

### P- 99 ASSOCIATION OF LIVER ABNORMALITIES WITH DISEASE SEVERITY IN COVID-19

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**Introduction and Objectives:** Identifying independent risk factors for adverse outcomes in patients infected with severe acute respiratory syndrome coronavirus 2 can support prognostication, resource utilization, and treatment. The presenting symptoms of this virus are variable and the evolution and clinical significance of abnormal liver chemistries on outcomes in patients with coronavirus disease 2019 (COVID-19) is not well characterized. This study aimed to evaluate if aspartate aminotransferase (AST) and alanine aminotransferase (ALT) levels could predict disease severity in patients with COVID-19.

**Materials and Methods:** a retrospective, observational and cross-sectional study was carried out with data from the medical records of patients who had positive SARS-CoV2 nasal swabs, were over 18 years of age and were admitted consecutively and under free demand at a Brazilian academic hospital from April 1 to May 31, 2021. The characteristics of liver abnormalities and outcomes of patients with COVID-19 were compared.

**Results:** altogether, 222 patients were enrolled, three patients with cirrhosis and 82% with abnormal liver chemistries during hospitalization. Of these, 20% showed transaminases >5 times the upper limit of normal (ULN). The most prevalent liver abnormality was AST. The increase in transaminases was directly proportional to the higher rates of intensive care unit admission, longer hospital stays, higher rates of vasoactive drug use and greater pulmonary involvement in its severe forms. We found that elevations of transaminases >5 times the ULN, at any time during hospitalization were associated with increased mortality.

**Conclusions:** coronavirus 2 hepatitis may lead to poor outcomes in patients who are hospitalized for the disease. Therefore, monitoring liver chemistries, especially AST is necessary for hospitalized patients with COVID-19.

<https://doi.org/10.1016/j.aohep.2023.100985>

### P- 101 TREATMENT OF PATIENTS INFECTED WITH HEPATITIS C VIRUS IN TWO REFERENCE CENTERS IN PARAGUAY.

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**Introduction and Objectives:** Treatment with Direct-Acting Antivirals (DAA) has revolutionized the treatment of hepatitis C, with a high success rate. There is very poor information on the outcome of treatment in these patients in Paraguay. Gathering information in this regard would help develop health-related public policies related to the management of this infection in the country. The aim is to determine the proportion of patients with Hepatitis C who received treatment, of what type, and the percentage of patients with a sustained virologic response (SVR).

**Materials and Methods:** Observational, descriptive, cross-sectional, retrospective design. Patients from the Gastroenterology Department of the Clinicas Hospital were included from April 2011 to September 2021 and patients from a private referral center from April 2000 to September 2021.

**Results:** 8,504 medical records from the Clinicas Hospital and 8,137 from the private center were analyzed. Fifty-three patients diagnosed with HCV infection were identified. 55% (29) received an IFN-based regimen, 32% (17) received DAA-based treatments, and 19% (10) did not have access to treatment. Among the patients in the first group, 20 received PEG-INF + Rivabirin, with SVR in 65% of the cases, and 6 received non-pegylated IFN + Riva-birin, achieving SVR at 33%. In the DAA group, we found that 100% of patients achieved SVR. 41% of them received Sofosbu-vir + Ledipasvir, 24% Sofosbuvir + Daclatasvir and 18% Sofosbuvir + Velpatasvir.

**Conclusions:** This study showed 46 patients treated in our country. All those treated with DAAs (17) achieved SVR. Due to their great effectiveness, we must direct public health efforts to ensure that patients can have free access to DAAs.

<https://doi.org/10.1016/j.aohep.2023.100986>

### P- 102 CLINICAL CHARACTERISTICS OF LIVER CIRRHOSIS SECONDARY TO METABOLIC SYNDROME AND COMPARISON WITH ETHYL CIRRHOSIS

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**Introduction and Objectives:** Liver cirrhosis secondary to metabolic syndrome has become one of the most prevalent causes of cirrhosis and is assumed to have a prognosis similar to that of cirrhosis of other etiologies. This study aimed to describe the clinical characteristics of liver cirrhosis secondary to metabolic syndrome (MAFLD) at the Clinicas Hospital and compare it with ethyl cirrhosis (ET).

**Materials and Methods:** Analytical, retrospective, cross-sectional, non-probabilistic observational study of consecutive cases. The medical records of the Gastroenterology Department of the Clinicas Hospital for the years 2018 and 2019 were reviewed and patients diagnosed with ET cirrhosis and MAFLD were recruited. For data processing, the computer programs Excel 2010, Word 2010 and the statistical programs MedCalc version 20.110, Epi dat 3.1 and IBM SPSS were used.

**Results:** 900 medical records were analyzed, 100 patients with liver cirrhosis were identified, 77 of alcoholic etiology and 23 secondary to metabolic syndrome.

**Conclusions:** In the present study, liver cirrhosis secondary to MAFLD presents complications typical of cirrhosis, the incidence of hepatocarcinoma, functional status and average survival similar to those of alcoholic cirrhosis. However, elements of the metabolic syndrome are much more so in cirrhotic MAFLD than in cirrhotic ET.