

ACLF Case Presentation

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Demographic Details

- Mr. UM
- 32-year-old gentleman
- R/o Bokaro
- Blood group – 0+
- Weight- 63KG
- Height- 5 feet 7 inches
- BMI – 21.79 kg/m²

History

- No Known comorbidities
- Chronic Ethanol consumer (~70 gm/day x 8 years, Last intake – 1 month prior to presentation)
- Index presentation in January 2022
- Jaundice x 25 days
 - Insidious in onset, gradually progressive
 - Not associated with cholestatic symptoms
- Abdominal distension x 25 days

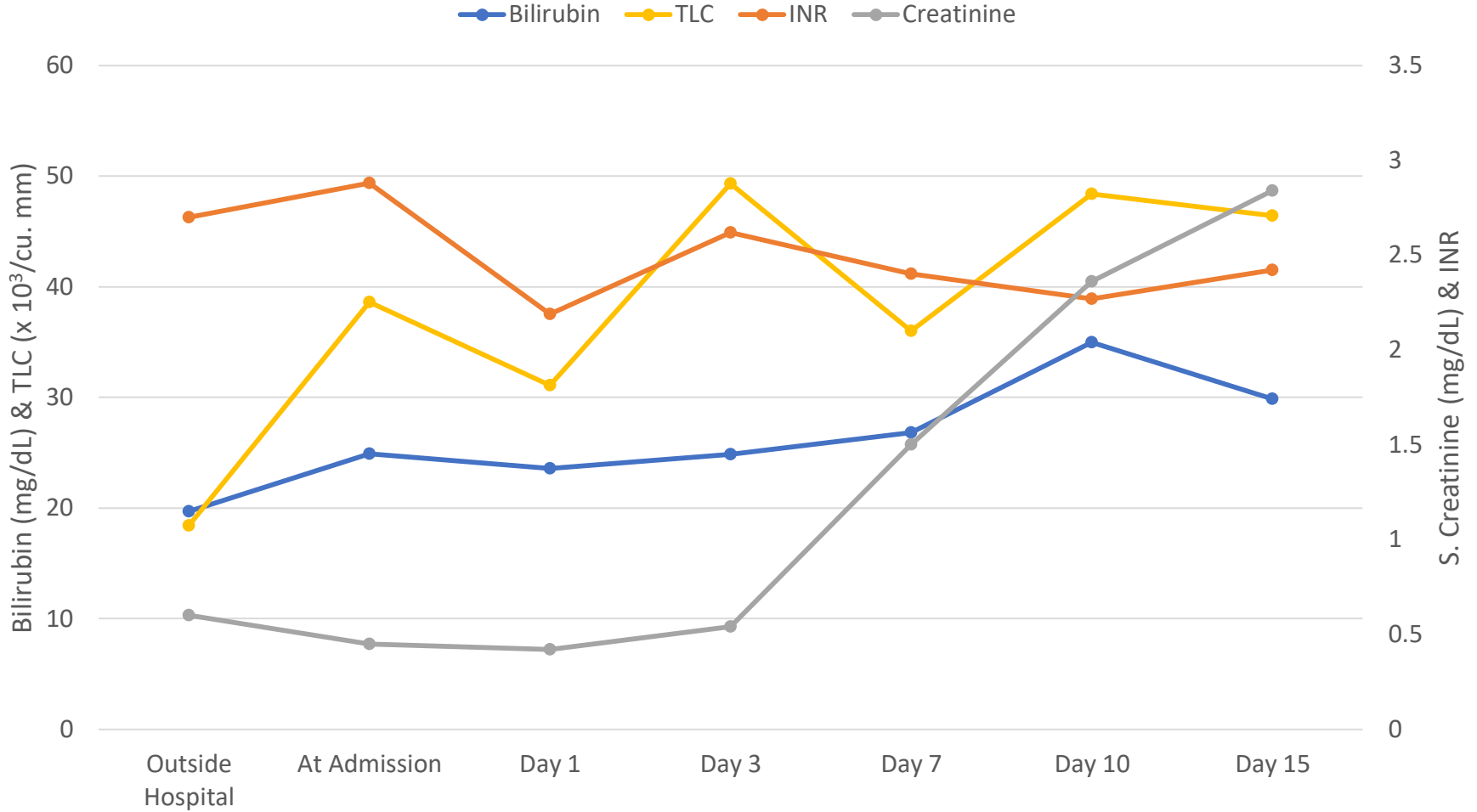
Physical Examination

- Pallor +, Icterus +, Pedal edema +
- No cyanosis, clubbing or lymphadenopathy
- Flaps +
- PR – 128/min; BP – 108/60 mm Hg; SpO₂ – 98% on 3L O₂ by nasal prongs
- Echymosis over left forearm present
- PA – soft, liver palpable 5 cm below costal margin, spleen palpable 2 cm below costal margin. Shifting dullness +
- Chest – Bilateral basal crepts +
- CVS – S1, S2 +, no murmur
- CNS – conscious obeying simple commands, disoriented to time

Investigations

	Outside Hospital	At Admission	Day 3	Day 7	Day 10	Day 15
Hb	9.6	9.1	8.4	8.2	8.9	7.9
TLC	18400	38600	49300	36000	49400	46400
Platelet count	1.62	1.65 lakh	175	1.55 lakh	1.60 lakh	1.65 lakh
PT/INR	31/2.7	33.1/2.88	30.1/2.62	27.6/2.4	26.1/2.27	27.8/2.42
Bilirubin	19.7/9.5	24.91/17.89	24.84/17.18	26.82/18.6	34.97/20.67	29.85/19.95
AST/ALT	191/55	209/64	158/52	216/56	193/29	151/12
ALP	253	161	126	115	173	158
Protein/Albumin	5.8/2.7	5.27/2.8	4.79/2.6	4.47/2.06	4.49/2.5	4.49/2.5
Urea/Creatinine	14/0.6	13.1/0.45	25.8/0.54	106.5/1.5	131.8/2.36	160.7/2.84
Na/K	133/4.2	128/2.99	137.5/4.12	134/3.06	136/3.68	142.1/2.37
Lactate		4.4	4.2	2.6	1.6	2

Investigations



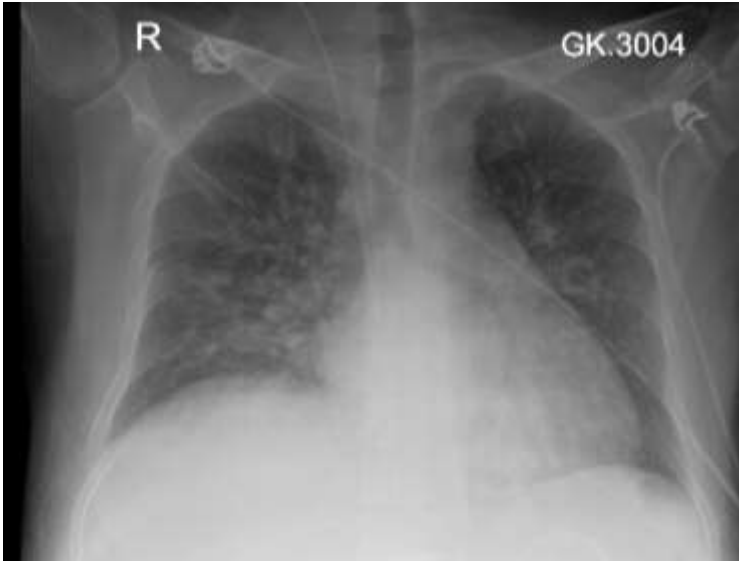
Investigations

HBsAg	Negative
Anti-HBc total	3.35
Anti-HCV	Negative
HIV	Negative
AFP	3.74

Urine R/M	Protein Trace, Bilirubin 3+, Rest NAD
UPCR	0.42
Urine sodium	14.4
HbA1C	5.4
G6PD	38.15 (normal)
TFT	Normal

	Outside Hospital	At Admission	Day 3	Day 7	Day 10	Day 15
Blood C/S	Sterile	Sterile	-	Sterile	-	Sterile
Ascitic C/S	Sterile	Sterile	-	Sterile	-	-
Procalcitonin	1.89	-	2.4	-	-	1.4

Chest X-Ray



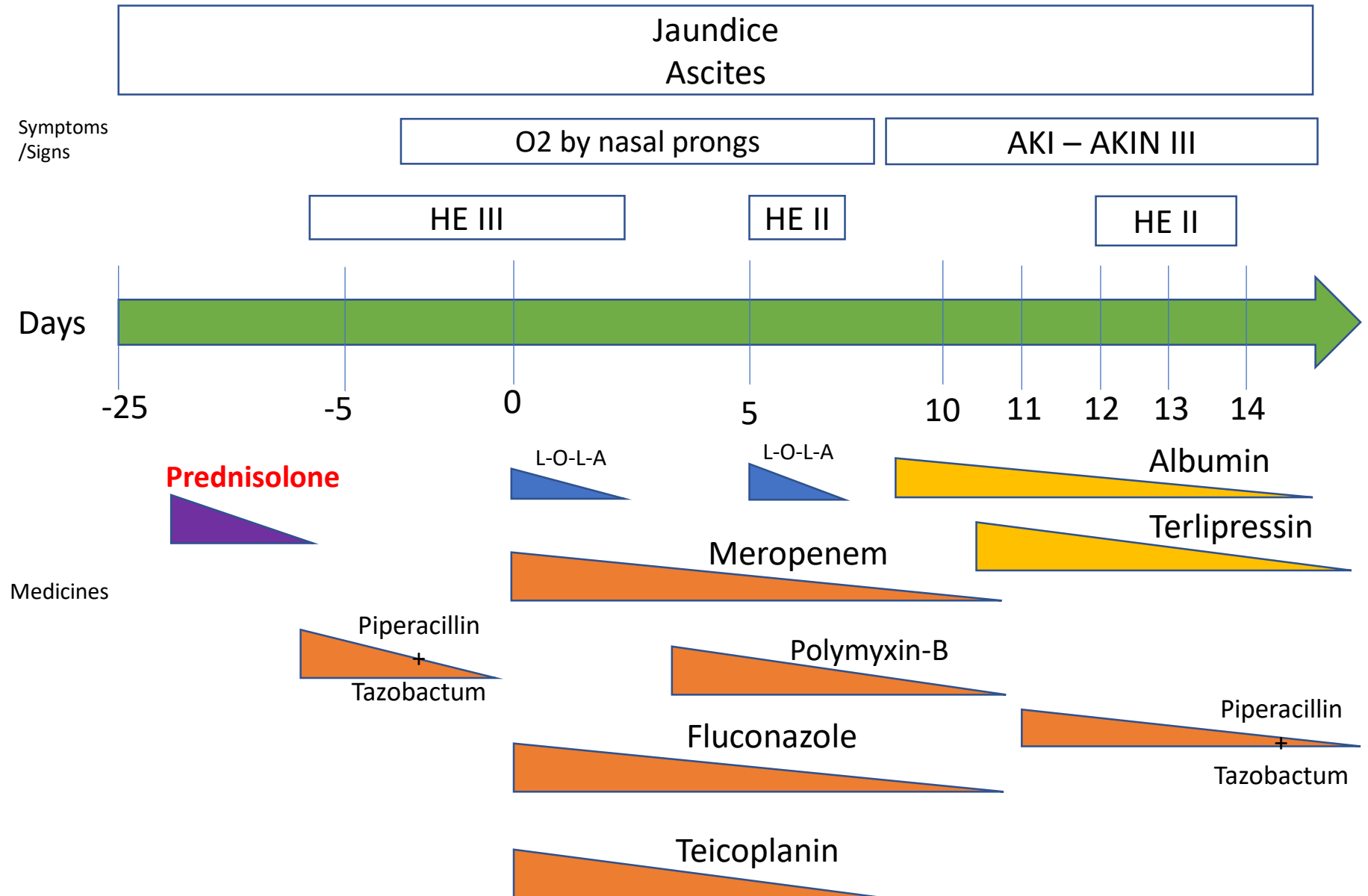
2D Echo

- Trace MR and TR
- RVSP – 40 mm Hg
- Normal LV function
- No RWMA (LVEF 55-60%)

CT Abdomen



Timeline



Diagnosis

- ACLF
 - Acute – Alcohol related steatohepatitis
 - Chronic – Alcohol related chronic liver disease ?cirrhosis
- Portal Hypertension
 - Ascites
 - Portosystemic Collaterals
 - Splenomegaly
- AKI-HRS
- HE Grade II-III
- Organ Failures
 - Liver
 - Coagulation
 - Cerebral
 - Renal

Prognostic Scores

	Day 0	Day 7	Day 15
MELD	30	33	39
AARC	10	10	11
CLIF-C ACLF	59	52	53
mDF	113	90	93
GAHS	10	11	11

Issues for discussion

- Management of renal dysfunction in this patient
- Role of steroids in this patient?
- Would a liver biopsy help in making treatment decisions in this patient?
- Role of plasmapheresis – Should it be offered in the presence of sepsis and renal dysfunction?
- Role of other bridging therapies
 - FMT
 - G-CSF
- Should this patient be offered LT?

Course in Hospital

- Patient underwent Live donor liver transplant at Day 15 of presentation to Max Hospital
- Donor – Sister
- Blood Group – O+ve → O+ve
- Modified Right lobe graft
- GRWR – 1.1
- Current Issues – POD22
 - Prolonged post LT ventilatory requirement → Tracheostomized
 - Poor renal recovery → On CRRT
 - Graft Dysfunction (Bilirubin – 11, OT/PT – 150/54)
 - Sepsis (Blood C/S – Enterococcus Faecium)

Thank You