

Results and Discussion: Eighty-five patients were included, 68 (80%) men and 17 (20%) women; average age 52.4 years (39 -80). Alcohol consumption was the main cause of cirrhosis in 74 (87.05%), autoimmune diseases in 7 (8.23%), and MASLD in 4 (4.70%) (Table 1). 12 patients (14.11%) had ACLF grade 1, 29 (34.11%) grade 2 and 44 (51.76%) grade 3. With failure: kidney 61 (71.76%), liver 57 (67.05%), brain 49 (57.64%), coagulation 37 (43.52%), respiratory 15 (17.64%) and circulatory 5 (5.88%) (Table 1). 37 (43.52%) died within the first 28 days. The cutoff point of the lactate/albumin ratio was 1.74 (AUC 0.87), with a p value <0.0001, sensitivity 71.7% and specificity 58.8% (95% CI) (Figure 1). **Conclusions:** The cutoff point of the lactate/albumin ratio of 1.74 allows for the objective prediction of mortality in patients with ACLF using easily accessible laboratory tests.

Figure 1.
Lactate/albumin ratio AUC

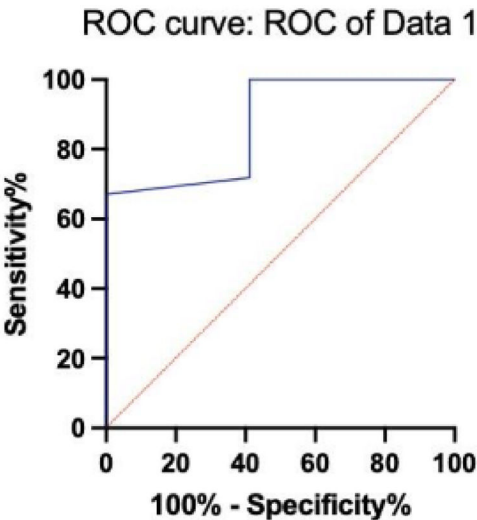


Table 1.
Descriptive statistics of study population.

Age years	39- 80
Sex:	
Male, N (%)	68 (80%)
Female, N (%)	17 (20%)
Cirrhosis etiology:	
Alcohol, N (%)	74 (87.05%)
Autoimmune, N (%)	7 (8.23%)
MAFLD, N (%)	4 (4.70%)
ACLF:	
Grade 1, N (%)	12 (14.11%)
Grade 2, N (%)	29 (34.11%)
Grade 3, N (%)	44 (51.76%)
Organ failure:	
Kidney, N (%)	61 (71.76%)
Liver, N (%)	57 (67.05%)
Brain, N (%)	49 (57.64%)
Coagulation , N (%)	37 (43.52%)
Respiratory, N (%)	15 (17.64%)
Circulatory, N (%)	5 (5.88%)

P-99 CHARACTERIZATION OF PATIENTS WITH LIVER CIRRHOSIS, ITS COMPLICATIONS AND SURVIVAL.

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Conflict of interest: No

Introduction and Objectives: The complications of liver cirrhosis significantly influence the survival of these patients.

Objective: Characterize patients with liver cirrhosis, its complications and survival.

Patients / Materials and Methods: Longitudinal prospective study in the Gastroenterology service in a tertiary hospital of national reference. Period: December 2017 - December 2019. Sample: 52 patients who met selection criteria. Clinical variables were recorded to determine the stage of cirrhosis, the Child-Pugh and the complications presented. Data were summarized, association between variables was evaluated, and survival was estimated.

Results and Discussion: The average age was 59 ± 11.0 years, men predominated (57.7%), alcohol consumption as the most frequent etiology (53.3%), ascites decompensation as the debut form (55.8%) and complication most incident (75%) followed by jaundice (40.4%) and encephalopathy (28.8%). F1 esophageal varices were the most confirmed endoscopic finding (26.9%), with stage 4 cirrhosis (69.2%) and Child-Pugh B (55.8%) predominating in the sample. At the end of the study, 19.2% of the patients died, overall survival was 89.0% at one year and 55.1% at two years, the association of the Child-Pugh scale as a predictor of mortality being statistically significant.

Conclusions: An association was demonstrated between the causes of cirrhosis and sex, mainly alcohol in men. One fifth of the patients died and overall survival showed a notable decrease at one year and two years, the estimate of survival according to the Child-Pugh scale being significant.

Table 1. Summary of estimated overall survival, according to clinical stages of cirrosis and Child-Pugh scale.

	Survival			Log Rank test (p value)
	6 months	1 year	2 years	
Overall	95,7 %	89,0 %	55,1 %	
Clinical stage				
Compensated	100,0 %	100,0 %		0,221
Decompensate	97,4 %	86,4 %	52,5 %	
Child-Pugh scale				
A	100,0 %	100,0 %	-	0,001
B	100,0 %	92,3 %	68,9 %	
C	83,3 %	5,0 %	0,0 %	

<https://doi.org/10.1016/j.aohep.2024.101713>

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