Some good news for people with non-alcoholic steatohepatitis (NASH) who require a liver transplant—roughly nine in 10 will survive for at least a year following surgery, according to new research published in the journal Liver Transplantation. This is good news, the researchers note, in light of estimates of a burgeoning epidemic of NASH in the United States.

NASH occurs when fat builds up in the liver; the condition is mainly related to the epidemics of obesity and diabetes. This accumulation of fat damages the liver and may progress to cirrhosis, liver cancer or liver failure in 20 percent of cases.

Studies suggest that by 2025, more than 25 million Americans may have NASH. This influx of new cases has the potential to dramatically worsen the shortage of organs available for transplantation, which is scheduled to coincide with a peak in organ demand for people with chronic hepatitis C virus (HCV) infection.

Bracing for the future, Anita Afzali, MD, and her colleagues from the University of Washington in Seattle investigated the proportion of liver transplantations of NASH-related cirrhosis in the United States and estimated survival rates of those patients following transplantation.

“With the epidemics of obesity and diabetes giving rise to cases of NAFLD [non-alcoholic fatty liver disease] and NASH,” Afzali said in an accompanying press release, “it is important to understand the impact of these metabolic conditions on the outcomes after liver transplantation.”

The researchers used data collected by the United Network for Organ Sharing (UNOS) for all liver transplants performed in the United States from January 1, 1997, to October 31, 2010. A total of 53,738 transplant patients 18 years old or older were included in the analysis. The team collected data on primary diagnosis for all study participants, which included NASH and several other liver diseases for which liver transplantation may be necessary.

The research found that only 279 transplantations for NASH-cirrhosis (1.2 percent of all liver transplants) were performed between 1997 and 2003, but they increased dramatically to 1,531 (7.4 percent) between 2004 and 2010. The team found that by the end of the study period NASH
was the fourth most common reason for transplantation, behind liver cancer (34 percent), HCV infection (22 percent) and alcohol-related liver disease (11 percent).

Survival was excellent among NASH patients, with 88 percent surviving at one year, 82 percent at three years and 77 percent at five years following liver transplantation.

“Our study confirms post-transplantation survival in recipients transplanted for NASH is excellent and comparable to patients with other liver diseases,” Afzali noted. “With the shortage of available donor organs, appropriate allocation of livers is an important concern for transplant centers, and our findings indicate NASH-cirrhosis patients are potentially good candidates for liver transplantation. However, careful screening for cardiovascular disease prior to transplantation and monitoring of underlying cardiac and metabolic conditions following transplantation [are] recommended to ensure optimal survival for patients with NASH.”

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