P-31 NORMAL TRANSAMINASES IN OBESE PATIENTS WITH METABOLIC ASSOCIATED STEATOHEPATITIS

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Introduction: Metabolic associated fatty liver disease (MAFLD) and metabolic associated steatohepatitis (MASH) are the most frequent causes of chronic liver disease. Measurement of transaminases may not correlate with the severity of histopathological changes.

Objective: We aimed to identify the frequency of normal and elevated transaminases in obese patients with MASH, as well as their clinical, biochemical and histological characteristics.

Methods: A retrospective cross-sectional study was conducted in the bariatric surgery service of a private clinic. Obese patients older than 18 years with a body mass index (BMI) $>30 Kg/m^2$ and 2 co-morbidities undergoing a gastric sleeve surgery were included. Measurement of biochemical routine laboratory exams was performed. Insulin resistance was calculated using the homeostasis evaluation model (HOMA-IR). All patients underwent liver biopsies prior to surgery and the diagnosis of MASH was based on the Brunt criteria.

Results: 159 obese patients with MASH were included, of which 47.2% had normal transaminases and 52.8% elevated transaminases. Factors associated with alteration in transaminases were: being male OR=4.02 (95% CI: 2.03-7.96; p<0.01), diagnosis of type 2 diabetes mellitus OR=4.86 (95% CI: 1.97-11.95; p<0.01) and levels of GGT >50 IU/L OR=7.50 (95% CI: 3.40-16.56; p<0.01). The values of HOMA-IR and GGT were significantly higher in the group of high transaminases (p<0.01). Differences in the degree of fibrosis were not associated with transaminases levels.

Conclusions: In conclusion we found that 47.2% of obese patients with MASH had normal transaminases. The degree of fibrosis was not associated with transaminases levels.

P-32 EVALUATION OF HEPATIC FIBROSIS THROUGH NON-INVASIVE METHODS IN PATIENTS WITH CHRONIC VIRAL HEPATITIS B AND C

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Introduction: Biopsy has been considered the method of choice for staging fibrosis in liver disease. However, as it is an invasive method subject to sampling errors and morbidity, new non-invasive methods have been proposed for the assessment of liver fibrosis.

Aims: To evaluate and compare serum fibrosis biomarkers (APRI and FIB4) with transient liver elastography (THE), gold standard in this study in patients with chronic viral hepatitis B and C.

Methods: Cross-sectional study of patients with chronic hepatitis B or C virus undergoing THE. The patients were evaluated using serum liver fibrosis markers APRI and FIB4. The degree of fibrosis ≥ 2 of the Metavir classification was defined as significant fibrosis. The diagnostic performance of both methods was calculated and compared using the ROC curve (AUROC).

Results: The study included 73 patients, 50 with HBV and 23 with HCV; 50.7% were female, mean age 48.6 ± 13.3 years. Significant fibrosis was observed in 31 patients. The accuracy of serum markers in the diagnosis of liver fibrosis was determined by AUROC, APRI 0.79 and FIB4 0.76 (P = .42); PPV and NPV APRI 91.7% and 76.9% respectively; FIB4, PPV = 87.5% and NPV = 77.8%.

Conclusion: The study demonstrated that there was no difference in diagnostic performance between the APRI and FIB4 methods, which were considered tests with good accuracy in the diagnosis of significant fibrosis in patients with chronic viral hepatitis.

P-33 EVALUATION OF CIRCULATING METABOLOME IN THE SEARCH OF POTENTIAL DRUG-INDUCED LIVER INJURY BIOMARKERS

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Introduction: Idiosyncratic drug-induced liver injury (DILI) is a complex hepatic condition whose diagnosis is challenging due to lack of specific biomarkers.

Objectives: We aimed to evaluate serum metabolomic differences between patients with DILI and with other causes of liver injury in search for specific DILI biomarkers.

Methods: Metabolomic profiles of serum samples from 26 Spanish DILI patients, 34 with non-DILI acute liver injury (ALI) and 48 healthy controls, were analyzed using UHPLC-MS. To assess changes in disease progression, DILI and ALI patients were followed-up from detection (visit 1), one week (visit 2) and >30 days (visit 3). Data were analyzed using Shapiro-Wilk, Student's t and Wilcoxon tests.

Results: Several amino acids, fatty acids (FAs), LPI and bile acids were increased, whereas the glycerophospholipids MEPE and MAPC