

Study of Clinical and Laboratory Profile in Alcoholic Liver Disease.

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Abstract

Background- Chronic alcohol abuse can result in a spectrum of liver injury that ranges from mild fatty infiltration to cirrhosis and hepatocellular carcinoma.

Methods- Fifty patients presenting with alcoholic liver disease were selected and their clinical profile and laboratory parameters obtained. A case of Alcoholic liver disease was diagnosed in patients with a history of significant alcohol intake for a minimum period of 10 years, physical signs of liver disease and supportive laboratory data.

Results- The mean age at presentation was 42.6 years with minimum age of 20 years and maximum 70 years. Only one patient was a female. The average duration of alcohol intake was 12.4 years. Most of the patients consumed country liquor on a daily basis. All the patients belonged to lower socioeconomic class.

Conclusion- As per the present study data, CLD was a common entity in India with male preponderance and affecting mostly people of middle age group.

Keywords- Alcoholic, Liver Disease, Clinical Profile.

Introduction

The association of alcohol with cirrhosis was recognised by Matthew Baillie in 1793. Alcohol is most common cause of chronic liver disease all over the world. Worldwide alcohol consumption is increasing. The risk

factors include the drinking pattern, sex, genetics, nutrition and HCV co-infection.¹

Chronic alcohol abuse can result in a spectrum of liver injury that ranges from mild fatty infiltration to cirrhosis and hepatocellular carcinoma.^{2,3} The prognosis of patients with alcoholic liver disease depends on degree of pathologic injury, patient's nutritional status, presence of complication, presence of other comorbid conditions and patient's ability to discontinue destructive patterns of drinking.

Renal dysfunction in liver cirrhosis can be diagnosed by finding a reduction in the rate of glomerular filtration. Tubular and interstitial damage is also an important predictor of renal failure, but determining their function is not of any practical value. Inulin clearance is considered gold standard in the measurement of GFR, being the sole accurate method of renal function assessment in liver cirrhosis. But all methods for the clearance of endogenous and exogenous markers are technically hard to implement, expensive, impractical for repeating investigation of the renal function, imprecise at GFR⁴.

Methods

Fifty patients presenting with alcoholic liver disease were selected and their clinical profile and laboratory parameters obtained. A case of Alcoholic liver disease was diagnosed in patients with a history of significant

alcohol intake for a minimum period of 10 years, physical signs of liver disease and supportive laboratory data. Patients with chronic renal parenchymal disease, urinary tract infection/obstruction, comorbid conditions (like diabetes, hypertension), multisystem disease and other co-existing infection (like hepatitis B, hepatitis C and HIV) were excluded.

A detailed clinical profile including detailed clinical history, general physical examination and systemic examination with special emphasis on abdomen examination was done for each patient. Laboratory investigation like liver function test, complete blood count, prothrombin time, blood urea and serum creatinine, urine routine test and abdominal Ultrasonography obtained from all patients. Statistical analysis was done using SPSS-20 computer software.

Results

The mean age at presentation was 42.6 years with minimum age of 20 years and maximum 70 years. Only one patient was a female. The average duration of alcohol intake was 12.4 years. Most of the patients consumed country liquor on a daily basis. All the patients belonged to lower socioeconomic class.

Table 1: Clinical findings in the cases (n=50)

Clinical finding	No. of cases	Percentage
Pallor	31	62.00
Edema	28	56.00
Icterus	37	74.00
Cyanosis	34	68.00
Clubbing	7	14.00
Ascites	41	82.00
Gyancomastia	3	6.00

Abdominal distension (82.00%) and jaundice (74.00%) were most common presenting complaints.

Table 2: Biochemical parameters of the cases

Biochemical parameters	Mean	SD
S. Bil.	5.40	4.20
AST	113.2	92.30
ALT	62.10	50.20
ALP	221.04	128.60
T. protein	6.67	1.03
S. Al	3.12	0.70

Discussion

Alcoholic liver disease is one of the major medical complications of alcohol abuse. Alcohol is the major cause for liver cirrhosis accounting for approximately 80% of all cases. Alcoholic cirrhosis is increasingly seen in countries such as Japan and India which traditionally had low prevalence of the disease.

Our study group consisted of 50 consecutive patients presenting with alcoholic liver disease. In our study the mean age at presentation was 42.6 years which is comparable with study by Suthar et al. (41 years.),⁵ Sarin et al. (43 ± 8.7 years).⁶ Only one of the patients was female comparable to the study by Suthar et al.⁵ where all the cases were male.

On physical examination it was observed that majority of the patients had Ascites, jaundice and edema. In previous studies also Ascites was common finding Suthar et al. (60%)⁵.

Conclusion

As per the present study data, CLD was a common entity in India with male preponderance and affecting mostly people of middle age group.

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