stages, multiple series demonstrated 5-20% prevalence in cirrhotic patients.

Aim: To identify risk factors for the development of PVT in cirrhotic patients.

Material and methods: Research Design: Case-control study. Procedure: We searched medical records from inpatients during 2019 with the diagnosis of PVT; cirrhotic patients with PVT were used as cases and paired in a 1:2 ratio with cirrhotic patients without PVT. Qualitative variables were depicted as frequencies and percentage, numeric variables as mean and standard deviation. X2, fisher's exact, student's t and Mann-Whitney's U were used to compare groups accordingly. Logistic regression was used to examine risk factors. *P* value <0.05 was considered statistically significant.

Results: Out of 1371 records, 40 patients with PVT were found (2.92%); 30 of them with cirrhosis were paired with 60 non-PVT cirrhotic patients. 53 (58.9%) were male; mean age: 56,2 ± 13,9 years. According to Child-Pugh: 49 (54,4%) A, 22 (24,4%) B and 19 (21,1%) C. Fifteen (16,7%) had hepatocellular carcinoma (HCC). PVT was more prevalent in women than men (17/37 vs. 13/53 [45.9 vs. 24.5%]; OR = 2.6, IC95%: 1.1-6.4; *P* = 0.03). Patients with HCC had a higher prevalence of PVT against those without HCC (11/15 vs. 19/75 [73.3 vs. 25.3%]; OR = 8.1, IC95%: 2.3-28.5; *P* = 0.001). Decompensated cirrhosis patients had a higher rate of PVT than compensated patients (19/41 vs. 11/49 [46.3 vs. 22.4%]; OR = 2.9, IC95%: 1.2-7.4; *P* = 0.02). Adjusted multivariate logistic regression model is shown in Table 1.

Table 1
Adjusted multivariate logistic regression model exploring risk factors for PVT in patients with cirrhosis.

Variables	*P*	OR	95%CI	
			Lower	Upper
Female	0.06	2.690	0.951	7.606
Hepatocellular carcinoma	0.005	7.722	1.876	31.783
Child-Pugh B	0.86	1.114	0.325	3.820
Child-Pugh C	0.07	3.184	0.889	11.400
Constant	0.000	0.165		

Conclusions: PVT is more frequent in women and decompensated cirrhosis, the presence of HCC in cirrhotic patients is the main prothrombotic factor.

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

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Prevalence and characteristics of cirrhotic patients with portal vein thrombosis admited in the Gastroenterology Department of the Hospital General de Mexico

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Background and aim: Portal vein thrombosis (PVT) is a complication in the natural history of liver disease, a "rebalanced" coagulation system can promote bleeding or thrombotic tendency. The prevalence of PVT in cirrhosis is 1% among compensated patients and 8-25% in decompensated patients. Aim. To determine the prevalence and characteristics of cirrhotic patients with PVT.

Material and methods: Research design: Descriptive, cross-sectional / prevalence. Procedure: We analyzed medical records of patients admitted during 2019, all cirrhotics subjects with PVT were included. Qualitative variables were expressed in frequencies and percentages and numerical variables in mean and standard deviation.

Results: Of 491 cirrhotic patients hospitalized to the Gastroenterology department in 2019, we found 24 patients with PVT (4.89%), 15 (62.5%) were women, mean age was 58.13 ± 13.51 year. 6 (25.0%) with malignancy, of those latter 6/6 (100.0%) with hepatocellular carcinoma. Regarding of cirrhosis etiology: 9 (37.5%) were of unknown cause, 6 (25.0%) ASH, 3 (12.5%) from NASH, 1 (4.2%) from hepatitis-C, 1 (4.2%) autoimmune hepatitis and 1 (4.2%) CBP. Regarding Child-Pugh: 11 (45.8%) B, and 13 (54.2%) C. Mean MELD was 21.58 ± 9.74. Upper gastrointestinal bleeding was present in 17 (70.8%) subjects, of those 15 (88.2%) due to esophageal varices and 11 (64.7%) for esophageal-gastric varices. 5 (41.7%) presented spontaneous bacterial peritonitis (SBP). 9 (37.5%) admitted with hepatic encephalopathy. 21 (87.5%) with ascites, of those: 6 (28.6%) grade I, 12 (57.1%) grade II, only 3 (14.3%) grade III. Complementary studies in patients without acute infection: leukocytes: 8,058 ± 4.41, creatinine 1.54 ± 0.86, albumin: 2.5gr/dl ± 0.62, AST: 127 U/L ± 224.83, ALT: 70 U/L ± 107.44, ALP: 155.75 U/L ± 74.51, GGT: 62.58 U/L ± 52.04, total bilirubin: 5.41 mg/dl ± 7.34, PT: 18.20 ± 4.32, INR: 1.57 ± 0.40. Regarding the location of the thrombus: 14 (58.3%) presented in the portal vein trunk, 6 (25.0%) in the trunk and its branches, and 4 (16.7%) only in one branch.

Conclusions: PVT is more frequent in cirrhotic women, decompensated cirrhosis, alcohol related and the presence of hepatocarcinoma. The most frequent location was in the portal vein trunk.

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

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Prevalence and characteristics of non-cirrhotic patients with thrombosis of the portal system

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Background and aim: Portal vein thrombosis (PVT) is the blood clot formation within the trunk of the portal vein or its main branches. PVT prevalence is ~1% in the general population. Aim: To determine the prevalence and characteristics of non-cirrhotic patients with PVT.

Material and methods: Research design: Descriptive, cross-sectional/prevalence. Procedure: We reviewed the medical records of all the patients admitted in 2019 with diagnosis of PVT. Of those we included only non-cirrhotic patients with a diagnosis of PVT. Qualitative variables were expressed as frequencies and percentages, numerical variables as mean and standard deviation.

Results: From 1371 patients admitted in the Gastroenterology Department in 2019, we found 40 patients with PVT (2.92%), of those only 10 non-cirrhotic patients were included. The prevalence was 0.76%; eight (80%) were men, mean age was 48.38 ± 12.4 years-old. 1 patient had autoimmune hepatitis (10.0%) and 2 (20.0%)