

Frailty tied to liver transplant wait-list mortality in cirrhosis

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ascites or HE died while on the wait list. Ascites (subhazard ratio [sHR], 1.52), HE (sHR, 1.84), and frailty (sHR, 2.38) were all associated with wait-list mortality. However, in adjusted models, only frailty remained significantly associated with wait-list mortality (sHR, 1.82).

"LFI scores can be used to objectively quantify risk of death related to [frailty](#)—in excess of liver disease severity—in patients with cirrhosis," the authors write.

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(HealthDay)—In patients with cirrhosis, frailty is more frequently observed in those with ascites or hepatic encephalopathy (HE) and is independently associated with liver transplant wait-list mortality, according to a study published online Jan. 19 in *Gastroenterology*.

Jennifer C. Lai, M.D., from the University of California-San Francisco, and colleagues evaluated 1,044 adults without [hepatocellular carcinoma](#) who were on the liver transplant wait list at nine U.S. centers. For the evaluation, the researchers used the Liver Frailty Index (LFI), which uses data from grip strength tests, timed chair stands, and balance tests.

The researchers found that 36 percent of [patients](#) had ascites, 41 percent had HE, and 25 percent were frail. The odds of frailty were higher for patients with ascites (adjusted odds ratio, 1.56) or HE (adjusted odds ratio, 2.45) versus patients without these features. Compared with nonfrail patients, higher proportions of frail patients with

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