

# Drinking coffee may help prevent advanced liver fibrosis

*Researcher concludes that 2-4 cups of drip coffee daily can help patients with liver fibrosis slow progression to cirrhosis*

PUTNAM VALLEY, NEW YORK, USA, December 15, 2017 /EINPresswire.com/ -- A researcher who reviewed a number of studies investigating coffee consumption and changes in liver enzymes, liver fibrosis and liver cancer in patients with a variety of liver diseases, has concluded that coffee can serve as an antifibrotic agent in the liver. Patients with chronic liver disease could lower their risk of progressing to advanced liver fibrosis by drinking two to four cups of coffee daily. Only drip coffee provided this benefit.

The paper appears in the current issue of *Gene Expression: The Journal of Liver Research* and is currently freely available on-line as an unedited, early epub at: <http://www.ingentaconnect.com/content/cog/ge>

“Coffee is the world’s most widely used drug and favored stimulant,” said study author Jonathan A. Dranoff, MD, of the University of Arkansas for Medical Sciences. “But only recently have studies in animal models provided evidence that coffee can be an antifibrotic agent in the liver.”

Dranoff, who reviewed a number of retrospective studies, cited a 2001 study published in the *Annals of Epidemiology* (2001;11:458-465) that found a single cup of coffee daily lowered the risk for cirrhosis in patients with chronic liver disease to an odds ratio of 0.47. Four cups of coffee lowered the odds ratio to 0.16.

“The benefit appears to be dose-related,” explained Dranoff. “Interestingly, only coffee made by the drip method offers this benefit. Neither Turkish coffee, made by boiling ground coffee beans, nor espresso, made by pressurize hot water, offer this benefit.”

Other caffeine-containing products have not had the same antifibrotic effect, he noted.

What mechanism allows coffee to play an antifibrotic effect? Many reports suggest that adenosine, a chemical that is present in all human cells, may play an important role because caffeine is a known antagonist for adenosine receptors, especially for the adenosine A2a receptor. Liver myofibroblasts express the A2a receptor, said Dranoff, and recent research using animal models of cirrhosis has shown that the direct and indirect markers of liver fibrosis were blocked by caffeine, but not blocked by decaffeinated coffee.

The benefit of coffee in reducing the risk of liver fibrosis appears to be dose-related. In studies, rats were greatly “over dosed” on caffeine to have the effect observed, but the benefit for humans may be realized by drinking two to four cups of drip-made coffee daily, preferably not loaded down with sweeteners.

“There is insufficient evidence that more than four cups of coffee per day would further the benefit,” suggested Dranoff, who also cautions about emerging data that suggests that coffee has been

associated with “all-cause mortality.”

“I propose that two to four cups of coffee should be prescribed to patients with chronic liver disease,” said Dranoff, who suggested patients not drink too much coffee to the point where they feel anxious or “jittery” or lose sleep. “In my practice I ensure that patients stop consuming other caffeine-containing beverages, from coffee-based milkshake-like products, to sodas with caffeine, and “energy drinks” high in caffeine.”

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News release by Florida Science Communications [www.sciencescribe.net](http://www.sciencescribe.net)

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