were hepatitis B/C (72.2%) and alcohol consumption (10.0%). Fifty-two (20.1%) patients were on the treatment of NSBBs and 53 (20.5%) patients were treated with NSBBs before, whereas 23 patients (8.9%) were with contraindications. Thirteen patients (25.0%) achieved hemodynamic response and the target dose was 32.1 mg/d for propranolol and 12.5 mg/d for carvedilol respectively. Overall adverse effects (AEs) were substantially more prevalent in endoscopic therapy than in NSBBs therapy (61.4% vs 25.7%, P<0.001), but severe AEs leading to therapy cessation were more prevalent in NSBBs therapy (12.4% vs 5.2%, P<0.001). During the 6-month follow-up, 53.8% of patients on NSBBs showed good compliance and 59.0% of patients on endoscopic therapy showed good compliance (P=0.490). Upon multivariate analysis, only old age and high work intensity were associated with poor drug compliance, while education background, healthcare insurance, AEs, drug dose and disease severity did not affect the compliance.

Conclusions Clinical use of NSBBs for cirrhotic patients is far from optimal considering the low prevalence and high proportion of ineffective low-dose. NSBBs medication bears a higher rate of severe AEs compared with endoscopic therapy. Therapy compliance of both NSBBs and endoscopy are unsatisfactory, and optimized follow-up management is greatly needed.

IDDF2020-ABS-0052  CLINICAL SIGNIFICANCE OF THE SERUM LEPTIN LEVELS OF HEPATITIS C PATIENTS AND THE BLOOD LIPID LEVELS DETECTION
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Background To investigate the correlation between the serum leptin levels and blood lipids levels detection in patients with hepatitis C.

Methods 118 patients with hepatitis C in our hospital were randomly selected as the experimental group, while 128 cases of the healthy check-up as the control group. The serum leptin levels and blood lipids levels of all the subjects were detected, and their results were statistically analyzed.

Results The average results of all the levels in the experimental group were higher than those of the control group. Serum leptin was increased significantly in patients with hepatitis C compared with the healthy controls (23.17±6.46) ng/ml vs (5.47±2.71) ng/ml, P=0.01). TC in the hepatitis C group increased significantly compared with that in the control group, which was of significant different (P=0.01); HDL-C decreased more obviously in the hepatitis C group, which was of statistical difference (P=0.01).

Conclusions Through the comprehensive indexes of the serum leptin levels and the combined detection of blood lipid in patients with Hepatitis C liver disease, it can accurately reflect the severity of the hepatitis C liver disease, and it is of guidance significance in clinical diagnosis and treatment.