Common Liver Diseases

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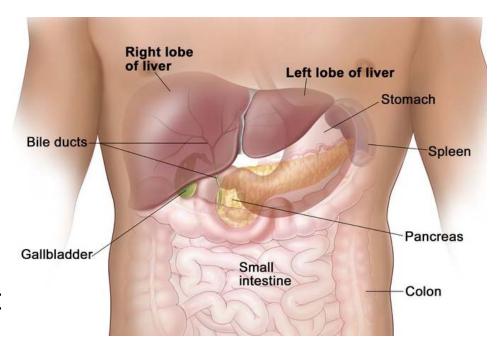
Objectives

Liver Health

Common liver diseases

Location of the Liver

- It is in the right, upper side of the abdominal cavity immediately beneath the diaphragm.
- Size about a football.
- It weighs about 3.3 pounds and holds approximately 13 percent of the body's blood supply.



Structure of the Liver

- It contains two major lobes, two smaller lobes, and multiple lobules.
 - The right lobe is the largest lobe of the liver.
 - Caudate lobe is the posterior section of the right lobe.
 - Quadrate lobe is the inferior section of the right lobe.
 - Left lobe.

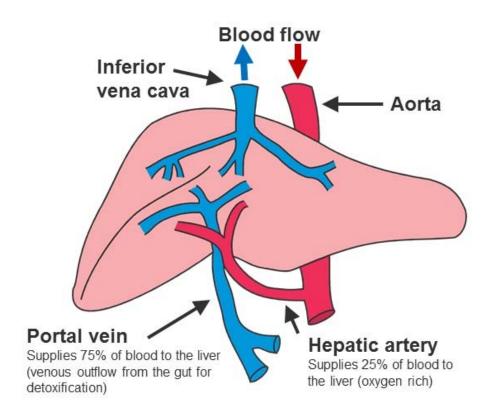




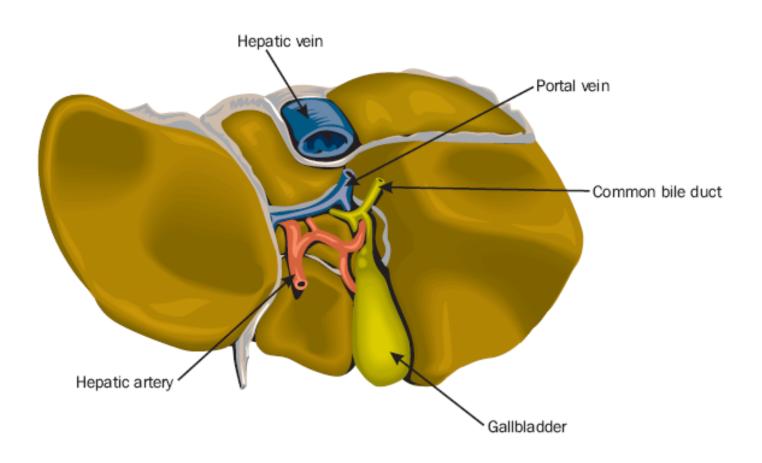


Vascular Anatomy of the Liver

- The liver has a dual blood supply
- The venous outflow from the liver is via the hepatic vein into the vena cava



UNDERSTAND THE LIVER



Functions of the Liver

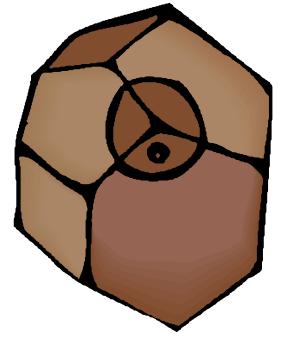
- The liver metabolizes carbohydrates, fats, and proteins.
- It removes drugs, alcohol, and hormones.
- The liver stores vitamins, minerals, and food molecules.
- It excretes *bile* (a greenish-yellow substance that contains waste products, cholesterol, and bile salts).
- The liver converts glucose into glycogen for storage.
- It regulates blood *coagulation* (clotting).
- The liver filters blood.







• Hepatocytes (Liver Cells) are the primary cells in the liver that exchange substances with the blood filtering through the liver.



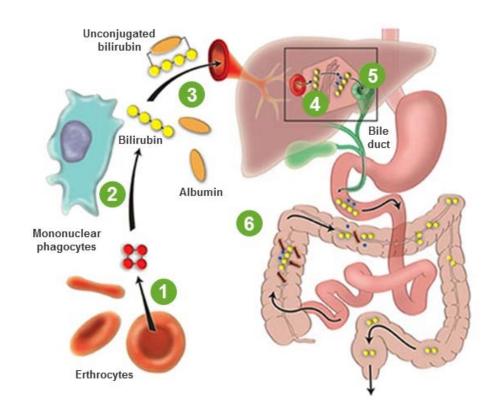
Liver Cell





Bilirubin Metabolism

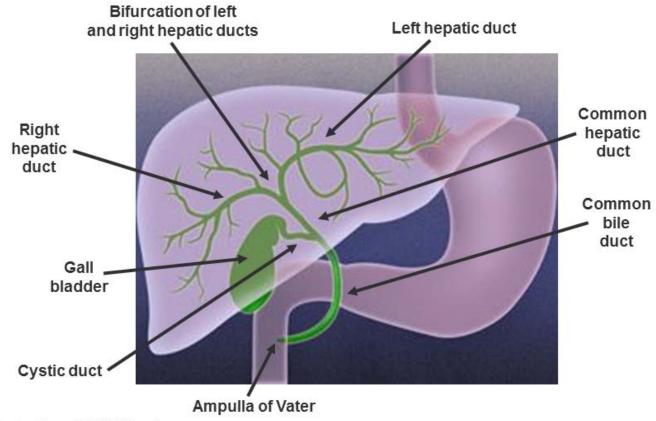
- Bilirubin comes from heme liberated from red blood cells
- Heme is converted to bilirubin in mononuclear phagocytes
- Insoluble (unconjugated)
 bilirubin is bound to albumin and taken up by hepatocytes
- Bilirubin becomes soluble once conjugated (by UDPglucuronyl transferase)
- Conjugated bilirubin is excreted into bile and reaches the bowel where it is deconjugated by colonic bacteria and eliminated in feces







Anatomy of the Biliary System





"Your liver has issues."

Conditions that make the Liver Sick

- Genetics:
- Infection: Viral, Bacterial, Fungal, Parasitic.
- Autoimmune Liver Disease:
- Drugs:
- Toxins:
- Alcohol: ≤ 2 drinks per day. Gender, ethnicity, underlying liver conditions.
 - One standard drink: 11-14 gram of alcohol
 - One drink of 40% Spirit
 - One glass of Wine
 - One 12 Oz of beer
- Fatty Liver: Metabolic Dysfunction Associated Steatohepatitis (MASH).

Common Conditions that make the Liver Sick

- Alcohol-related liver disease
- Chronic hepatitis B, C
- MASH (Fatty Liver Disease)
- Autoimmune hepatitis
- Drugs, toxins (Supplements)
- Combination of more than one cause

53.5%

Other less common liver diseases

- Bile ducts damage (~5% to 10%)
 - Primary biliary cholangitis (PBC)
 - Primary sclerosing cholangitis (PSC)
 - Biliary atresia
- Inherited diseases
 - Cystic fibrosis
 - Alpha-1 antitrypsin deficiency
 - Hemochromatosis (~5% to 10% of cases)
 - Wilson disease
 - Glycogen storage disease

Human Hepatitis Viruses

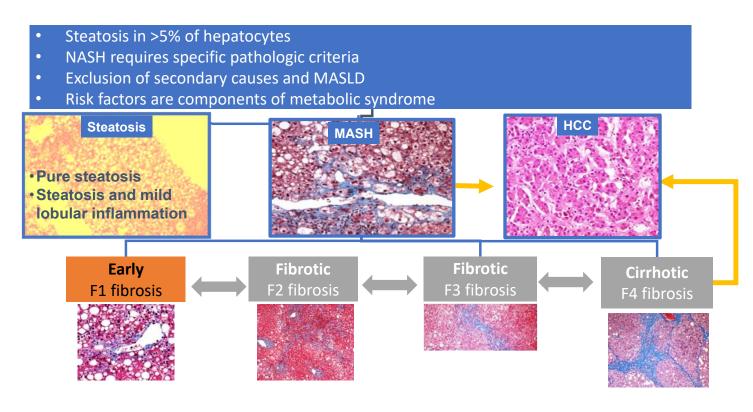
Virus	Genome	Genome size (kb)	Envelope	Family / genus
HAV	RNA positive sense, single stranded, linear	7.5	-	Picornaviridae hepatovirus
HBV	DNA partially double stranded, circular	3.2	+	Hepadnaviridae
HCV	RNA positive sense, single stranded, linear	9.6	+	Flaviviridae hepacivirus
HDV	RNA positive sense, single stranded, linear	1.7	+	Unclassified (viroid), delta virus
HEV	RNA positive sense, single stranded, linear	7.5	-	Unclassified, togavirus and alpha virus-like

MASH: The Impending Dust Storm or Tsunami



Courtesy of Dr. Steven Harris

Let's Get the Terminology Correct: What is MASLD and NASH and MASH?



^{1.} Younossi ZM. Hepatology. 2018;68(1):349-360;

^{2.} Chalasani N, et al. *Hepatology*. 2018;67(1):328-35;

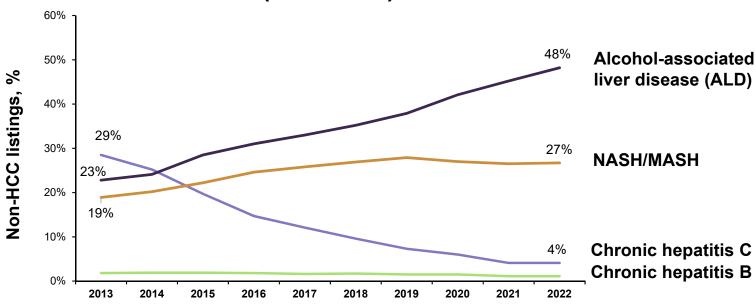
^{3.} Younossi ZM, et al. *Hepatology*. 2011;53(4):1874-1882;

^{4.} Younossi ZM, et al. Hepatol Commun. 2017;1(5):421-428;

^{5.} Anstee QM, et al. Gastroenterology. 2016;150(8):1728-1744; 6. EASL-EASD-EASO CPG NAFLD. J Hepatol. 2016;64:1388-402.

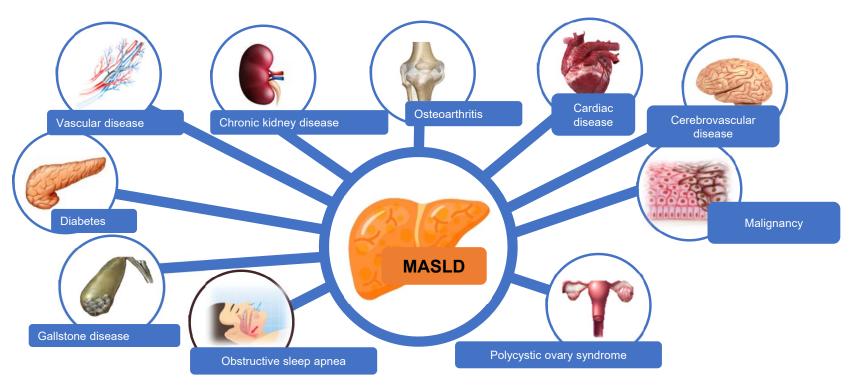
Consequences of MASH: Liver Transplantation

Liver transplantation in the United States (Non-HCC)

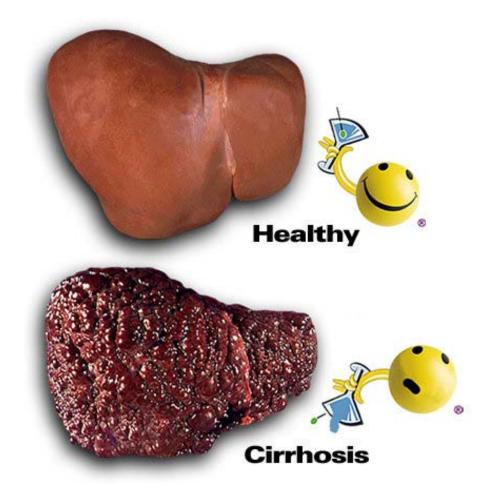


1. Owrangi S, Z Younossi. DDW 2024. 2. Younossi ZM. Hepatol Commun. 2023 22;8(1):e0352.

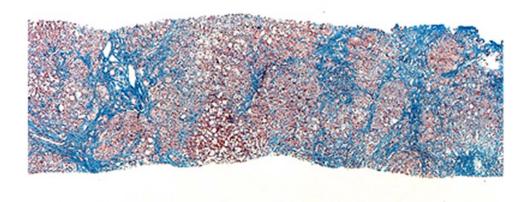
Not to Forget MASH is a Part of a Multisystem Disorder



Angulo P, et al. *Gastroenterology*. 2015;149:389–397; Ekstedt M, et al. *Hepatology*. 2006;44:865–873; Rafiq N, et al. *Clin Gastroenterol Hepatol*. 2009;7:234–238; Söderberg C, et al. *Hepatology*. 2010;51:595–602; Dam-Larsen S, et al. *Scand J Gastroenterol*. 2009;44:1236–1243; Hicks SB et al. *J Hepatol* 2019;71:1229-1236.



Cirrhosis on needle biopsy



Needle biopsy of the liver (40x) of a 61-year-old female with obesity, diabetes, and hyperlipidemia referred for evaluation of chronically elevated serum aminotransferases. Trichrome stain demonstrates bridging fibrosis (blue staining), periportal inflammatory infiltrates and marked steatosis. These findings are consistent with cirrhosis secondary to NASH. Courtesy of Jeremy Ditelberg, MD.



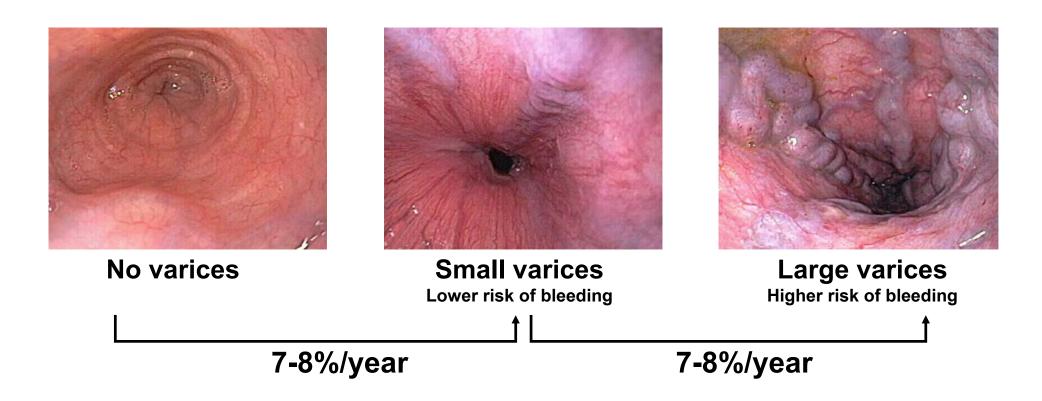
Cirrhosis: The End of the Road

- The problem:
 - Liver disease tend to developed indolently, it starts out with no symptoms or signs and unsuspected until complications develop.
 - It is often diagnosed incidentally.
 - Most usually when complications show up.
 - Ascites: fluid accumulate in the abdomen
 - Lower leg edema
 - Bleeding from stomach
 - Yellow jaundice
 - Mental confusion
 - Liver cancer

Ascites, Sarcopenia, Spider Nevi

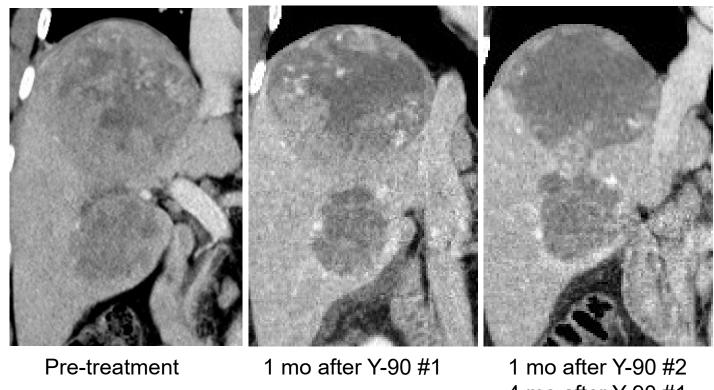


Varices Increase in Diameter Progressively



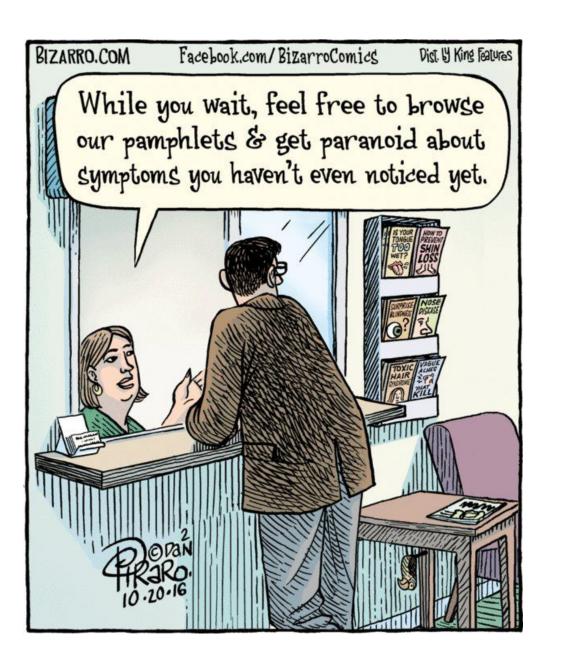
Merli et al. *J Hepatol* 2003;38:266

56 y/o man with HCV and Large HCC



4 mo after Y-90 #1

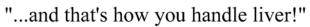






"Do you solemnly swear to listen to my advice?"







Questions?