

Better methods needed for predicting risk of liver disease

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Hannes Hagström, associate professor at the Department of Medicine, Karolinska Institutet (Solna and Huddinge), Sweden. Credit: Ulf Sirborn

While blood samples can reliably identify people with a low risk of developing severe liver disease, better methods are needed in primary

care for identifying people in most need of care. These are some of the conclusions of a large registry-based study by researchers at Karolinska Institutet in Sweden published in the esteemed journal *Gastroenterology*.

Fatty liver is a common condition, associated primarily with type 2 diabetes and obesity, in which fat accumulates in the liver. Some people with fatty liver will develop cirrhosis of the liver or [liver cancer](#), but it is hard to identify these individuals in time. Different scoring systems are currently used where the risk of liver disease is estimated by using clinical parameters and blood tests, enabling doctors to identify people with advanced liver fibrosis. However, it is unclear how good these systems are at predicting the risk of severe liver disease in the general population.

The researchers behind the present study sourced the AMORIS cohort, which contains blood sample data from over 800,000 people who had been examined during health checkups and in [primary care](#) in Stockholm between 1985 and 1996. Scores from various blood-based scoring systems were cross-referenced with national registries to identify people who developed severe liver disease up to 27 years later.

Their results show that although there is a clear link between the scores on some of the examined scoring systems and the risk of liver disease, the general reliability of the methods is only moderate. The scoring systems were more effective for people with known [risk factors](#) for [fatty liver](#), such as type 2 diabetes, than they were for people without known risk factors. The researchers also found that the risk of developing severe liver disease was very low in people with normal scores in the examined scoring systems.

"The results could be used to identify people at a very low risk of developing liver disease in the future, thus avoiding the unnecessary provision of care," says the study's corresponding author Dr. Hannes

Hagström, hepatologist at Karolinska University Hospital in Sweden and associate professor at the Department of Medicine, Karolinska Institutet (Solna and Huddinge). "That said, new methods are needed to find people in the [general population](#) at a particularly high risk of developing severe liver disease and requiring medical treatment."

More information: Hannes Hagström et al. Ability of Noninvasive Scoring Systems to Identify Individuals in the Population at Risk for Severe Liver Disease, *Gastroenterology* (2019). [DOI: 10.1053/j.gastro.2019.09.008](#)

Provided by Karolinska Institutet

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