**Introduction** Alcohol induced liver disease is the predominant cause of alcohol-related mortality in the UK. Therefore abstinence-based treatments are essential. Upto 70% of patients receiving alcohol treatment relapse within 6 months,1 NICE attribute much of this failure of treatment to underutilisation of pharmacotherapy and recommend this be made available.2 However, current licensed pharmacotherapies are contraindicated for patients with ALD. Baclofen has shown efficacy in the promotion of abstinence in patients with severe alcohol dependence3,4 including those with ALD,5 without exhibiting any of the complications or side effects elicited by current pharmacotherapies. Therefore the primary aim of this study was to measure the effectiveness of Baclofen in maintaining abstinence in this difficult to treat group.

**Methods** An observational prospective clinical audit was performed. Patients with liver disease and concomitant alcohol use were commenced on Baclofen at 10 mg three times daily (TDS), and titrated according to tolerability and response up to 30 mg TDS. Primary outcome measures were severity of physical dependence, as determined by SADQ score, and weekly alcohol consumption. These were compared at baseline, and 6 months.

**Setting** Acute Hospital Trust

**Participants** 149 patients referred to Hepatology for investigation of abnormally liver function and heavy drinking remained engaged in treatment for 6 months. There was a significant reduction in alcohol consumption (P < 0.0001) with 81 of the 149 patients (54.3%) maintaining total abstinence, 20 (13.4%) continued to drink (48 (32.2%) were lost to follow-up and assumed to be in a nondonor alcoholic state. There was a significant reduction in alcohol consumption (P < 0.0001) with 81 of the 149 patients (54.3%) maintaining total abstinence, 20 (13.4%) continued to drink and 48 (32.2%) were lost to follow-up and assumed to be in a nondonor alcoholic state. Therefore the primary aim of this study was to measure the effectiveness of Baclofen in maintaining abstinence in this difficult to treat group.

**Results** Of the 149 patients commenced on Baclofen 100 (67.1%) remained engaged in treatment for 6 months. There was a significant reduction in alcohol consumption (P < 0.0001 95% CI for difference 18 to 20) with 81 of the 149 patients (54.3%) maintaining total abstinence, 20 (13.4%) continued to drink and 48 (32.2%) were lost to follow-up and assumed to have returned to drinking. There was a significant reduction in the presence of physical dependence (c² = 77.4 P < 0.0001) as categorised by SADQ, and a non-significant improvement of liver biochemistry.

**Conclusion** Baclofen has a positive impact on alcohol consumption in this very difficult to treat, high risk patient group. A RCT is needed to confirm the benefit of baclofen in this patient group.

**Disclosure of Interest** None Declared.