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LOWERING THE UPPER LIMIT OF NORMAL SERUM ALANINE AMINOTRANSFERASE LEVELS MAY DETECT PATIENTS WITH HIDDEN CHRONIC LIVER DISEASE IN THE ELDERLY

Schmilovitz Weiss Hemda¹, Gingold Belfer Rachel², Issa Nidal¹, Boltin Doron², Beloos-
esky Yichayaou², Morag Koren Nira³, Meyerovitch Joseph⁴ and Weiss Avraham²

¹Hasharon Hospital - RMC, Israel

²Beilinson Hospital - RMC, Israel

³Sackler School of Medicine - Tel Aviv University, Israel

⁴Clalit Health - Tel Aviv University, Israel

Background: Recently lowering upper limit of normal (ULN) values of serum alanine aminotransferase (ALT) was suggested.

Aim: To investigate the prevalence of significant liver disease among community dwelling elderly (>65 years) in central Israel, whose ALT level fell in the range between the former and the new range ('delta range').

Patients & Methods: The database was searched for those who underwent ≥ 1 ALT measurement (IU/L) in 2002-2012. In a previous study a new range of ALT has been proposed: men: 15-42, women: 10-26. In this study the prevalence of significant liver disease in the delta range: men 42-45, women 26-34 was investigated. APRI, FIB-4 and AAR were applied for evaluating liver fibrosis. Prevalence of significant liver diseases was set by Chi-Square tests, mean fibrosis scores were compared using ANOVA followed by Bonferroni post-hoc test. The receiver operating characteristic model was used to test the ability of the

scores to predict cirrhosis.

Results: 2022 of 49634 (41% male, mean age of 83±6 years) were diagnosed with chronic liver disease (CLD) and 366 with cirrhosis. The two were more prevalent among men (15.3% vs. 4.9% and 4.2% vs. 0.9%, respectively) and women (7.8% vs. 3.3% and 1.5% vs. 0.4%, respectively) in the delta range compared to the new ALT range. Mean fibrosis scores of FIB4, APRI and AAR were significantly increased in the 'delta range' compared to the new ALT range.

Conclusion: Lowering the current ULN of ALT I may help detecting significant liver diseases.

Biography

Hemda Weiss she is currently working in Hasharon Hospital, Israel.

avra_ham@017.net.il