Hepatocellular Carcinoma

Image 1 : Patient undergoing hepatic resection

Image 2 : Right hepatectomy

Abstract IDDF2019-ABS-0237 Figure 1 Hepatocellular carcinoma right hepatectomy

- Out of the total 70 Patients, 57 patients had radiological or pathological evidence of HCC. Out of 57 patients, 53 of them had radiologically confirmed the diagnosis and 44 of them had histopathological report confirmative of HCC.

Results

- Age wise, out of 57 HCC patients 45 are males, 12 are females. Median age group is 60 years.
- The predominant complaint among HCC patients is abdominal pain/discomfort in 56.75% followed by abdominal distension in 40.54%.
- 53 patients out of 57 patients have undergone HIV/HBsAg/ Anti HCV serology testing. 5 out of 53 patients screened for HBsAg antigen were positive and 2 patients were anti-HCV antibody positive.
- α -fetoprotein levels were available in 45 patients, out of which 12 (26.6%) patients had normal levels of α -fetoprotein and 20(44.4%) patients have in the diagnostic range of more than 400ng/ml.
- Majority of HCC Lesions are located in the right lobe. (figure 1)

Conclusions • This data on HCC provides information about tumour characteristics and possible associated risk factors. Study results show that alcohol consumption (40%) is the commonest underlying etiological factor for HCC followed by Hep B (9.43%) and Hep C (3.77%). Hepatitis B positivity in this study is lower than observed in various other studies done in India.

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THE CORRELATION OF MALNUTRITION WITH CHILD-PUGH SCORE AND MELD-NA SCORE AS A PROGNOSTIC INDICATOR OF MORTALITY AND HEPATIC DECOMPENSATION AMONG CIRRHOTIC PATIENTS

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Background Optimal nutrition is paramount to the care of cirrhotic patients. Given the strong correlation of nutrition to

various clinical outcomes, it is necessary to accurately assess the nutritional status of cirrhotic patients. In our knowing, there is no published material regarding cirrhosis and malnutrition in the Philippines. Hence, it would be beneficial to establish these associations locally.

Methods This was a retrospective cohort study on patients admitted at the St. Luke's Medical Center Global City. All patients were assessed using the Subjective Global Assessment (SGA) tool, Child-Pugh Score, and MELD-Na score and were correlated with clinical outcomes namely in-hospital mortality, length of hospitalization, and decompensation of cirrhosis (table 1).

Results Eighty-two patients were studied and 68% (56) were classified as having a high risk of malnutrition. There was a significantly higher proportion of decompensated cirrhosis, admission to ICU and mortality rates in the high-risk group. Ascites (53.57%), infection (26.79%) and hepatic encephalopathy (15%) were the most common clinical outcomes. If we correlate this with the Child-Pugh Score and MELD-Na score, the pattern remains consistent that the higher the score, the more patients who develop poor outcomes. These begin with a Child-Pugh score of C and a MELD-Na score of >21. Statistically, higher SGA, Child-Pugh and MELD scores were correlated positively with mortality and longer hospital stay ($p = 0.111, 0.012, 0.035$)

Conclusions The SGA, Child-Pugh and MELD-Na scores are predictive of mortality and poor clinical outcomes. High scores for these indices are associated with higher probability of admission to ICU and longer hospital stay.

Abstract IDDF2019-ABS-0241 Table 1 Clinical Profile of Patients Included

Patient Characteristics	Frequency (%); Mean $\pm$ SD; Median (Range)
Etiology of cirrhosis	
Alcoholic	8 (9.76)
Hepatitis B	21 (25.61)
Hepatitis C	5 (6.1)
NAFLD	28 (34.15)
Cardiac	4 (4.88)
Mixed	3 (3.66)
Others	13 (15.85)
SGA Score	
A	4 (4.88)
B	22 (26.83)
C	56 (68.29)
Child Pugh Score	
A	14 (17.07)
B	33 (40.24)
C	35 (42.68)
MELD – Na Score	
A	41 (50)
B	28 (34.15)
C	13 (15.85)
Albumin, g/dL	2.55 $\pm$ 0.67
Albumin Lymphocyte count	1120 (206.8 – 5978)