Journal of Perioperative & Critical Intensive Care Nursing

Mini Review

Alcohol Related Liver Cirrhosis

Tarika Sharma^{1*}, Urvashi Sharma²

¹Assistant Professor, College of Nursing, Institute of Liver and Biliary Sciences, New Delhi, India; ²Tutor, KGMU College of Nursing, King George Medical University, Lucknow, Uttar Pradesh, India

ABSTRACT

Heavy alcohol consumption remains one of the most common reasons for development of advanced liver disease including cirrhosis, both through direct effects and as a contributing factor in other underlying liver diseases such as chronic hepatitis C infection. Nurses have a very important role in the care of patients with chronic liver disease by delivering lifestyle counseling interventions, patient education, provision of treatment to the patients, diet counselling, motivation to do physical activities, monitoring for the onset of complications and also in following up the patients for alcohol abstinence.

Keywords: Alcohol consumption; Liver cirrhosis; Chronic hepatitis C infection

INTRODUCTION

Heavy alcohol consumption remains one of the most common reasons for development of advanced liver disease including cirrhosis, both through direct effects and as a contributing factor in other underlying liver diseases such as chronic hepatitis C infection. At early stages, the liver can repair the damage produced by the insult. However, upon continuous damage, the accumulation of molecules triggers fibrosis, which subsequently progresses towards cirrhosis and, ultimately, hepatocarcinoma [1]. Overall, about 25% of the cases of liver cirrhosis recognize as initial trigger the overexposition to alcohol [2].

Definition

Cirrhosis of liver may be defined as a condition where there is replacement of liver cells with fibrous tissue leading to scarring of the liver usually due to long term damage to the liver cells.

Etiology

May be caused due to heavy and long term alcohol consumption, viral hepatitis, Non alcoholic fatty liver disease, disorders of bile duct or may also be due to autoimmune diseases.

Clinical Manifestations

Signs and symptoms of CLD can be nonspecific, such as fatigue, anorexia, weight loss, or depend upon the complication that the patient has developed. At a later stage the clinical menifestations may include: Jaundice, Spider angiomata, Nodular liver, Splenomegaly, Ascites, Caput medusae, Palmar erythema,

White nails, Hypertrophic osteoarthropathy/ Finger clubbing, Dupuytren's contracture, Gynecomastia, loss of male hair pattern, Hypogonadism, Flapping tremor (asterixis), Foetor hepaticus, Anorexia, fatigue, weight loss, muscle wasting, Type 2 diabetes etc.

Stages of Liver Cirrhosis

Broadly Cirrhosis may be compensated or decompensated. Compensated cirrhosis is the asymptomatic stage of cirrhosis. Compensated cirrhosis is defined as cirrhosis in the absence of ascites, variceal hemorrhage, encephalopathy, or jaundice.

Decompensated cirrhosis is the symptomatic stage of cirrhosis and is defined by the presence of any of the clinically evident complications of portal hypertension (ascites, variceal hemorrhage, encephalopathy) or liver insufficiency (jaundice) [3].

Diagnostic workup

Includes history, physical examination, lab investigations particularly liver function tests, PT INR values, hepatitis screening, fibroscan and liver biopsy.

Medical management

Medical Management includes strict alcohol abstinence, low sodium diet, drugs like beta blockers, antibiotics, antioxidants, vitamins and minerals supplements, lactulose, diuretics and albumin depending on the severity of symptoms. Liver transplantation may be indicated in the advanced stage of Cirrhosis (Figures 1 and 2).

Received date: June 02, 2021; Accepted date: June 16, 2021; Published date: June 23, 2021

Citation: Sharma T, Sharma U (2021). Alcohol Related Liver Cirrhosis. J Perioper Crit Intensive Care Nurs 7: 181. doi:10.35248/2471-9870.20.7.181

Copyright: © 2021 Sharma T et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

^{*}Corresponding author: Tarika Sharma, Assistant Professor, College of Nursing, Institute of Liver and Biliary Sciences, New Delhi, India, E-mail: tarikasharma91@gmail.com

Stages of liver damage

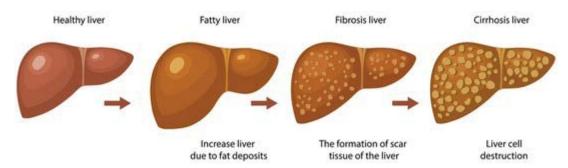


Figure 1: Stages of Liver damage.



Figure 2: Nursing management.

Complications

The three significant complications of Cirrhosis are due to portal hypertension (esophageal varices, ascites), hepatocellular insufficiency (e.g., jaundice, hepatic encephalopathy), and hepatocellular carcinoma. Patient may also develop sarcopenia, spontaneous bacterial peritonitis and renal failure as well [4].

Conclusion

Nurses have a very important role in the care of patients with chronic liver disease by delivering lifestyle counseling interventions, patient education, provision of treatment to the patients, diet counselling, motivation to do physical activities, monitoring for the onset of complications and also in following up the patients for alcohol abstinence. Moreover, Nurses can also play an important role in educating the community as a whole about ill effects of

alcohol intake and also in screening and early detection of chronic liver diseases.

REFERENCES

- 1. Schuppan D, Afdhal NH. Liver cirrhosis. The Lancet. 2008;371(9615):838-851.
- Rocco A, Compare D, Angrisani D, Zamparelli MS, Nardone G. Alcoholic disease: liver and beyond. World J Gastroenterol. 2014;20(40):14652-14659.
- 3. Mahtab MA. Liver: A Complete Book on Hepato-Pancreato-Biliary Diseases-E-Book. Elsevier Health Sciences. 2012.
- 4. Nusrat S, Khan MS, Fazili J, Madhoun MF. Cirrhosis and its complications: evidence based treatment. World J Gastroenterol. 2014;20(18):5442-5460.