CIRRHOSIS

Cirrhosis is severe scarring of the liver and can be diagnosed with ultrasound or CT or with clinical signs (e.g. presence of spider naevi). Suspicious U/S results may include nodular outline and/or signs of portal hypertension (splenomegaly, varices or ascites).

- Patient presents with new or persistent deranged Liver Function tests and may have history of:
  - Alcohol abuse/dependence
  - Hepatitis C
  - Hepatitis B
  - Diabetes and Obesity

- May or may not also have non-specific symptoms of pain and lethargy
- Thrombocytopaenia may be an early predictor of cirrhosis/portal hypertension

Information Required

- presence of red flags
- date of diagnosis
- treatment to date/ ultrasound results

Investigations Required

- Abdominal ultrasound, FBE, ELU, LFTs, INR,
- Hepatitis B & C serology, iron studies, ceruloplasmin, Alfa1AT, ANA, SMA, AMA, IgG, Glucose, insulin (FASTING)

Fax Referrals to Flinders Liver Clinic Fax: 8204 3943

Red Flags

- Liver dysfunction (↑ bilirubin, ↑INR, ↓albumin)
- Liver lesion on ultrasound
- New finding of osteoporosis
- New onset or increased ascites or peripheral oedema
- Weight loss/malnutrition

Indications for hospital admission

- GI Bleed
- Confusion/drowsiness
- Unexplained fever with abdominal pain
- Jaundice
- Severe shortness of breath with increased abdominal distension

Suggested GP Management

Diagnosis/screening:

- Abdominal ultrasound
- Liver Function Tests

GP Management 3-6 monthly for stable (compensated) patients:

- Baseline clinical assessment, physical examination, initial investigations (FBE, E/LFTs, INR), weight, alcohol use, Pulse rate if on propranolol (target 25 % reduction or < 55bpm)
- 6 monthly Hepatoma screening with upper abdominal ultrasound
- 2-yearly osteoporosis screening with bone density scan
- Review alcohol use (aim for abstinence)

GP Support for managing unstable (decompensated) patients through the Liver Failure Program: Hepatology consultants and Chronic Liver Disease Nurses are based at Flinders Medical Centre and available to assist GPs with any enquiries and can be contacted via FMC switchboard. Nursing staff can be contacted during business hours on the numbers below: Rosemary McCormick Rosemary.mccormick2@health.sa.gov.au and Rachel Wundke Rachel.wundke@health.sa.gov.au

- Phone: 8204 6989 If urgent please call 8204 5511 and ask the switchboard to page 38467

Clinical Resources

- GESA (Gastrointestinal Society of Australia) http://www.gesa.org.au/
- AASLD (American Association for the Study of Liver) Disease http://www.aasld.org
- EASL (European Association for the Study of Liver)

Action plans for Cirrhosis (general), Nutrition, Ascites and Hepatic Encephalopathy are embedded in this document.

General Information to assist with referrals and the and Referral templates for FMC are available to download from the SALHN Outpatient Services website www.sahealth.sa.gov.au/SALHNoutpatients

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