

rates. This study aimed to elucidate the clinical course and practices of CCA in Latin America.

Patients / Materials and Methods: This observational cohort study investigated individuals diagnosed with CCA between 2010-2023 in five referral centers across Latin America. Demographic, biochemical, and clinical data were analyzed.

Results and Discussion: A total of 309 patients were enrolled, demonstrating a balanced distribution of CCA subtypes (intrahepatic, perihilar, and distal), with Hispanics and Caucasians as the predominant ethnic groups, followed by Africans. Major risk factors identified included age, diabetes, obesity, MASLD, bile duct stones, and cholecystitis. Disparities in overweight/obesity prevalence were noted among CCA subtypes and ethnicities, with higher rates in extrahepatic CCAs and among Hispanics and Caucasians. At diagnosis, 72% of patients had ECOG-PS scores of 0-1, with disease presentations ranging from localized (47%) to locally advanced (19%) and metastatic (34%). Patients who did not receive any anti-cancer therapy exhibited a median survival of 2.3 months. Survival rates significantly improved across treatment modalities, with surgery yielding the longest (34 months), followed by chemotherapy (8 months). Notably, Africans presented with worse ECOG-PS scores and more advanced disease, while Hispanics were less frequently treated with chemotherapy, contributing to lower survival rates.

Conclusions: The high prevalence of late-stage CCA diagnosis in Latin America, particularly among Africans, alongside a substantial proportion of Hispanic patients not receiving chemotherapy, underscores a dismal prognosis for patients. These findings highlight structural challenges in cancer screening and healthcare access among diverse ethnic backgrounds and lower socioeconomic statuses in the region. Urgent measures are warranted, including identifying preventable risk factors, increasing awareness among high-risk populations, and establishing equitable health coverage to address these disparities.

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OP- 14 ENHANCED MUSCLE MASS MITIGATES MASLD IN MYOSTATIN KNOCKOUT MICE WITHOUT IMPACTING EXERCISE PERFORMANCE

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Conflict of interest: No

Introduction and Objectives: Metabolic Dysfunction-Associated Steatotic Liver Disease (MASLD) is linked to sarcopenia and exacerbated by obesity. Individuals with higher relative skeletal muscle mass are protected against MASLD or more likely to see its resolution,

regardless of demographic and health-related factors. This study examines the effects of muscle mass enhancement, independent of exercise, on MASLD progression using myostatin knockout (Mstn-KO) mice, which are genetically modified to exhibit increased muscle mass due to myostatin deficiency.

Patients / Materials and Methods: 11-week-old Mstn-KO mice and their wild-type counterparts were fed a Western diet (WD) for 24 weeks to induce MASLD. Parameters assessed included liver steatosis through histological analysis, muscle mass via MRI and histological cross-sectional area, exercise performance through treadmill tests, and muscle strength measured by electrophysiology.

Results and Discussion: Mstn-KO mice showed significantly reduced liver steatosis (~20%) and increased muscle mass (+30%) compared to wild-type controls. Additionally, liver pro-inflammatory cytokines such as IL-1 β and TNF- α were decreased in Mstn-KO mice, along with lower expression of lipogenesis-related genes, indicating a protective effect against MASLD progression. Histological assessments showed less hepatic lipid accumulation and inflammation in Mstn-KO mice, correlating with decreased myosteatosis and an enhanced cross-sectional area of muscle fibers. Muscle mass was measured by bioimpedance analysis, and paravertebral muscle area was evaluated using MRI. Electrophysiological measures indicated increased tetanic strength in Mstn-KO mice. Despite these physiological improvements, treadmill test results did not show significant differences in exercise performance between Mstn-KO and wild-type groups, suggesting that muscle mass improvement did not translate into enhanced exercise capacity. These results indicate that Mstn-KO mice are protected against muscle atrophy and MASLD progression.

Conclusions: Our findings suggest that increased muscle mass, independent of exercise performance, can significantly ameliorate MASLD histology. Mstn-KO mice serve as a valuable model for exploring muscle-liver crosstalk in liver diseases, indicating potential treatment pathways that do not rely on exercise enhancement.

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OP- 15 OUTCOME OF PREGNANCIES IN A SERIES OF WILSON DISEASE PATIENTS

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Conflict of interest: No

Introduction and Objectives: Wilson disease (WD) is an inherited disease that mainly affects the liver and brain due to copper overload. Pregnancy in WD is a challenging situation. Our aim was to analyze the clinical aspects and outcomes of pregnancies in WD.

Patients / Materials and Methods: In a series of 289 WD cases (1963-2024), we reviewed the medical records of 123 women, 26 of whom became pregnant at least once (1-5). A total of 52 pregnancies were recorded, but 3 were excluded because data on the conceptus were missing. Pregnancy outcomes were correlated with disease severity and anti-copper medication. Hepatic and/or neuropsychiatric manifestations were categorized as 1) asymptomatic/mild or 2) moderate/severe. Pregnancy outcomes were considered 1) successful