

Chronic Hepatopathy (chronic liver failure)

What is chronic hepatopathy?

Chronic hepatopathy means there is long term damage to the liver which affects the liver's ability to function normally. The liver is very complex and is involved in many functions including:

- Detoxification including the breakdown of drugs.
- Production of clotting factors which help your body stop bleeding.
- Absorption and digestion of nutrients.
- Production of bile which helps with absorption of fats and vitamins.
- Storing glucose in the form of glycogen so it can be released when required.

Altered function can result in accumulation of 'toxic' substances in the blood stream, increased tendency to bleed, reduced blood protein levels, reduced ability to absorb nutrients and other problems.

Liver failure usually occurs when 75% or more of the liver is affected. There are many different causes including chronic bacterial infections, long term exposure to toxins, chronic inflammation, cancer, autoimmune disease, increased storage of heavy metals such as copper and others.

Signs and symptoms

Some of the most common symptoms include increased thirst and urination, a distended abdomen (due to fluid accumulation called ascites), vomiting, diarrhoea, reduced appetite, jaundice (yellow skin or gums), altered behaviour (neurological signs), muscle wastage and weight loss.

Diagnosis

Liver failure is diagnosed with blood tests, but further investigations are required to determine the cause and confirm this finding. These may include diagnostic imaging (ultrasound or computed tomography), urine samples and liver biopsy.

Liver biopsies can be obtained surgically, sometimes through keyhole surgery or ultrasound guided 'trucut' biopsy (where a large wide bore needle is inserted into the liver).

Treatment for chronic hepatopathy

Some treatments will depend on the underlying cause but a lot of the treatments for managing liver failure are similar, including:

- Dietary modification to reduce protein and some minerals as well as providing adequate calorie intake.

- Management of abdominal fluid. This may include diuretic medication to reduce fluid in the abdomen or draining of the fluid.
- Management of neurological signs, if toxins build up (known as hepatic encephalopathy) with medication such as lactulose.
- Supportive treatment for the gut.
- Liver support such as antioxidants.
- Anti-inflammatories such as steroids.

Some medication may be more specific such as copper binding drugs, where copper accumulation causes liver damage.

The prognosis

The prognosis can vary depending on the underlying cause and often, the disease is already severe when symptoms develop. A cure is rarely achieved, and management is often difficult but if caught and treated early, longer survival times and more importantly a good quality of life may be achieved.