

MANAGING YOUR CIRRHOSIS

What Is Cirrhosis?

Cirrhosis is a long-term illness involving scarring of the liver. Scarring stops the liver from working normally, which causes problems in the whole body.

Cirrhosis is one of the top 10 causes of death in the United States. Prognosis depends on how much the liver is damaged.

What Causes Cirrhosis?

Of the many causes, the usual one is chronic alcohol abuse. Others include prescription and illegal drugs, fatty liver, liver infections, inherited diseases (such as hemochromatosis and cystic fibrosis), chronic viral hepatitis, toxic substances, and primary biliary cholangitis (which causes bile duct blockage).

What Are the Symptoms of Cirrhosis?

The most common symptoms of early stages are tiredness (fatigue), weakness, little or no appetite, nausea, weight loss, enlarged liver, and red palms of hands. The symptoms of late stages are yellowing of eyes and skin (jaundice), brown or dark yellow urine, hair loss, changes in blood vessels in skin and around the belly button (spider blood vessels), breast growth in men, easy bruising and bleeding, diarrhea, mental confusion, swollen belly from fluid accumulation (ascites) and swollen legs (edema), large spleen, hemorrhoids, and coma.

How Is Cirrhosis Diagnosed?

The health care provider uses a medical history and physical examination for diagnosis. Blood tests, x-rays, computed tomography (CT), and liver biopsy may be done to make the diagnosis

and exclude other causes of liver disease. In a biopsy the doctor takes a small piece of liver tissue for study.

How Is Cirrhosis Treated?

The key to treatment is removing the cause. The main treatment is then supportive and includes a high-calorie diet and salt (sodium) and fluid restriction (to control fluid accumulation). For severe fluid accumulation in the belly (ascites) or edema, diuretic medicines can be given. Other drugs are given for mental confusion and coma.

Treatment of the complication of increased pressure in the blood vessels in the belly (portal hypertension) depends on its severity. Medicines and endoscopy (a lighted flexible tube used to look at the esophagus, stomach, and small intestine) can be used for treatment of enlarged veins in the esophagus (varices) to prevent bleeding. Surgery, shunting of the blood vessels (portacaval shunt), and liver transplantation are other treatment options.

DOs and DON'Ts in Managing Cirrhosis

- ✓ **DO** stop drinking alcohol. An alcohol rehabilitation program can help.
- ✓ **DO** eat a well-balanced diet. You may need to limit protein because the liver may be unable to use it.
- ✓ **DO** change activities according to your symptoms. A good fitness program may help fatigue.
- ✓ **DO** get hepatitis B vaccine if you're in a high-risk group (e.g., health care worker, homosexual), and get treated promptly for hepatitis.
- ✓ **DO** have family members checked for cirrhosis if your family has a history of cirrhosis or inherited diseases that cause it.

✓ **DO** call your health care provider if during treatment you vomit blood or have black stool (bowel movements), bright red blood in your stool, increase in fluid accumulation in your belly or feet, or fever.

⊗ **DON'T** use any alcohol.

⊗ **DON'T** use medicines, such as acetaminophen, sedatives, and tranquilizers, that can harm the liver.

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FOR MORE INFORMATION

Contact the following sources:

- American Liver Foundation: Tel: (800) GO-LIVER (465-4837); Website: <http://www.liverfoundation.org>
- American College of Gastroenterology: Phone: (703) 820-7400; Website: <http://www.acg.gi.org>
- Alcoholics Anonymous: Phone: (212) 870-3400; Website: <http://www.aa.org>

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