

Joint Event

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&

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Non-alcoholic steatohepatitis before and after liver transplantation

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Non-alcoholic steatohepatitis has become a leading indication for liver transplantation in the western countries. After transplant, both recurrent and de novo non-alcoholic fatty liver disease can be usually diagnosed. Nonetheless, dedicated surveillance programs for patients with pre- or post-transplant non-alcoholic fatty liver disease are not offered. Patients waiting for transplant for non-alcoholic steatohepatitis show certain individualities and would deserve targeted stratification of mortality risk. Obesity, hyperlipidemia and diabetes mellitus can be frequently diagnosed in the post-transplant period. These conditions together with immunosuppressive regimen, make transplant recipients a high-risk subgroup for recurrent or de novo non-alcoholic fatty liver disease. Onset of fatty liver disease after liver transplant has a relevant impact on both morbidity and mortality. A targeted stratification of neoplastic and cardiovascular risk for patients with non-alcoholic steatohepatitis waiting for transplant would be mandatory. In both pre- and post-transplant period, non-alcoholic fatty liver disease should be considered not only a liver disease but also a cardiovascular risk factor. Patients within Transplant Program, especially those with known metabolic risk factors, should be followed with personalized diagnostic and life-style interventions before and after transplant.

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