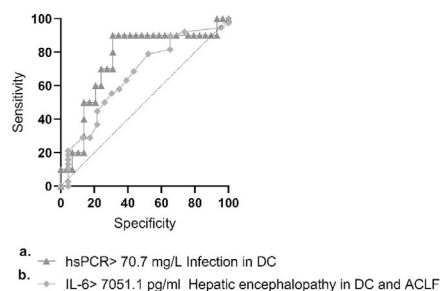


taxonomy (at the level of bacterial family and genera) at 7 and 90 days of patients who died, compared to those who did not die. The bars represent the log-fold change (LFC) between both groups. The blue bars indicate the characteristic taxa of the group that died, while the brown bars represent the survivor group. A cut-off of $p < 0.05$ and $q < 0.05$ was used. Analyzed by means of ANCOM-BC algorithm (Analysis of Compositions of Microbiomes with Bias Correction).



	AUROC	<i>p</i>	Sensitivity (%)	Specificity (%)
Infection in DC ($\text{hsPCR} > 70.7 \text{ mg/L}$)	0.75	0.009	90	68.97
HE in DC and ACLF ($\text{IL-6} > 7051.17 \text{ pg/ml}$)	0.67	0.014	81.4	45.8

Figure 2. High-sensitivity C-reactive protein (hs-CRP) and interleukin 6 (IL-6): biomarkers associated with bacterial infections and the presence of hepatic encephalopathy. a) ROC curve of hs-CRP, which demonstrates the prediction of bacterial infections in patients with decompensated cirrhosis without ACLF (cut-off point $> 70.7 \text{ mg/L}$ (AUROC: 0.75, with 90% sensitivity and 68.9% specificity); b) ROC curve of IL-6, that demonstrates the prediction of hepatic encephalopathy in patients with decompensated cirrhosis with ACLF and without ACLF (cut-off point $> 7051.1 \text{ pg/ml}$ (AUROC: 0.67, with 81.4% sensitivity and 45.8% specificity).

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IGFBPs in chronic liver diseases: Are they potential biomarkers?

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Introduction and objectives: Liver diseases are caused by alcohol consumption, Hepatitis C virus, and metabolic dysfunction. There are few studies on insulin-like growth factor binding proteins (IGFBPs), also IGFBP-1 being involved in regulating glucose and lipid metabolism but its relation with liver diseases has not been fully clarified

yet. To evaluate serum levels of IGFBPs 1,2,3 and 7 in subjects with alcoholic liver cirrhosis, alcoholic hepatitis, chronic hepatitis C, and Metabolic Dysfunction-Associated Steatotic Liver Disease.

Materials and patients: Prospective, cross-sectional, and multi-center study; approved by the research and ethics commission at UNAM, and the Hospital General de México, which included subjects with clinical and biochemical data of alcohol-related liver damage, defining two groups: alcoholic liver cirrhosis (OHCi) and alcoholic hepatitis (AH). Another group with Metabolic Dysfunction-Associated Steatotic Liver Disease (MASLD). The last group was defined with a diagnosis of chronic hepatitis C (HepC). FibroScan Testing, and/or Fibrotest were realized. All study groups were compared with healthy subjects called the control group (CT). IGFBPs were quantified in serum using a multiplex suspension array. The data were analyzed and compared between groups. For statistical analysis, Kruskal-Wallis and Mann-Whitney U tests were used.

Results: The serum concentrations of IGFBPs 1, 2, and 7 in Hepatitis C were elevated compared to all groups. In the case of HA, IGFBP-2, 3, and 7 decreased compared to the CT group, while IGFBP-1 was higher compared to CT. For IGFBP-3, all groups were decreased compared to the CT group. In the MASLD and CioH groups, low concentrations of IGFBPs 1, 2, 3, and 7 were observed when compared with HepC, AH, and CT groups.

Conclusions: The serum levels of IGFBPs highlight have the relevance in the diverse liver diseases, it's evident in Hepatitis C are synthesized in higher concentration, while in MASLD and alcohol-related liver disease the concentration is lower, these proteins can be used as differential serum markers in liver diseases. It's necessary to conduct studies that would allow us to find new mechanisms involved in lipid metabolism and its relationship with liver disease.

Ethical statement: The protocol was approved by the Ethics and Research Committees of the "Dr. Eduardo Liceaga" General Hospital of Mexico (HG/DI/16/107/03/082), and the Faculty of Medicine of UNAM (FMD/DI/15/2015).

Declaration of interests: None.

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Clinical and epidemiologic characteristics of pregnant women with liver disease in a tertiary hospital.

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Introduction and Objectives: It has been demonstrated that approximately 3% of pregnant women are affected by some type of liver disorder. The aim of this study is to determine the clinical and epidemiological characteristics of pregnant patients who developed liver disease during their pregnancy or liver pathology unrelated to pregnancy.

Materials and Patients: The study is a retrospective and observational analysis of a cohort composed of 72 pregnant women