



Clinical characteristics of alcoholic liver disease

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Abstract

AIM: To study the clinical characteristics and noninvasive diagnostic evidences of the alcoholic liver disease (ALD).

METHODS: Hepatitis B and C virus markers (HV), ALT, AST/ALT ratio, γ -glutamyl transpeptidase (γ -GT), alkaline phosphatase (ALP), prothrombin time (PT), serum albumin (Alb), jaundice, ascites, coexistent fatty liver, cirrhosis and hepatocellular carcinoma, all the 12 clinical characteristics in 16 patients with liver disease who ingested more than 40 g alcohol a day for more than 10 years (heavy drinkers group) were compared with the ones in 22 patients with liver disease who never or seldom ingested alcohol (control group).

RESULTS: There were 4 (25%) patients with positive HV in the heavy drinkers group. All the patients in the control group were positive in serum HV. The patients with AST/ALT ratio > 1 and coexistent hepatocellular carcinoma were 13 (81.2%) and 2 (12.5%) and γ -GT was 374 ± 170 U/L in the heavy drinkers group. In the control group they were 10 (45.5%), 10(45.5%) and 116 ± 91 U/L, respectively ($P < 0.05$). The patients coexistent fatty liver in the heavy drinkers group were 4 (25%) which were more than 1 (4.5%) in the control group, but $P > 0.05$ in statistics. In the other 7 menifestations there were no significant differences between the two groups.

CONCLUSION: Ingestion of more than 40 g alcohol per d for more than 10 years, AST/ALT ratio > 1 , much elevated γ -GT, coexistent fatty liver and negative HV (some patients may coexist viral hepatitis) are parameters for ALD diagnosis. ALD less leads to hepatocellular carcinoma than viral liver damage.

Key words: Liver diseases, alcoholic/diagnosis; Liver diseases, alcoholic/therapy; Liver cirrhosis; Liver neoplasms

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