

Patients with Cirrhosis  
2/25/18

We commonly see patients with advanced liver disease in the Emergency Department, and we screen all of them for 5 common complications, every time. You'll see chronic liver disease more often than you'll see acute liver failure, so it will be helpful to know how to recognize, diagnose, and treat these common conditions when you see them on your clerkship.

## 2 complications related to **Organ Failure** (Kidneys and Brain)

1. Hepatorenal Syndrome
  - a. Hx: not urinating much
  - b. Labs: elevated Creatinine
  - c. Tx: admit to hospital
2. Hepatic Encephalopathy
  - a. Normally: Liver clears waste from the body (ammonia)
  - b. Diseased liver: cannot clear waste – Ammonia accumulates
  - c. Dx: elevated Ammonia level
  - d. Tx: **Lactulose** (binds ammonia, excreted)
  - e. Tx: **Rifaximin** (treats bacteria producing ammonia)

## 2 complications related to **Portal Hypertension**

1. Varices
  - a. Dilated veins in upper GI tract
  - b. Sx: hepatic encephalopathy, melena
  - c. Tx: **Proton pump inhibitor** (ex. Pantoprazole)
  - d. Tx: **Octreotide**
  - e. Tx: **Antibiotics**
  - f. (Tx: Blakemore tube – balloon tamponade)
2. Ascites with Spontaneous Bacterial Peritonitis
  - a. Abdominal pain + Abdominal tenderness + Fever
  - b. Diagnostic paracentesis – remove fluid to send to the lab
  - c. Dx: >250 neutrophils, High protein, Low glucose
  - d. Tx: **Antibiotics + ALBUMIN**

## 1 complication related to **Liver Failure**

1. Coagulopathy
  - a. Dx: Coags