Prognosis

The success of liver transplantation has revolutionized the approach to liver cirrhosis. Liver failure and cirrhosis are indications for transplantation. Careful monitoring of the child's condition and quality of life are necessary to evaluate the need for and timing of transplantation.

Nursing Care Management

Several factors influence nursing care of the child with cirrhosis, including the cause of the cirrhosis, the severity of complications, and the prognosis. The prognosis is often poor unless successful liver transplantation occurs. Therefore, nursing care of the child is similar to that for any child with a life-threatening illness (see Chapter 17). Hospitalization is required when complications such as hemorrhage, severe malnutrition, or hepatic failure occur. Nursing assessments are directed at monitoring the child's condition, and interventions are aimed at treatment of specific complications. If liver transplantation is an option, the family needs support and assistance to cope (see Family-Centered Care box).

Family-Centered Care

End-Stage Liver Disease

In many cases, the child with liver disease and the family must cope with an uncertain progression of the disease. The only hope for long-term survival may be liver transplantation.

Transplantation can be successful, but the waiting period may be long because there are many more children in need of organs than there are donors. The procedure is expensive and is performed only at designated medical centers, which are often far from the family's home. The nurse should recognize the unique stresses of coping with end-stage liver disease and waiting for transplantation and assist the family in coping with these stressors. The assistance of social workers and support from other parents can be beneficial.

Biliary Atresia

Biliary atresia (BA), or extrahepatic biliary atresia (EHBA), is a