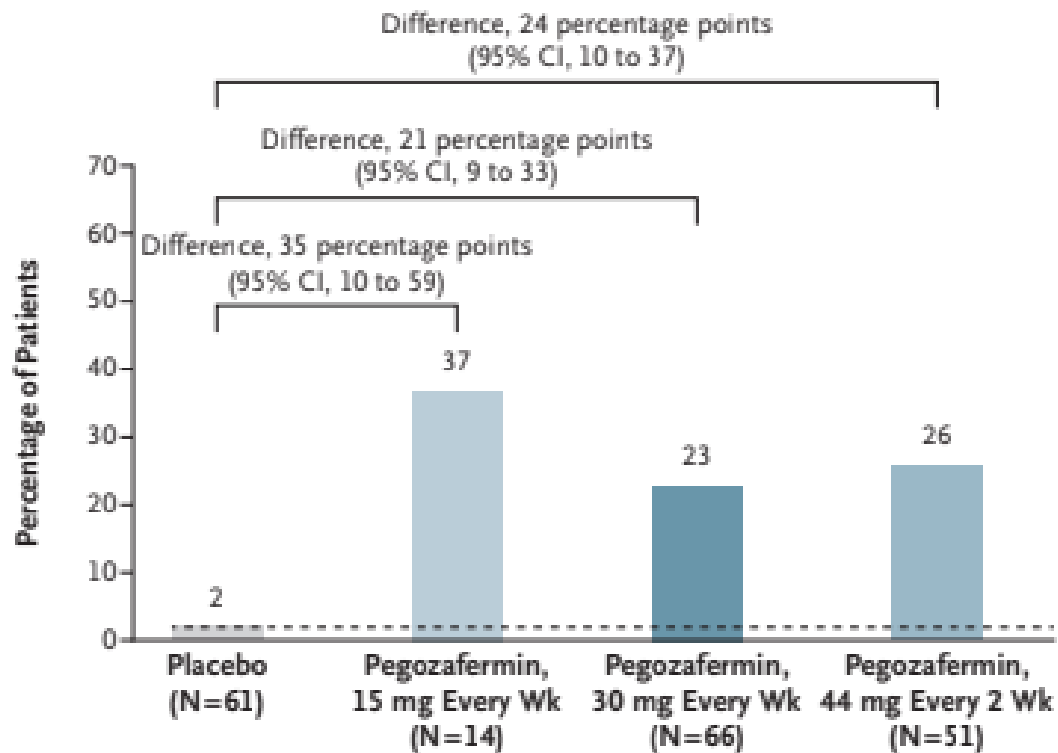
Stanislaus (2017) *Endocrinology*; Lee (2018) *Nature*; Kharitonov (2007) *Endocrinology*.

# Pleiotropic Actions of FGF-21

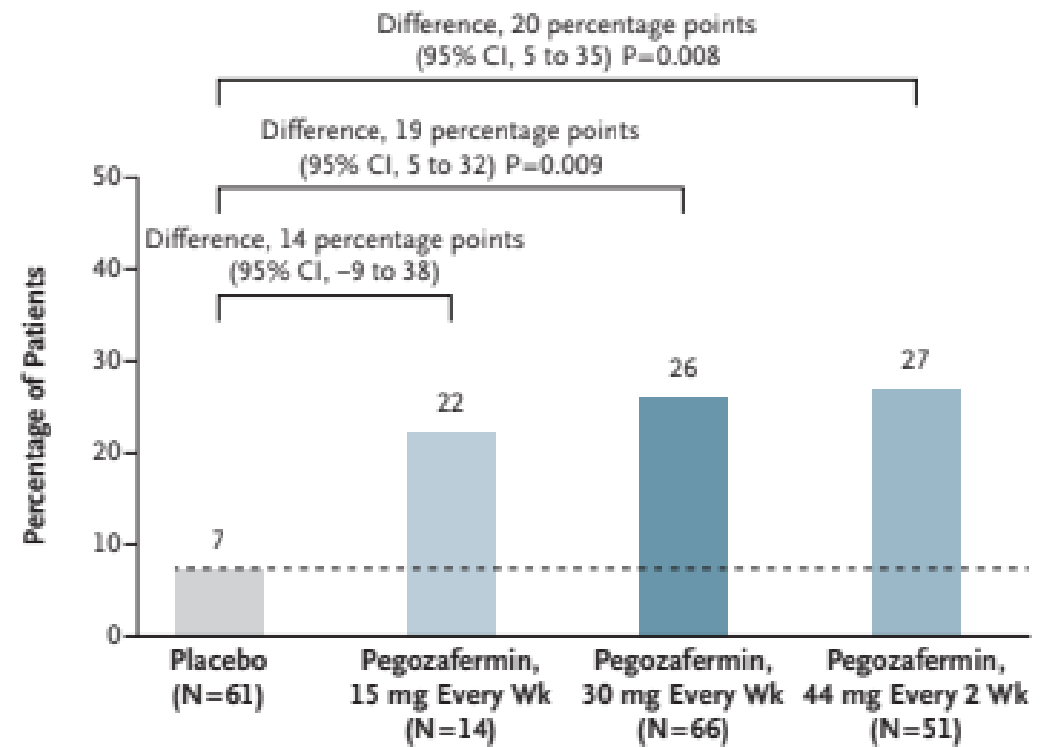


# ENLIVEN Phase 2b Extension Study: Pegzofermin for the Treatment With Fibrosis – Results at 48 Weeks

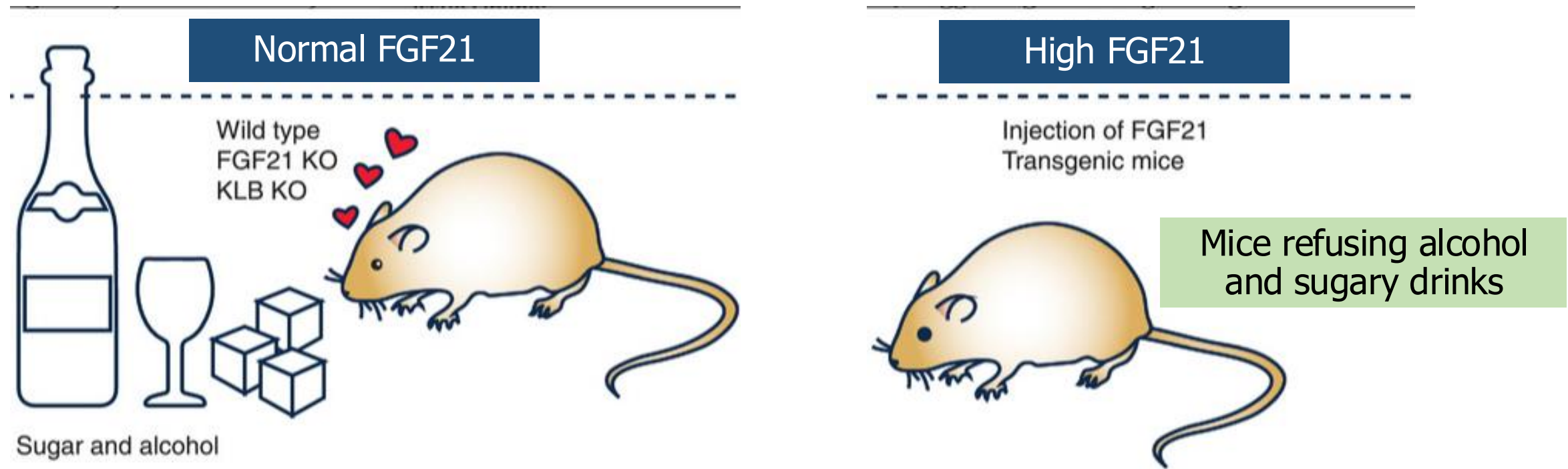
## MASH Resolution



## Fibrosis Improvement by $\geq 1$ stage



# Injected FGF21 Converts Alcohol Preference to Aversion



Hepatocytes make FGF21 in response to fasting and protein restriction. FGF21 signals to the hypothalamus and reward circuits to change dietary preferences from empty calories (sugars, alcohols) to protein-rich diet.

**FGF21 tells your brain: "Enough candy and fermented sugars (i.e. alcohol), your body needs real materials now"**

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