

CO-ORGANIZED EVENT

5th World Congress on **Hepatitis & Liver Diseases**
&
2nd International Conference on **Pancreatic Cancer & Liver Diseases**
August 10-12, 2017 London, UK



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Lower GI bleeding in patients with cirrhosis

Lower gastrointestinal bleeding (LGIB) is an important cause of morbidity and mortality in patients with cirrhosis. It occurs in approximately 20% of all patients who present with gastrointestinal bleeding (GIB) with cirrhosis. Gastrointestinal diseases that cause LGIB in patients with cirrhosis include specific vascular diseases, inflammatory diseases and bowel ischemia. However, in patients with less severe cirrhosis and advancing age, the causes are much like the general population and must also be considered. The incidence and severity of LGIB in patients with cirrhosis depends upon the incidence of specific gastrointestinal diseases, coagulopathy, co-morbid diseases and polypharmacy. The evaluation and treatment of patients is adjusted to the rate and severity of hemorrhage and the clinical status of the patient and may be complicated by the presence of visual, auditory and cognitive impairment due to hepatic encephalopathy. Bleeding may be chronic and mild or severe and life threatening, requiring endoscopic, radiologic or surgical intervention and methods to reduce portal hypertension.

Biography

Maxwell Chait is a Fellow of the American College of Physicians, American College of Gastroenterology, American Gastroenterological Association and the American Society for Gastrointestinal Endoscopy. He is a Practicing Gastroenterologist and is an Assistant Professor of Medicine at the Columbia University, College of Physicians and Surgeons in New York City. He has authored numerous publications in reputed journals. He is the Editor-in-Chief of the *Journal of Liver Disease and Transplantation* and serves on the Editorial Board of the *World Journal of Gastrointestinal Endoscopy*.

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