

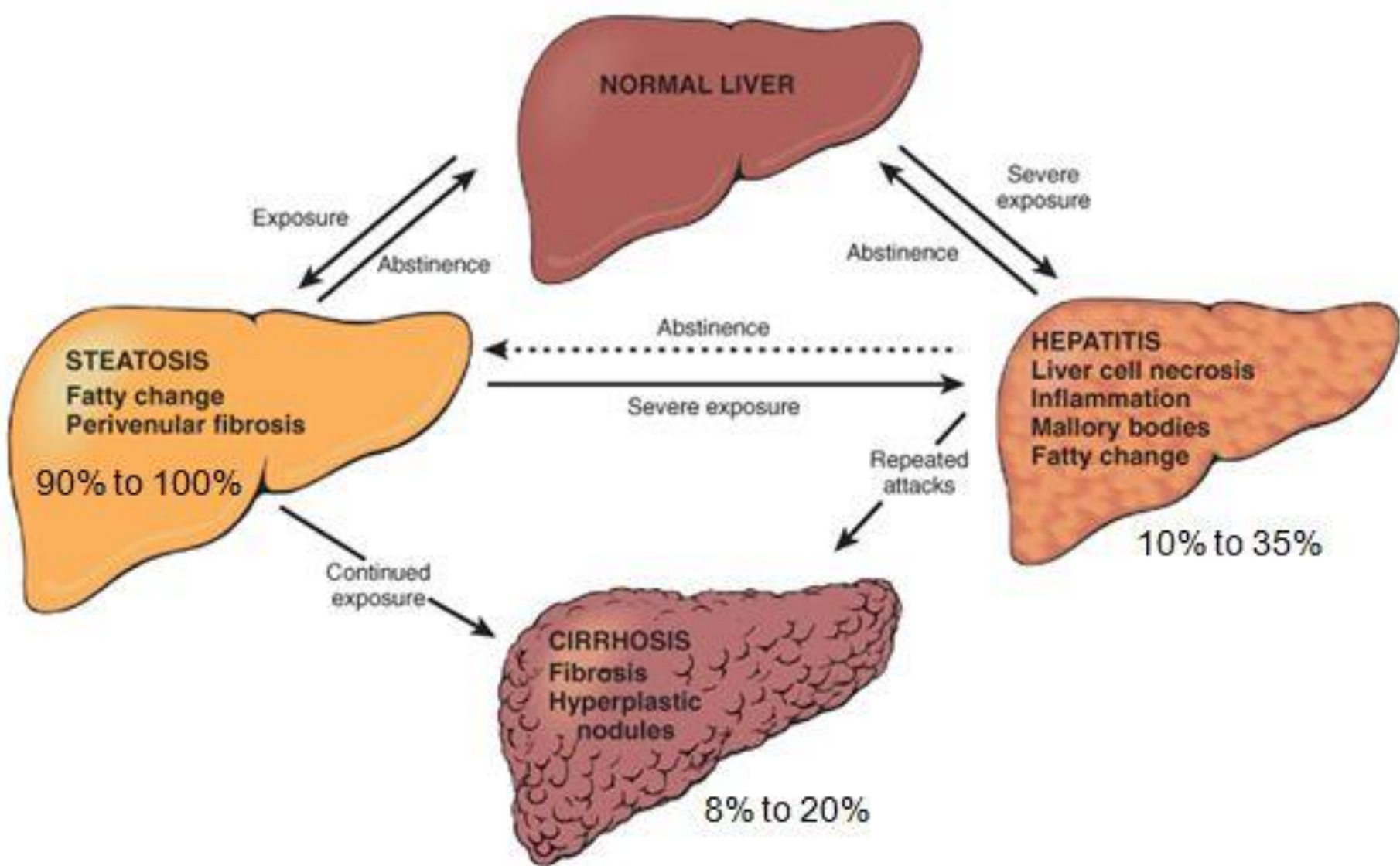
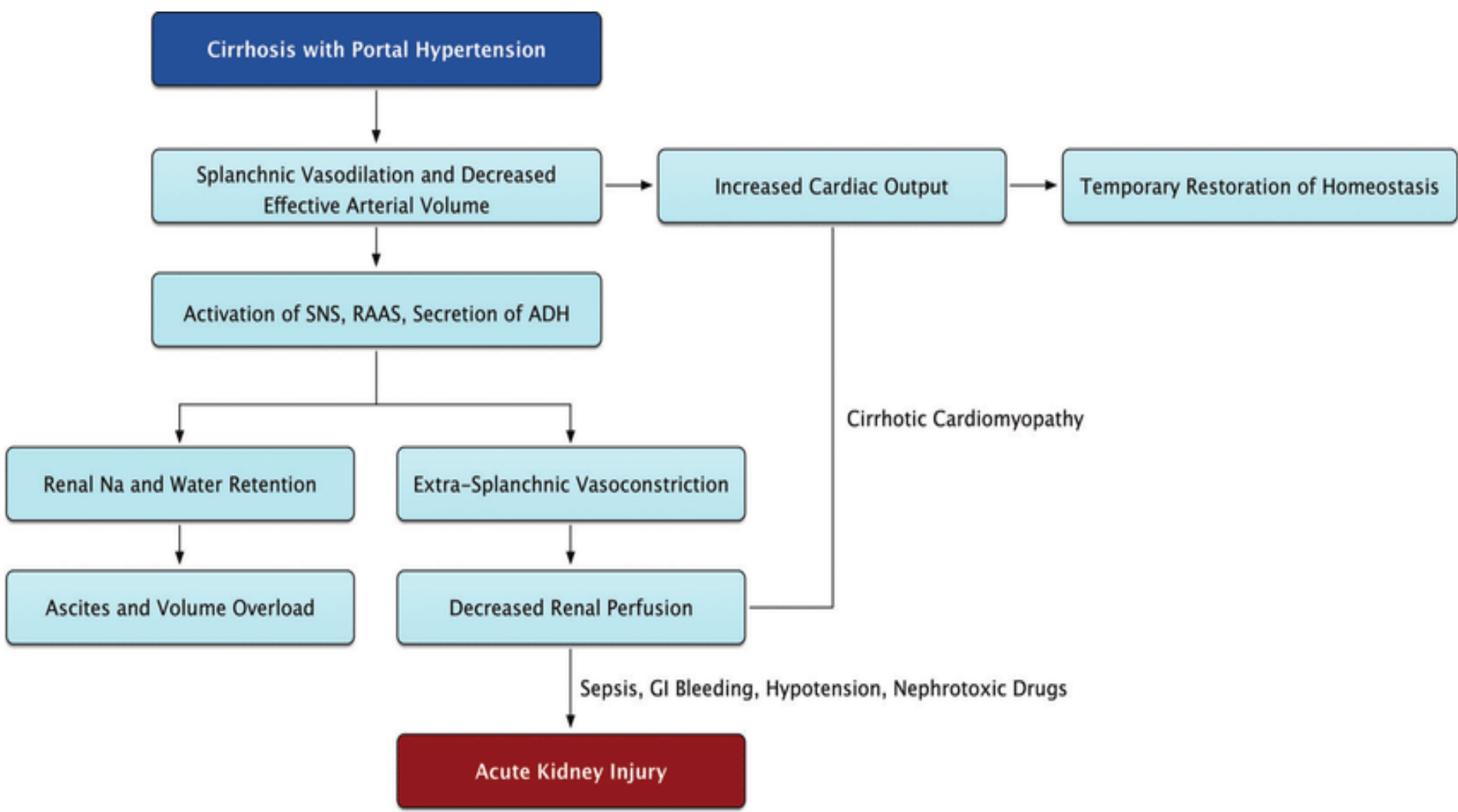
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INTRODUCTION :

- Alcohol is a leading cause of liver disease and presents with high morbidity and mortality.
- The development of alcohol-associated steatosis, steatohepatitis and cirrhosis which is most often clinically silent.
- Symptoms arise only when alcoholic cirrhosis decompensates or they develop alcoholic hepatitis.
- Hepatorenal syndrome is a clinical syndrome that represents the end stage of sequence of reductions in renal perfusion, induced by severe hepatic injury.
- Since even acute kidney injury is a common disease entity, a better knowledge of the clinical and laboratory features of ALD, along with knowledge of hepatorenal syndrome, helps in better management and favorable outcome of alcoholic patients.



Aim:

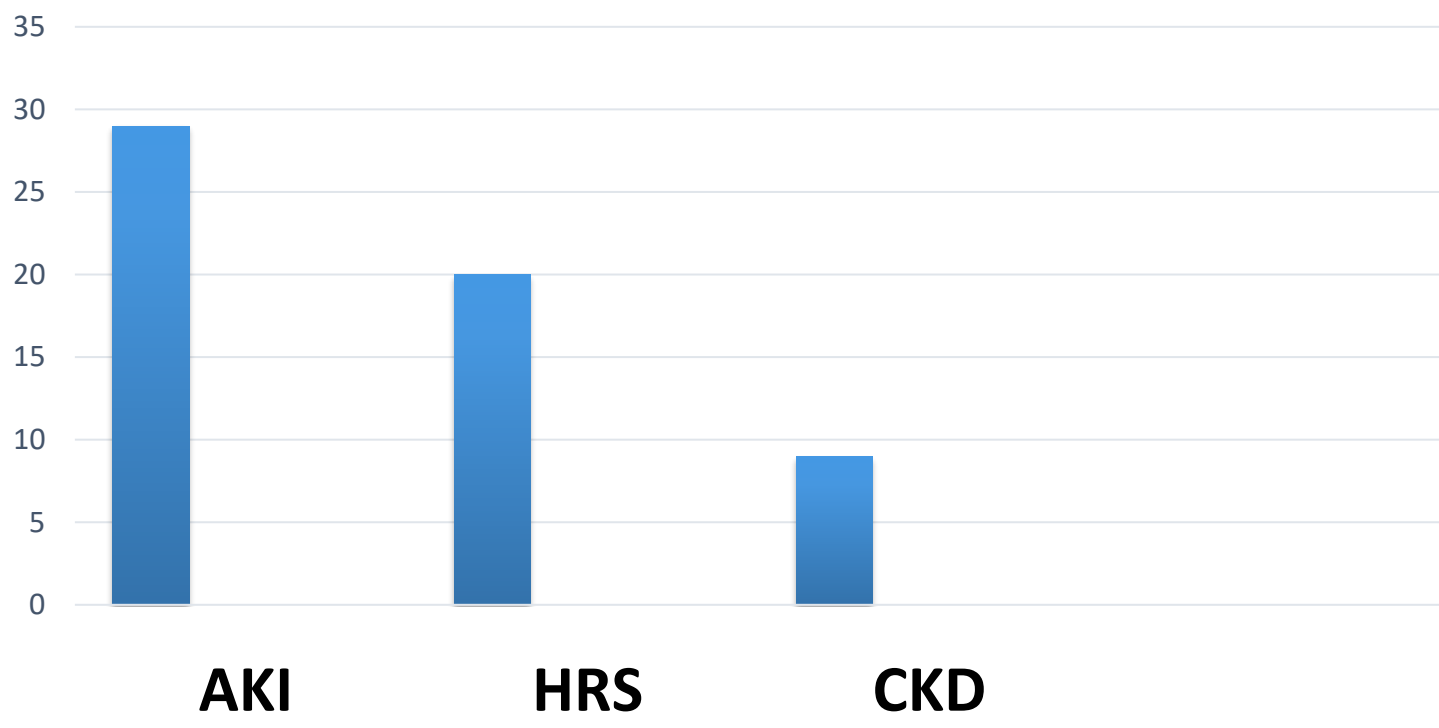
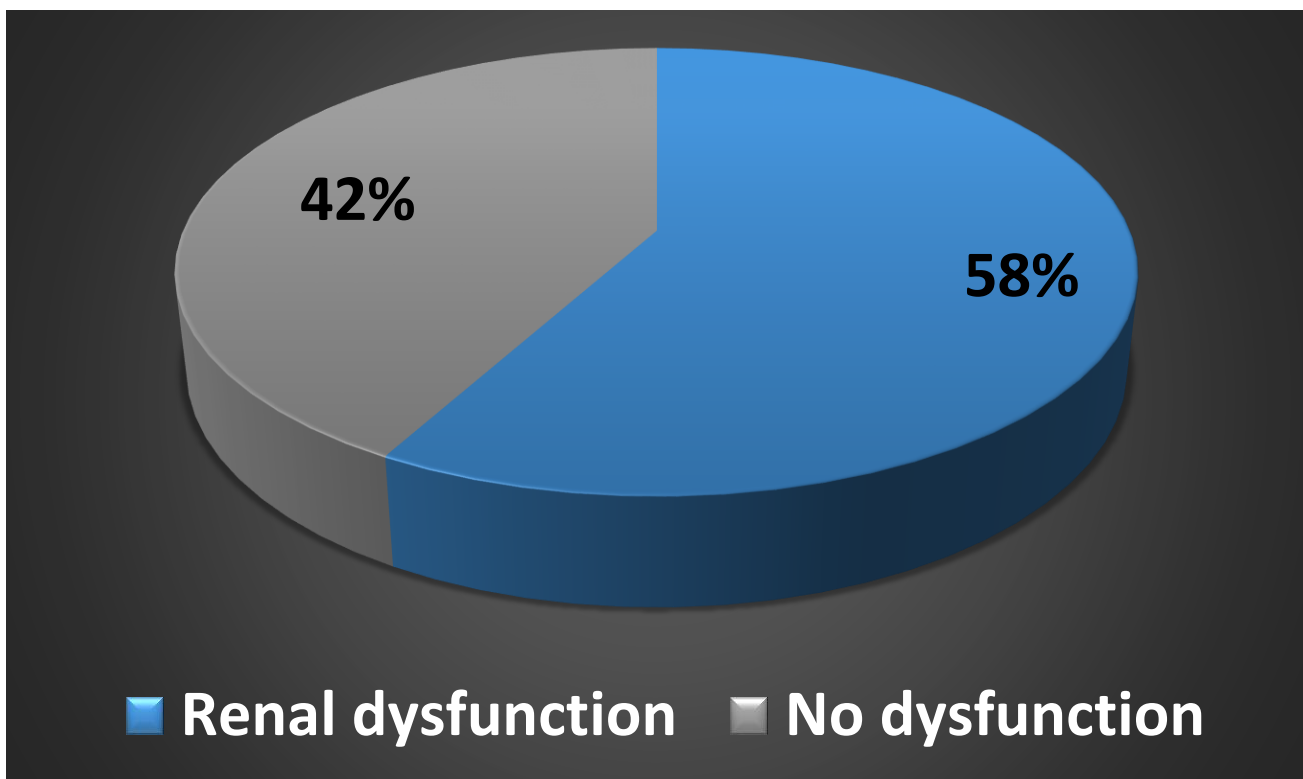
- Study of Renal Dysfunction in Alcoholic Liver Disease patients

Mathodology and Material

- This observational study carried out in PSH, Vadodara, on 100 patients of liver cirrhosis including outdoor and indoor patients for a period from January 2023 to November 2023.
- Mean age of study population was 54.5 ± 20.5 years of age.
- Detailed history and all relevant laboratory and radiological investigations were recorded.

Result:

- Renal dysfunction was evident in 58 patients and >58% of the study population had eGFR of <60. Most common type of renal dysfunction seen was acute kidney injury(29%) followed by hepato-renal syndrome(20%) followed by chronic kidney disease(9%)



Discussion:

- Renal dysfunction was observed in significantly higher percentage of patients with severe disease Child Pugh class (C) followed by Child Pugh class (B) and Child Pugh class (A).
- Sub-acute bacterial peritonitis (SBP) was the most common risk factor associated with Renal Dysfunction followed by Hyponatremia, GI bleed and Other Infection (pneumonia).
- My study showed similar result as compared with other previously done study.

Conclusion:

- Renal failure is a severe complication in patients with liver cirrhosis.
- It is associated with increased mortality and morbidity.
- Diagnosis is a challenge because it is mainly based on serum creatinine, which does not seem to be an ideal measure of renal function in cirrhosis.

Reference:

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[2] Andy Slack, Andrew Yeoman, Julia Wendon. Renal Dysfunction in Chronic liver disease. *Critical Care*. 2010;14:214. [PMC free article] [PubMed] [Google Scholar]
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