



Figure 1: Kaplan Meier curves. Left: total cohort; Middle: resectable CCA versus unresectable; Right: candidates to palliative modalities submitted to chemotherapy versus no-chemotherapy

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**P-11 POTENTIALLY HEPATOTOXIC DRUGS ARE STILL BEING PRESCRIBED TO LIVER DISEASE PATIENTS UNDER TERTIARY CARE: IT IS TIME TO SAY ENOUGH**

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**Introduction and Aim:** Drug-induced liver injury (DILI) manifests as a spectrum of clinical presentations that carries morbidity and mortality. Patients with chronic liver disease (CLD), particularly hospitalized, are at high risk for developing DILI. We aimed to investigate the use of potentially hepatotoxic drugs (PHD) in patients with CLD in a tertiary university hospital.

**Materials and Method:** Adult (≥ 18 years-old) with CLD admitted to the hospital from January 2016 to December 2018 were evaluated regarding PHD, assessing the risk of DILI and liver enzymes behavior after exposure.

**Results:** From 931 hospitalized patients with CLD, 291 (31.3%) were exposed to hepatotoxic drugs during their hospitalization. Of those, 244 (83.8%) were cirrhotic. The most frequent causes of liver disease were hepatitis C (41.2%), followed by alcohol (13.2%), hepatitis C/alcohol (11.7%) and non-alcoholic fatty liver disease (5.8%). Decompensated cirrhosis (46.7%) was the main reason for hospital admission. The most often prescribed PHD were antibiotics (67.7%), cardiovascular drugs (34.4%), neuromodulators (26.1%) and anesthetics (19.9%). After exposure, 113 patients (38.8%) presented significant elevated liver enzymes. Surprisingly, PHD were more often prescribed in GI/Liver unit (48.8%) followed by emergency/intensive care unit (28.5%). A total of 65 patients (22%) died, however in neither case was it possible to safely infer causal relationship among PHD, liver enzymes and death.

**Conclusion:** PHD prescription is frequent in patients with CLD even in a tertiary university hospital and in the gastroenterology and hepatology department, exposing these patients to an additional risk.

**Conflict of interest statement:** The authors have nothing to disclose.

**Keywords:** Liver diseases, drug-induced liver injury, acute-on-chronic liver failure, acute liver failure

**TABLE 1**  
Baseline characteristics of all patients, cause of chronic liver disease and drugs.

Characteristics	N	N %
<b>Gender</b>		
Woman	136	46.7
Men	155	53.3
<b>Clinical decompensation</b>		
Ascites	121	41.6
Digestive Bleeding	45	15.5
Spontaneous Bacterial Peritonitis	29	10
Impaired kidney function	97	33.3
Hepatic Encephalopathy (HE)	77	26.5
ACLF	9	3.1
Cirrhosis	244	83.8
<b>Etiology of Chronic Liver disease</b>		
HCV	120	41.2
Alcoholic disease	39	13.4
HCV/alcoholic	34	11.7
NAFLD	17	5.8
HBV	11	3.8
Cholestatic disease	10	3.4
Autoimmune hepatitis	4	1.4
HCV + NAFLD	1	0.3
Other	36	12.3
No data	14	4.8
<b>Drug</b>		
Antibiotics	197	67.7
NSAIDs	24	8.2
Antifungal	21	7.2
Antineoplastic	4	1.4
Neuromodulators	76	26.1
Antiviral	19	6.5
Antithyroid	14	4.8
Statins	18	6.2
Antituberculosis	4	1.4
Cardiovascular	100	34.4
Anesthetics	58	19.9
<b>Cause of hospitalization</b>		
Decompensated cirrhosis	136	46.7
HCC	54	18.6
Others	101	34.7
<b>Department of diagnostic</b>		
Emergency/ICU	83	28.5
Hospitalization GAS/HEP	142	48.8
Hospitalization /Others	66	22.7
<b>Death</b>		
	65	22

ACLF, acute-on-chronic liver failure; HBV, hepatitis B virus; HCV, hepatitis C virus; NAFLD, Non-alcoholic fatty liver disease; HCC hepatocellular carcinoma; GAS/HEP hepatology; NSAIDs, nonsteroidal anti-inflammatory drugs; ICU, intensive care unit.

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**P-12 QUALITATIVE EVALUATION OF NATURAL PRODUCTS USED BY PATIENTS IN A BRAZILIAN HEPATOTOXICITY AMBULATORY**

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**Introduction:** Drug-induced liver injury (DILI) can be caused by more than 900 drugs, toxins, and herbs, making it a major problem of clinical importance. The use of food supplements and/or herbal products has become increasingly common in the daily lives of the population worldwide. Natural products can be used for a variety of therapeutic purposes, such as treating gastrointestinal disorders and relieving menopausal symptoms.

**Aim:** To evaluate the hepatotoxic activity of extracts of herbal medicines and dietary supplements used by patients with suspected DILI at a hepatotoxicity ambulatory.

**Methods:** This is an experimental study and was carried out through chemical screening of plant species and dietary supplements for the determination of phytochemical classes. The samples were obtained of patients had DILI suspect, in ambulatorial care of a University Hospital. The experiments were made at Pharmacognosy laboratory.

**Results:** 18 samples were received from January 2019 to March 2020. Of these samples, 10 were leaves or stems, and 08 were herbal products or food supplements, with 02 samples being excluded due to contamination. Of the 10 (55%) samples that went to the analysis process, the presence of groups of chemical compounds from secondary plant metabolism was found, where 07 (36%) showed positive results for the presence of triterpenes and steroids. Of these 07 samples, 02 (11%) showed positive results for the presence of alkaloids.

**Conclusion:** There is a profile of liver damage caused by medicinal plants and the compounds present in them, which are mostly: alkaloids, triterpenes, steroids and anthraquinones. After conducting qualitative tests, triterpenes and steroids were identified in most samples (70%), in addition the presence of alkaloids (28%), suggesting that these can be responsible for the cases of DILI, but more robust studies on these samples are needed to identify chemical structure species.

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### P-13 COMPARISON OFF DIFFERENT PROGNOSTIC SCORES FOR PATIENTS WITH CIRRHOSIS HOSPITALIZED WITH SARS – COV 2 INFECTION

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