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Incidental finding of fatty liver in necropsies

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Background and aim: Non alcoholic fatty liver disease (NAFLD) and alcoholic fatty liver disease (ALD) are the most common emerging causes of chronic liver disease. By knowing the factors involved in their development and screening could improve the prognosis of these patients. To determine prevalence of NAFLD as incidental

Table 1

Multivariate predictive models.

A. Multivariate predictive model to evaluate factors associated with the presence of steatohepatitis with hepatic necroinflammatory activity at autopsy.

Variables	p Value	OR	95% CI	
			Lower	Higher
Atherosclerosis	0.008	.405	.208	.789
Obesity	0.948	1.025	.490	2.144
Alcohol consumption	0.044	1.974	1.018	3.827
Diabetes	0.142	.603	.307	1.184
Arterial hipertension	0.185	1.607	.797	3.238
Constant	0.351	1.385		

B. Multivariate predictive model to evaluate factors associated with the presence of significant or greater liver fibrosis (F2-F4) at autopsy.

Variables	p Value	OR	IC 95% CI	
			Lower	Higher
Atherosclerosis	0.067	.573	.316	1.041
Obesity	0.934	1.032	.489	2.178
Alcohol	0.002	2.529	1.407	4.546
Diabetes	0.955	1.020	.517	2.011
Arterial hipertension	0.077	1.811	.938	3.498
Necroinflammatory activity	< 0.0001	6.533	3.720	11.471
Constant	< 0.0001	.176		

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finding at autopsies performed for all causes of mortality and to analyze the main characteristics of these patients.

Methods: Type and design of the study: Observational, descriptive, transversal study. Last 10 years-death causes reports of Department of Pathology were analyzed (January 2010 – December 2019). Descriptive and analytical statistics: X 2, exact Fisher's test, univariate and multivariate logistic regression models were used.

Results: 4557 autopsies were registered. Fatty liver was found in 6.4% of the cases. 53.3% were women; 51 ± 15 years-old, otherwise 53.6% and 46.4% of the cases were diagnosed with simple steatosis and steatohepatitis with necroinflammatory activity respectively. A 49.8% presented liver fibrosis (F1 = 13.1%; F2 = 16.5%; F3 = 5.2%; F4 = 15.1%. The etiology through clinical history and histological findings compatible with alcoholic liver injury occurred in 23% of cases, NAFLD 33.7%, mixed type 6.5%, and 36.8% with unidentified etiology. The multivariate analysis showed alcohol intake as the major risk factor for necroinflammation (OR = 1.97). History of alcohol intake (OR = 2.52;) and presence of necroinflammatory activity (OR = 6.53; p<0.0001) were predictive factors of fibrosis F2-F4. (Table 1).

Conclusions: Steatosis, steatohepatitis, and fibrosis / cirrhosis were found in a high proportion. Alcohol consumption is significantly associated with liver injury in Mexico.

Conflicts of interest: The authors have no conflicts of interest to declare.

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Obesity and diabetes as a risk factor of chronic disease of the liver in the regional hospital

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Background and aim: Obesity and diabetes 2 are health problems in western countries. And Mexico is probably the main cause