Etiological Profile and Precipitating Factors of Hepatorenal Syndrome in a Tertiary Care Hospital

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I. Background

•Hepato-renal syndrome is a unique form of functional renal failure due to diminished renal blood flow which occurs in histologically normal kidneys seen in advanced liver disease.

•Prognosis is poor with survival commonly measured in weeks to months.

•Several treatment options exist, early diagnosis and treatment provide the best hope of survival.

OBJECTIVE

•To study the etiological profile and precipitating factors of hepato-renal syndrome.

II. Material & Methods

•STUDYDESIGN-Prospective study •STUDYSUBJECTS-

Patients with cirrhosis of liver admitted in ICU& medical wards of Sri Venkateswara Ram Narain Ruia GovernmentGeneral Hospital, Tirupati.

•StudySample-500 in patients studied prospectively.

•StudyPeriod-june2017 – June 2018.

•Written informed consent was obtained from all the participants.

•The local institutional ethical committee approved the study.

•Inclusioncriteria-

1.Patients with chronic liver disease and declining renal functions. 2.Patients who meet HRS criteria.

•Exclusioncriteria-

Patients with Pre-renal failure
 Patients with renal parenchymal or obstructive pathology
 Patients using nephrotoxic drugs

•Statisticalanalysis-

the study results are analysed using EPI INFO software version 7.1.4.0 for calculation of percentages.

Baseline investigations•

Serum creatinine
Serum electrolytes
Liver function tests
Viral screening(HBV&HCV)
USG abdomen
CT abdomen
Hepatic and portal vein doppler

III. Results

•Percentage of patients who met IAC revised criteria of HRS type 1 were 73%(n=66) •HRS type 2 in 27% patients(n=24)

PERCENTAGEWISEOCCURRENCEOFHRS

•Alcoholic aetiology found in majority of the patients i.e., 52 out of 90 patients.

•Viral aetiology found in 21 patients of which 15 were of hepatitis B and 6 were of hepatitis C.

•Combined aetiology of alcohol and hepatitis B in 6 patients and ALD with hepatitis C in 4 patients.

•Cryptogenic liver disease was found in 7 patients.

PATTERNSOFETIOLOGYOFHRS

•In our study 58.8%(n=52) of 90 patients presented with alcoholic aetiology.

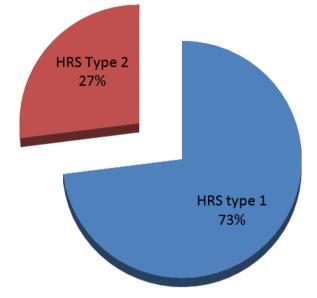
•Viral aetiology was found in 23.3% (n=21) of 90 patients among which HBV in 16.67% (n=15), HCV in 6.67% (n=6)

•Combined ALD+HBV coinfection in 6.67%(n=6)

•Combined ALD+HCV coinfection in 4.44%(n=4)

•Cryptogenic liver disease(n=7) detected in 8% of 90 patients.

PERCENTAGEWISEDISTRIBUTIONOFETIOLOGYINHRS



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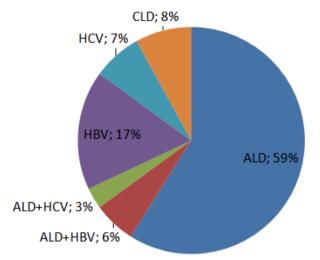
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PERCENTAGEWISEDISTRIBUTIONOFETIOLOGYINHRS



ETIOLOGYOFHRSINMALESANDFEMALES

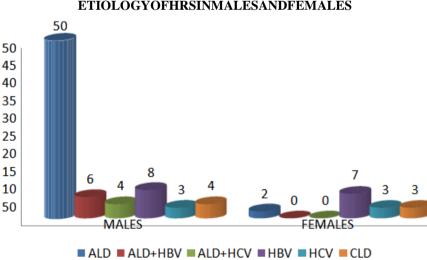
•In males the most common aetiology found to be alcoholism in 50 patients.

•Combined ALD+HBV co-infection in 6 patients, ALD+HCV co-infection in 4 patients.

•Cryptogenic liver disease in 4 patients.

•In females, most common aetiology was of viral HBV infection i.e., 7 patients, followed by HCV infection in 3 patients and cryptogenic liver disease in 3 patients.

•Alcoholic aetiology found in only 2 patients.



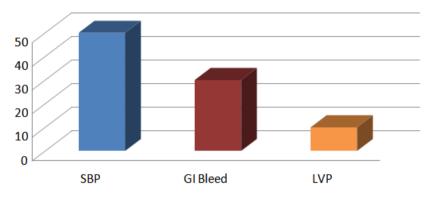
ETIOLOGYOFHRSINMALESANDFEMALES

PRECIPITATINGFACTORSOFHRS

•55.6%(n=50) patients with HRS had spontaneous bacterial peritonitis as the precipitating factor. •Gastrointestinal hemorrhage in 33.3%(n=30) patients.

•Large volume paracentesis without volume expansion in 11%(n=10) patients.

PRECIPITATINGFACTORSOFHRS



IV. Conclusion

•In our study alcoholic liver disease is the most common etiological factor and spontaneous bacterial peritonitis is the most common precipitating factor in HRS.

Reference

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[3]. [4]. 1,2,3 1,3 4 •Hepatorenal Syndrome: Aetiology, Diagnosis, and TreatmentG.Low, G.J.M.Alexander, and D.J.Lomas

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