

## University Health Network

Toronto General Hospital Toronto Western Hospital Princess Margaret Hospital

TO:  
Lo, Jason Hang-Tat  
FAX: 9054800898

FAX ID: LA136434

DATE/TIME: 8 Dec 20 2202

MESSAGE:  
Liver Clinic History and Physical

NUMBER OF SHEETS:  
Page 1 of 5

FROM:  
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Dr. Lo, Jason Hang-Tat

3000 Highway 7 East, Ste. 202  
MARKHAM, ON L3R 6E1

NAME: Welcome, Judy Ann  
DOB: 27 Feb 1971  
MRN: 3988568  
VISIT: 5000240008  
LOCATION: TG-Liver Clinic

### UHN LIVER CLINIC HISTORY AND PHYSICAL

DATE OF ASSESSMENT: Tue, 13 Oct 2020  
ASSESSED BY: Mai Kilany, MD  
CC FAMILY PHYSICIAN:  
CC UNLISTED MD:  
CC (CMD): Sindhu R. Johnson, MD  
Jason Hang-Tat Lo, MD

### GENERIC INFORMATION

Age: 49Y Sex: female  
Born in Canada? :no  
Birth region :South America Guyana  
Ethnicity :Latin American,  
Immigration year :1991  
Reason for referral :Autoimmune Hepatitis,

### HISTORY OF PRESENT ILLNESS

First seen in the liver clinic in APR 2014 for elevated transaminases. Referred by Dr Sindhu Johnson who manages patient's scleroderma (diagnosed in 2009). Patient started on azathioprine in 2011 for scleroderma and was on it continuously until AUG 2013 when it was stopped. Transaminases started to rise in SEP 2013. Had been on prednisone from 2011 to JAN 2014 when it was stopped. Scleroderma relapsed in APR 2014 was started on prednisone again. BW OCT 2013: ALT 77, AST 74, Bili 6, INR 0.9, Alb 44, Cr 44, Hb 109, Plt 175, HCV Ab negative, HBsAg negative, HbcAb positive, HBsAb positive, ANA >1:640, SMA <1:20, IgG 21.11, IgM 0.99, IgA 2.35, ceruloplasmin 0.27, ferritin 213, iron sats 0.25. APR 2014: AST 58, ALT 51, Hb 99 (MCV 80), plt 115.

Fibroscan APR 2014: 4.7, DEC 2015: 5.2. May 2017: 7.2. Nov 2018: 8.5  
Increased Imuran to 125 mg in May 2017 - improved ALT/AST  
Sep 2019 - biopsied to clarify if enzyme elevation due to AIH or NASH.  
Biopsy showed no active AIH with clear evidence of NASH and advanced fibrosis F3/4.

Today's visit was conducted virtually due to the COVID-19 Pandemic.  
Patient's identity was confirmed and a verbal consent was obtained to proceed with the virtual visit.

She continues to do well. No new issues or symptoms. She denies symptoms of liver decompensation or upper GI bleeding. Her energy levels and appetite remain well. She continues to take Imuran 125mg alternating with 100 mg. Recently she experienced a heavy menstrual bleeding which lasted for 7 days. I advised her to consult with her family doctor if a referral to OGBYN is needed

Assessment date: Tue, 13 Oct 2020  
Assessed by: Mai Kilany, MD  
Admitted by MD: Feld, Jordan J.

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Recent investigations:

Labs 07-July-2020: Ferritin 44, Creat 45, Fasting glucose 7.2, Cholesterol 4, TSH 0.82, Hb 105, Plt 162, Alb 45, Bil 7, ALT 95, GGT 45, IgG 22.49

US July 2020

Liver measures 16.8 cm, no focal lesions, Mild to moderate fatty infiltration. No HCC and no ascites

Liver Symptoms : None

**VIRAL HEPATITIS RISK FACTORS:**

**MEDICAL/SURGICAL HISTORY:**

Progressive Systemic Sclerosis,

**MEDICATION:**

Medication : Azathioprine  
Dosage Regimen : 125 mg po od  
Start Date : Fri, 25 Apr 2014  
Comment : Increased to 125 mg on Dec 8 2015 - increased to 150 mg Nov 8 2016 - down to 125 in Jun 2017  
  
Medication(2) : Prednisone  
Dosage Regimen : 0mg  
Start Date : 2014  
Comment : Started at 30mg and tapered down to 0mg as of mid July 2014

**OTHER MEDICATIONS:**

Other Medications : Meds Other nexium,  
Other Medications(2) : Calcium Channel Blocker diltiazem,  
Comment : for scleroderma  
Other Medications(3) : Thyroid thyroxine,  
Other Medications(4) : Ventolin: PRN,

**PSYCHIATRIC HISTORY:**

Psychiatric History : None

**SOCIAL HISTORY:**

Marital status : Married  
Sexual orientation : WSM,  
Smoking status : never smoked

**FAMILY HISTORY:**

**PHYSICAL EXAM:**

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Weight (kg) : 0 kg (0 lbs 0 oz)  
Height (cm) : 157 cm (5'2", 62 in)  
Liver Findings : None  
Derm : Normal  
Head & Neck : Normal  
Chest : Normal  
Cardiovascular : Normal  
Gastrointestinal : Normal  
MSK : Normal  
Neuro : Normal

**INVESTIGATION:**

Ultrasound? : yes  
Date of Ultrasound : Oct 2013  
Ultrasound results : Other fatty liver,  
Gastroscopy? : yes  
Date of Gastroscopy : 2013  
Gastroscopy Results : Other hiatus hernia,  
Liver Biopsy? : yes  
Date of Liver Biopsy : Mon, 16 Sep 2019  
Adequate? : yes  
Activity Level : a 2  
Fibrosis : f 4  
Steatosis % : 20 %  
Mallory? : yes  
Ballooning? : yes

**SUMMARY:**

ANA-Pos AIH, NAFL, Biopsy Proven Cirrhosis,

**IMPRESSION:**

A 49 year old woman with biopsy proven NASH cirrhosis and presumed AIH on the background of systemic sclerosis.  
Her liver enzymes in July continue to be elevated but remain stable from April 2020.

Elevated liver enzymes: Most probably due to combination of NASH and ?AIH.  
Her liver enzymes worsens when she is off Imuran.

NASH: Biopsy proven NASH, mainstay of management remains life style modifications through dietary changes and weight bearing exercise targeting 5-7% weight loss. She should avoid excess alcohol and should continue to follow up with her family doctor for optimization of other CVS risk factors including good glycemic control.

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Cirrhosis: early NASH cirrhosis on biopsy. She warrants HCC surveillance q 6 months with US +/- AFP. We may defer EV screening at the time given her fibro scan results show liver stiffness <20 Kpa and her plt >150 .

?AIH: No histological evidence of AIH could be attributed to well controlled disease on Imuran. She continues to take Imuran 125 mg alternating with 100 mg. Would continue on current regimen as her liver enzymes tend to worsen off Imuran. She knows to repeat lab investigations q 3 months

Plan: I will see her back in 6 months with US and repeat labs.

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