



FATTY LIVER DISEASE- NAFLD

Non-alcoholic fatty liver disease (NAFLD) is a very common disorder and refers to a group of conditions where there is accumulation of excess fat in the liver of people who drink little or no alcohol. The most common form of NAFLD is a non serious condition called fatty liver. In fatty liver, fat accumulates in the liver cells. Although having fat in the liver is not normal, by itself it probably does not damage the liver.

Symptoms

The majority of individuals with NAFLD have no symptoms and a normal examination.

Causes of NAFLD/NASH

NAFLD is part of the metabolic syndrome characterized by diabetes, or pre-diabetes (insulin resistance), being overweight or obese, elevated blood lipids such as cholesterol and triglycerides, as well as high blood pressure. Not all patients have all the manifestations of the metabolic syndrome.

Risk Factors

NAFLD is a very common disorder affecting and may affect as many as one in three to one in five adults and around one in ten children in the United States. Obesity is thought to be the most common cause of fatty infiltration of the liver. Some experts estimate that about two thirds of obese adults and half of obese children may have fatty liver.

Screening/Diagnosis

The diagnosis of NAFLD is usually first suspected in an overweight or obese person who is found to have mild elevations in their liver tests during a routine blood testing or incidentally detected on radiologic investigations such as abdominal ultrasound or CT scan. However NAFLD can be present with normal liver blood tests. The diagnosis of NAFLD is confirmed by imaging studies, most commonly a liver ultrasound, showing accumulation of fat in the liver. Fat accumulation in the liver can also be caused by excess alcohol intake, certain medications, viral hepatitis, autoimmune liver disease, and metabolic or inherited liver disease. These need to be excluded as causes of fatty liver disease in order to confirm the diagnosis of NAFLD.

Treatment of NAFLD/NASH

A few studies have suggested that weight loss may be associated with regression of fat within the liver. Therefore, the most important recommendations for people with fatty liver are to

- Lose weight if they are overweight or obese,
- Increase their physical activity,
- Follow a balanced diet
- Avoid alcohol
- Avoid NSAIDS (see next page)

New evidence suggests that Mediterranean diet (rich in monounsaturated fatty acids) may be more beneficial than low fat diet. It is also important to control diabetes and treat elevated cholesterol levels when appropriate.



NSAIDS

Non Steroidal Anti Inflammatory Drugs

****Medications to avoid if told to avoid NSAIDS*****

Generic name	Brand name
Aspirin	Anacin, Ascriptin, Bayer, Bufferin, Ecotrin, Excedrin
Choline and magnesium salicylates	CMT, Tricosal, Trilisate
Choline salicylate	Arthropan
Celecoxib	Celebrex
Diclofenac potassium	Cataflam
Diclofenac sodium	Voltaren, Voltaren XR
Diclofenac sodium with misoprostol	Arthrotec
Diflunisal	Dolobid
Etodolac	Lodine, Lodine XL
Fenoprofen calcium	Nalfon
Flurbiprofen	Ansaid
Ibuprofen	Advil, Motrin, Motrin IB, Nuprin
Indomethacin	Indocin, Indocin SR
Ketoprofen	Actron, Orudis, Orudis KT, Oruvail
Magnesium salicylate	Arthritab, Bayer Select, Doan's Pills, Magan, Mobidin, Mobogesic
Meclofenamate sodium	Meclomen
Mefenamic acid	Ponstel
Meloxicam	Mobic
Nabumetone	Relafen
Naproxen	Naprosyn, Naprelan
Naproxen sodium	Aleve, Anaprox
Oxaprozin	Daypro
Piroxicam	Feldene
Rofecoxib	Vioxx
Salsalate	Amigesic, Anaflex 750, Disalcid, Marthritic, Mono-Gesic, Salflex, Salsitab
Sodium salicylate	various generics
Sulindac	Clinoril
Tolmetin sodium	Tolectin
Valdecoxib	Bextra