

Four in 10 U.S. Adults Affected by MASLD

Latino adults have a higher prevalence of MASLD (47%) compared with other racial groups (40%).

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A recent study found that about 42% of U.S. adults have [metabolic dysfunction-associated steatotic liver disease \(MASLD\)](#), formerly known as non-alcoholic fatty liver disease, according to [VCU Health](#).

Often referred to as “silent diseases,” MASLD and its more severe form, metabolic dysfunction-associated steatohepatitis (MASH), are responsible for a growing proportion of advanced [liver disease](#), mirroring a global rise in [obesity](#). MASLD can lead to liver fibrosis, cirrhosis and even [liver cancer](#).

To see how common liver diseases such as MASLD are in U.S. adults, researchers analyzed the health of about 5,500 individuals involved in the National Health and Nutrition Examination Survey. Published in the journal [Nature Communications Medicine](#), the study found that MASLD is more widespread than previously thought, affecting about 4 in 10 adults.

Additionally, the study found that Latino adults have a higher prevalence of MASLD (47%) compared with other racial groups (40%). This represents a significant increase from a 2014 study involving more than 6,800 people that showed a prevalence of 29% among Latinos, according to VCU Health.

Factors such as genetic predisposition, food insecurity and higher rates of diabetes and obesity may lead to a higher prevalence of MASLD in Latinos.

“This study highlights a significant health issue that affects a large portion of the U.S. population, and it shows that certain groups are at a higher risk,” the study’s corresponding author, Juan Pablo Arab, MD, a hepatologist with VCU’s Stravitz-Sanyal Institute for Liver Disease and Metabolic Health, told VCU Health. “We hope these findings will guide more targeted health interventions to

reduce the burden of liver disease, especially in high-risk communities.”

Although there are [many candidates in the pipeline](#), numerous experimental MASLD medications that looked promising in early studies have not proved effective in larger clinical trials.

With no effective approved medical therapies, management of the disease depends on lifestyle changes such as weight loss and exercise. Regular monitoring and medical management of high blood sugar, abnormal cholesterol and high blood pressure may slow progression of fatty liver disease. Weight-loss medications such as semaglutide (Wegovy) and tirzepatide (Zepbound) may also help. In some cases, bariatric surgery may be an option.

To read more, click [#MASLD](#). There, you’ll find headlines such as “[Low-Income Adolescents Are at Higher Risk for Fatty Liver Disease](#),” “[American Liver Foundation Announces Fatty Liver Disease Education Program](#)” and “[Small Amount of Alcohol Can Raise Risk for People With Fatty Liver Disease](#).”

For more information and support for people living with and at risk for MASLD, please visit [our sister site Hep](#). Hep’s [Basics on MASLD Prevention](#) reads in part:

Lifestyle factors often contribute to the buildup of fat in the liver, and making some changes can help prevent the development of MASLD and MASH.

Maintain a healthy weight. Overweight and obesity are leading risk factors for MASLD. [Body mass index \(BMI\)](#) is a commonly used indicator of healthy weight. A BMI over 25 is considered overweight, and a BMI over 30 is considered obesity. However, some experts think waist circumference and other metrics may be more informative.

Eat a healthy diet. A healthy diet includes all the basic food groups, with a focus on plant-based foods such as fruits, vegetables and whole grains. Keep processed meats, saturated fats and added sugar and salt to a minimum.

Limit alcohol intake. Alcohol is a liver toxin. [Dietary Guidelines for Americans](#) recommend no more than one drink per day for women or two drinks per day for men. A standard-sized drink is equivalent to a 12-ounce bottle of beer, a 5-ounce glass of wine or 1.5 ounces (about a shot) of distilled spirits. Many experts advise that people with liver disease should not drink any alcohol.

Exercise regularly. The federal government's [Physical Activity Guidelines for Adults](#) recommend at least 150 minutes of moderate-intensity aerobic activity (e.g., brisk walking) every week and weight training/muscle-strengthening activities that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders and arms) on two or more days a week. Recent research shows that exercising in short intervals is as effective as exercising for larger stretches of time.