

focusing on the content of flavonoids, carotenoids, and Omega 3, 6 and 9 fatty acids. **Objective:** To compare the content of flavonoids, carotenoids, and omegas 3, 6 and 9 between the MD and the usual consumption according to regions of Argentina, for a transcultural adaptation.

Patients / Materials and Methods: Observational, cross-sectional, and descriptive study. A survey was conducted with 225 individuals to evaluate dietary habits. The primary data were quantitatively transformed for the calculation of the aforementioned nutrient content, in selected foods from both diets. Chi2 was used to establish correlations between variables.

Results and Discussion: The comparison of both diets shows that the nutrients analyzed were found to be below that suggested, with a high Omega6/Omega3 ratio. (Table1) To meet the recommendations, it is only necessary to increase the consumption of the analyzed food sources. Significant relationships were found (chi2, P between 0.0001 and 0.04) in the comparison of olive/fish consumption vs geographical region, vegetables/sex/pathologies vs BMI, and physical activity vs referred pathology.

Conclusions: Adaptation would be possible in all regions of the Argentine Republic through the substitution of non-locally produced foods with regional products that allow reaching the nutrient amounts, considering cost and culinary traditions. Some adaptation suggestions are the inclusion of chocolate, chia, amaranth, quinoa, and the replacement of olive oil with canola, chia, flax, grape or soybean oil. The proposed adapted Mediterranean diet provides the recommended amount of nutrients and its cost is similar to that of the usual Argentine diet.

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P-88 rs641738 MBOAT7 POLYMORPHISM AS A PREDICTOR OF FIBROSIS IN METABOLIC DYSFUNCTION-ASSOCIATED STEATOTIC LIVER DISEASE (MASLD)

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Conflict of interest: No

Introduction and Objectives: Recent studies have indicated that certain polymorphisms may be associated with the progression of metabolic dysfunction-associated steatotic liver disease (MASLD).

To construct a predictive fibrosis score and evaluate the association of the risk genetic polymorphisms rs738409 PNPLA3, rs58542926 TM6SF2, rs641738 MBOAT7, rs1260326 and rs780094 GCKR, rs72613567 HSD17B13 and rs2642438 MARC1 in MASLD.

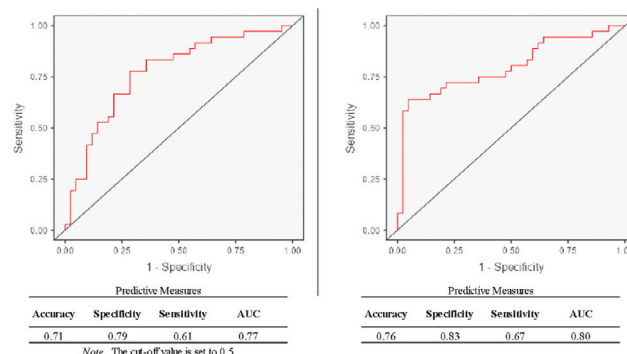
Patients / Materials and Methods: This cross-sectional and retrospective study analyzed 212 biopsy-proven MASLD patient

samples from the Hospital das Clínicas, Faculty of Medicine, University of São Paulo. Samples were divided into two groups: Group 1: absent and mild fibrosis (F0-1, n=113) and Group 2: significant and advanced fibrosis (F2-4, n=99). Demographic, laboratory, and histological data were compared, along with their association and frequency with the polymorphisms. Genotyping was performed by real-time PCR allele discrimination, and statistical analysis was conducted using Jasp® and Jamovi® software. The significance level adopted was 5%.

Results and Discussion: Most patients were female (146; 68.9%) with an average age of 56 years and were obese (BMI of 30.7). Group 1 had a higher frequency of dyslipidemia and NAS score 0-4 (71%), higher total cholesterol levels, and lower levels of AST, ALT, GGT, and alpha-fetoprotein compared to Group 2 (p < 0.05). The regression model (ROC Curve) used the TT genotype of the MBOAT7 gene associated with age, ALT, AST, GGT, TG, HDL, LDL, and total cholesterol to predict fibrosis (AUC: 0.77; Sen: 0.61; Spe: 0.79; Acc: 0.71; R²: 0.14) (Fig. 1A). Another model with AFP (n = 76) showed (AUC: 0.80; Sen: 0.67; Spe: 0.83; Acc: 0.76; R²: 0.24) (Fig. 1B). The polymorphisms of the PNPLA3, TM6SF2, GCKR, HSD17B13, and MARC1 genes did not demonstrate risk or protection in this cohort.

Conclusions: This study underscores the rs641738 MBOAT7 polymorphism as a potential predictor of fibrosis in MASLD, highlighting its value in clinical assessment and management.

Figure – ROC Curve



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P-89 ADHERENCE TO IMMUNOSUPPRESSIVE THERAPY IN LIVER TRANSPLANT PATIENTS: FACTORS ASSOCIATED TO COMPLIANCE AND IMPACT ON QUALITY OF LIFE

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Conflict of interest: No

Introduction and Objectives: One of the primary challenges following liver transplantation is preventing graft rejection, for which immunosuppressive therapy is essential. The success of this therapy depends, among other factors, on patient adherence to the prescribed medication regimen. The aim was to evaluate adherence to immunosuppressive therapy and the possible factors associated to adherence in liver transplant patients.