

High rates of liver disease progression and mortality observed in patients with NAFLD/NASH

11 April 2019

Two independent national studies have reported high rates of liver disease progression and mortality among patients with non-alcoholic fatty liver disease/non-alcoholic steatohepatitis (NAFLD/NASH). The studies reported today at The International Liver Congress 2019 in Vienna, Austria, found that within 10 years of diagnosis, up to 11% of patients with NAFLD/NASH had progressed to advanced liver diseases (defined as NAFLD/NASH patients with compensated cirrhosis [CC], decompensated cirrhosis [DCC], liver transplant [LT] or hepatocellular carcinoma [HCC]), and up to 27% of patients with NAFLD/NASH and CC had developed liver decompensation.

Fatty liver is a complex condition that affects up to one-quarter of adults worldwide. The condition is considered to be the liver manifestation of metabolic syndrome and encompasses a histological spectrum from the relatively benign non-alcoholic fatty liver to NASH, which typically has an aggressive course. NAFLD/NASH can lead to cirrhosis or HCC, and is set to become the predominant cause of liver disease in many parts of the world; however, their [natural history](#) remains incompletely defined.

In the first study, 215,655 NAFLD/NASH [patients](#) were identified retrospectively from a German insurance claims database (InGef; 2011-2016) with 100,644 new events of different liver severity stages identified during the follow-up: 79,245 events (78.7%) of non-progressive NAFLD/NASH, 411 events (0.4%) of CC, 20,614 events (20.5%) of DCC, 11 events (0.01%) of LT and 363 events (0.4%) of HCC. Amongst those with advanced liver diseases, mortality rate during 1 year of follow-up increased by up to 50% (range 8.8-51.2%), compared with non-progressive NAFLD/NASH patients (1.2%, p

APA citation: High rates of liver disease progression and mortality observed in patients with NAFLD/NASH (2019, April 11) retrieved 18 June 2021 from <https://medicalxpress.com/news/2019-04-high-liver-disease-mortality-patients.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.