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New U.S. alcohol use disorder diagnoses rose 36.3% between 2016 and 2025

The increase spiked in 2023, when revised alcohol-related diagnosis codes may have helped drive the surge

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New diagnoses of alcohol use disorder and alcohol-associated liver disease increased in the United States between 2016 and 2025, according to a large analysis released Thursday, November 19, by Epic Research.

The study examined health records for 196,522,676 adults age 18 and older who received care during the period. It found that the annual incidence of a first diagnosis of alcohol use disorder rose 36.3%, from 543.1 per 100,000 adults in 2016 to 740.5 in 2025. New diagnoses of alcohol-associated liver disease rose 20.6%, from 80.2 to 96.7 per 100,000.

Epic Research said the rise in alcohol use disorder was especially pronounced in 2023. After staying relatively stable from 2016 through 2022, the annual incidence increased 20.2% in 2023 alone, climbing from 577.2 to 693.6 per 100,000 adults. The report said part of that jump may reflect changes in diagnosis coding for alcohol-related conditions that took effect in late 2022, rather than a clear change in underlying incidence.

The findings add to a broader picture of alcohol-related harm in the United States. Epic Research noted that alcohol use disorder is estimated to affect 27.9 million people nationwide, and that alcohol-associated liver disease deaths roughly doubled between 1999 and 2022, based on previously published research. At the same time, survey data cited in the report showed that the share of U.S. adults who said they had recently consumed alcohol fell to 54% in 2025 from 62% in 2023.

The report found that men continued to have much higher diagnosis rates than women throughout the decade. Rates of both alcohol use disorder and alcohol-associated liver disease in men were more than twice those in women every year studied. But women saw faster relative growth. New alcohol use disorder diagnoses increased 42.6% among women, compared with 30.0% among men. New alcohol-associated liver disease diagnoses increased 29.2% among women, compared with 13.3% among men.

Even with that faster growth among women, men still had the larger absolute increase in diagnoses. For alcohol use disorder, the rate for men increased by 250.2 per 100,000 over the period, compared with 145.4 per 100,000 for women.

Across age groups, the pattern differed between the two conditions. New alcohol use disorder diagnoses increased in every generation included in the analysis. The Silent Generation, defined in the report as people born from 1928 to 1945, saw a 54.3% increase. Rates also rose 32.3% among Baby Boomers and by roughly 30% among both Generation X and Millennials.

Alcohol-associated liver disease did not follow the same pattern. Diagnoses increased sharply among Generation X and Millennials but stayed flat or declined slightly in the oldest generations. Epic Research said older age is already an established risk factor for alcohol-associated liver disease, and that part of the increase among younger and middle-aged adults may reflect people aging into years of higher risk over the course of the decade, not necessarily a direct increase in each person's risk.

Generation Z posted the largest relative increase in alcohol use disorder diagnoses, up 56.6%. But the report said that group started from a low base and was only beginning to enter adulthood during the study period. For alcohol-associated liver disease, the rate among Generation Z rose from 1.3 per 100,000 in 2017 to 16.2 in 2025, but the condition remained uncommon in that group.

The analysis was based on Cosmos, Epic's large health data set built with participating health systems. Epic said the database includes more than 300 million patient records from 2,200 hospitals and more than 50,000 clinics across all 50 states as well as Canada, Lebanon and Saudi Arabia. For this study, researchers limited the sample to U.S. adults whose most recent residence was in the United States and who were considered active patients in a given year.

The study counted only the first qualifying diagnosis for each patient during the 2016-2025 period. Alcohol use disorder was identified through ICD-10-CM code F10, excluding remission codes, and alcohol-associated liver disease through ICD-10-CM codes K70.0 to K70.4.

The authors also stressed several limits to the data. The rates are crude, not age-standardized, so changes over time may partly reflect shifts in the age and sex makeup of the patient population. The denominator is made up of adults who sought care, not the general public. Diagnosis-based measures also capture when a condition is first formally recorded, not when it actually began, which is especially important for chronic liver disease that can develop over years before being coded in a medical record.

Epic Research said rising diagnosis rates could also reflect increased screening, more intensive coding and changes in health care use, rather than a pure increase in disease incidence. That caution is especially important for the sharp change seen in alcohol use

disorder diagnoses beginning in 2023, after revisions to alcohol-related ICD-10-CM codes took effect on October 1, 2022.

Even with those caveats, the scale of the analysis is likely to draw attention from health officials, clinicians and the beverage industry. The findings could shape prevention efforts and responsible-drinking messaging for beer, wine and spirits companies, and they may add to debate over how alcohol-related risks are discussed with consumers and addressed in public health policy.

Epic said two independent teams, each made up of a clinician and a research scientist, completed the study and reached similar conclusions.