

International Conference on
GASTROINTESTINAL CANCER AND THERAPEUTICS

4th World Congress on
DIGESTIVE & METABOLIC DISEASES

26th Annual Congress on
CANCER SCIENCE AND TARGETED THERAPIES

October 29-30, 2018 | San Francisco, USA

NASH: The increasing trend among the causes of liver cirrhosis

Ayfer Serin

Şişli Florence Nightingale Hospital, Liver Transplantation Unit, Turkey

While the global prevalence of liver cirrhosis is not exactly known, the prevalence in the United States is found to be in 0.15% to 0.27% of the population. Approximately 25% of the population of countries such as England, France, Italy, Spain, and Finland is categorized as obese, and people diagnosed with type 2 diabetes and non-alcoholic fatty liver disease (NAFLD), as well as other diseases resulting from metabolic syndrome, are increasing in frequency with time. Ten-to-15% of NAFLD patients develop inflammation and fibrosis, which may eventually progress to cirrhosis and hepatocellular carcinoma (HCC). Liver cirrhosis is an important cause of morbidity and mortality in the United States. The curative treatment for liver cirrhosis is liver transplantation. Since 2004, our center has seen an increase in the proportion of non-alcoholic steatohepatitis (NASH)-related liver cirrhosis transplant recipients compared to patients with etiological causes. This implies an increase in the incidence of NASH and NASH-related diseases, including HCC in our population. While in 2009 NASH-related liver cirrhosis patients comprised 4% of the total transplant recipients at our center, in 2017 this rate has risen up to 20%. Together with this 5-fold increase, the patients with other primary etiologies of liver cirrhosis, such as hepatitis B, C, and autoimmune hepatitis, have been found to have relatively high HOMA-IR index values, showing the presence of a metabolic disorder in these patients. At the same time, the mean average BMI of the transplant patients has increased over the years. Unfavorable developments in modern nutrition are thought to play a role in the impairment of normal metabolism and deterioration of condition in such patients. Independently of the etiology, detection and prevention of underlying metabolic disorders are important in end-stage liver cirrhosis patients.

Biography

Ayfer Serin, Internal Medicine Specialist and Gastroenterologist, has graduated from Trakya University School of Medicine in 1995. Between 1998 and 2002 she has completed the residency in gastroenterology at Dokuz Eylul University, and as a specialist gastroenterologist between 2006 and 2011 in several leading government and university hospitals in Turkey. From 2011 and 2016 she has worked as a faculty physician at Ege University School of Medicine. In 2014, she gained experience as an observer at Johns Hopkins University Hospital, Liver Transplantation Department. Since 2016, she has been working at Şişli Florence Nightingale Hospital Liver Transplantation Unit as a staff gastroenterologist and hepatologist. Her primary interests include liver diseases, viral hepatitis B and C diseases, liver cirrhosis, liver neoplasms, NASH, liver transplantation, living-donor evaluation, preparation, and treatment.

ayferserin@gmail.com

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