

Cirrhosis of the Liver

Cirrhosis is the permanent scarring of the liver due to one of various chronic diseases. This scarring interferes with the normal functioning of the liver making it more difficult to metabolize nutrients, drugs, and toxins. Toxic substances, therefore, cannot be properly eliminated and start to accumulate in the bloodstream. Also, the liver can no longer produce enough vital proteins, leading to a protein deficiency.

In the United States, chronic alcoholism is the most common cause of cirrhosis. Other causes include chronic viral hepatitis, such as hepatitis B and C. These are infectious diseases that are transmitted by both blood and sexual contact. Cirrhosis can also be caused by various inherited disorders and metabolic diseases.

A person with cirrhosis may have no symptoms early on. When symptoms do become present, they may include loss of appetite and tiredness. Also, because less protein is being produced by the failing liver, fluid may accumulate in the legs, a condition called edema, or in the abdomen, called ascites. The blood may not be able to form clots, thereby causing the person to bruise easily and to have difficulty in stopping bleeding in even minor wounds. As the toxins build up in the tissues and the bloodstream, the person may experience changes in sleep habits, difficulty concentrating, personality changes, lethargy, and eventually may even go into a coma.

People with cirrhosis may also be more sensitive to certain medications and side effects. Jaundice, or a yellowing of the skin color, may occur, as well as a generalized intense itching. These symptoms are due to the abnormal accumulation of bile pigments in the blood. The changes in the liver can also lead to formation of abnormal blood vessels in the esophagus and stomach, called varices. Varices can bleed spontaneously and this can be life-threatening.

The best way to prevent cirrhosis of the liver is to drink alcohol only in moderation or not at all. Specifically, no one should drink more than two to three ounces of hard liquor (or its equivalent) per day. Another way to prevent cirrhosis is to reduce your chances of contracting Hepatitis B or C. This is best accomplished by having a monogamous sexual relationship with an uninfected partner and never injecting intravenous drugs. It's especially important to not share needles with anyone. Also, there is a vaccine for Hepatitis B, which is recommended for all infants, health care workers, people planning extended travel to certain parts of the world, and children between the ages of 11 and 19.

If you have any of the risk factors for cirrhosis—a history of alcoholism or of Hepatitis B or C—call your medical professional. Laboratory tests can indicate that a problem is present long before any symptoms are noticed. Of course, if you do develop symptoms and think that you might have cirrhosis, you should also call.

Unfortunately, since many irreversible changes occur with cirrhosis of the liver, there is no real cure for the disease; however, since cirrhosis is a slowly progressive disease, many people who develop it maintain good health for many years. Avoiding alcohol and maintaining a healthy lifestyle can help you prevent further damage. So even if you have cirrhosis, you must stop drinking alcohol completely to prevent the disease from getting worse.

Typically, treatment aims to slow the progression of the disease and attempts to prevent complications, such as bleeding from varices. Although the disease can usually be medically managed, some cases require that the patient be promptly admitted to the hospital. In certain advanced cases, where life-threatening complications have occurred and other therapies have not been helpful, liver transplantation may be considered. However, this is a lengthy and risky surgical procedure that some severely ill patients may not be able to tolerate. Furthermore, even after transplantation, various other problems can occur that can be equally life-threatening.

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