

Study reveals MASLD, MetALD responsible for one-third of ICU cirrhosis cases

August 6 2024, by Lori Solomon



Metabolic dysfunction-associated steatotic liver disease (MASLD)-related and metabolic and alcohol-related liver disease (MetALD)-related cirrhosis is responsible for one-third of cirrhosis cases seen in the intensive care unit (ICU), according to a study published online July 22 in *Alimentary Pharmacology and Therapeutics*.



Philippe Sultanik, M.D., Ph.D., from Sorbonne Université in Paris, and colleagues assessed the prevalence of MASLD-related cirrhosis in the ICU (January 2019 to September 2021) among 315 patients (39 with MASLD, 160 with alcohol-related liver disease [ALD], and 116 with MetALD cirrhosis).

The researchers found that patients in the MASLD group were significantly older (65 years versus 57 and 59 years, respectively) and had lower Child-Pugh (8 versus 11 and 10, respectively) and Model for End-Stage Liver Disease scores (17 versus 22 and 21, respectively). There were no differences in one-year transplant-free survival between the groups (53% versus 54 and 54%, respectively).

All groups had cardiovascular mortality of less than 5%. The MASLD group had a significantly higher one-year probability of developing hepatic encephalopathy (73% versus 27 and 21%, respectively).

"MASLD or MetALD was responsible for one-third of the causes of cirrhosis in the ICU," the authors write. "MASLD-related cirrhosis is as severe as ALD-related cirrhosis. Liver transplantation should be rapidly discussed."

More information: Philippe Sultanik et al, Prevalence and prognosis of patients with MASLD-related cirrhosis after an ICU hospitalization in France: A single-centre prospective study, *Alimentary Pharmacology & Therapeutics* (2024). DOI: 10.1111/apt.18165

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Citation: Study reveals MASLD, MetALD responsible for one-third of ICU cirrhosis cases (2024, August 6) retrieved 12 September 2024 from https://medicalxpress.com/news/2024-08-reveals-masld-metald-responsible-icu.html



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