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Abstracts of the 2021 Annual meeting of the ALEH (Asociación Latinoamericana para el Estudio del Hígado)

P-1 PREVALENCE AND EPIDEMIOLOGY OF BACTERIAL INFECTIONS IN PATIENTS WITH ALCOHOLIC HEPATITIS: A RETROSPECTIVE STUDY OF PATIENTS ADMITTED AT THE SAN RAFAEL DE ALAHUELA HOSPITAL, COSTA RICA

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Introduction: Bacterial infections in patients with alcoholic hepatitis have a high incidence and can contribute to the developments of organ failure and death.

Aims: To determinate the prevalence and epidemiology of bacterial infections in patients with alcoholic hepatitis; to evaluate the epidemiological and clinical characteristics in patients with alcoholic hepatitis; to identify predictive factors associated with infections in patients with alcoholic hepatitis; to determinate the proportions of patients with positive microbiological cultures; and to investigate the mortality in patients with alcoholic hepatitis with and without infection.

Methodology: This is a retrospective and observational study that included patients admitted to the San Rafael de Alajuela Hospital-Costa Rica; between November 2019 and February 2020. The medical records of all the patients who met the selection criteria were reviewed.

Results: 41 patients (80% male, mean age: 50 years \pm 10) were analyzed. A high prevalence of concurrent sepsis was observed (73%, 36% nosocomial), with a proportion of culture positivity of 45%. Only the presence of leukocytosis and neutrophilia was associated with an increased risk of infection. The AUROC of the presence of leucocytosis was 0.86 (95% CI: 0.73-0.98) and the cut-off was 9520/mm³ presented the best diagnostic accuracy (S: 90%, E: 72.7%). Acute on chronic liver failure and severe alcoholic hepatitis was associated with high mortality.

Conclusion: The results confirm the high prevalence of bacterial infections in patients with alcoholic hepatitis. Leucocytes value was a risk factor for the development of infection and acute on chronic liver failure was associated with higher mortality.

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P-2 HEPATIC STEATOSIS AMONG PEOPLE LIVING WITH HIV IN SOUTHERN BRAZIL: PREVALENCE AND RISK FACTORS

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Introduction: Chronic liver disease is an important cause of morbidity and mortality among people living with human immunodeficiency virus (HIV) and is frequently related to non-alcoholic fatty liver disease (NAFLD).

Objective: The objective is to estimate the prevalence and risk factors of hepatic steatosis among consecutive patients with stable HIV infection on antiretroviral therapy (ART). Also, the use of transient elastography (TE) as a mean to identify a subgroup at risk for non-alcoholic steatohepatitis (NASH) and/or liver fibrosis.

Methods: HIV infected patients were enrolled between August 2016 and February 2017. Inclusion criteria: \geq 18 years with undetectable HIV viral load. Exclusion criteria: pregnancy; alcohol intake \geq 20 g/day and co-infection B or C viruses. Patients underwent ultrasound (US) to diagnose liver steatosis. Significant fibrosis (\geq F2) was estimated if at least one of the following were present: APRI > 1.0, FIB4 > 3 and/or liver stiffness \geq 7.1kPa. Subjects with TE \geq 7.1kPa were proposed a liver biopsy and NAFLD Scoring System (NAS) \geq 3 was considered as diagnosis of NASH.