9 POINTS FOR NAFLD AND NASH

Definitions
NAFLD: Overarching term for the most prevalent chronic liver disease that describes a spectrum of conditions of liver steatosis
NAFL: A non-progressive state
NASH: More aggressive form of NAFLD, which can progress to advanced liver fibrosis, cirrhosis, or liver cancer

Epidemiology
Sixty - ninety percent of persons with diabetes in outpatient clinics may have NAFLD. Twenty percent may have liver fibrosis but the diagnosis is often missed due to low screening rates for NAFLD and NASH. The earlier NAFLD and NASH is detected and managed systematically, the better the outcomes for the patient.

Predisposition
Current data suggest greater prevalence in men and post-menopausal women and amongst those with Hispanic, South Asian and Middle Eastern origin compared to African-American population.

Risks for advanced liver fibrosis
The following features increase the risk: Prediabetes or Type 2 Diabetes, obesity or overweight, and ≥2 cardiometabolic risk factors. Age >50 years or having above risk factors more severe, as well as select prognostic genetic factors.

Screening for liver fibrosis
Use non-invasive liver scores (FIB-4 scores) to examine liver risk when seeing persons with type 2 diabetes in outpatient clinics. FIB-4 scores 2.67 indicates high risk. Refer the patient to a liver specialist if the score is >2.67.

Treatments
Treatment for NAFLD is weight loss! Diet is an important way to target weight loss. The best diets include healthier fats, and more fruits and vegetables (Mediterranean diet & DASH diet). Diets with high saturated fat and fructose content should be avoided. Exercise is the gold standard for reducing insulin resistance. Moderate-intensity exercise (150 min. per week) is the minimum recommendation. One should individualize the exercise program.

Management
For persons with diabetes, pioglitazone, SGLT2- inhibitors, and/or GLP-1 receptor agonists, though not FDA-approved, may be of benefit for NAFLD. Some studies suggest that Vitamin E (800 IUs daily) and coffee may have a benefit.

Bariatric surgery
Bariatric surgery has been shown to reduce adverse liver outcomes as well as improving CV morbidity in those with NAFLD. Clinicians must assess patients individually based on their co-morbidities & obesity to determine if medication or surgery is the better option.

Cardiovascular risks
CV disease is the predominant cause of mortality in persons with NAFLD Aggressive treatment of CV risk factors is strongly recommended.