

centers in Argentina. Each participant underwent a rapid HCV antibody test, followed by point-of-care confirmatory testing using HCV RNA PCR when reactive. Demographic data, testing history, and general knowledge about HCV were collected.

Results: Of the 160 participants, 2 tested reactive on the rapid test and are currently undergoing confirmation by PCR. A total of 84.4% were male and 15.6% female, with a median age of 36 years. Among participants, 95% were unaware of having been previously tested for HCV, and 76.9% had no knowledge about the disease. Additionally, 74.4% lacked medical insurance coverage.

Conclusions: This preliminary study highlights the feasibility of implementing HCV micro-elimination strategies in addiction centers. The findings emphasize the limited awareness of HCV and the absence of prior testing in most participants, underlining the importance of targeted screening and educational interventions in this high-risk population.

Conflict of interest: None

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#179

ASSESSMENT OF QUALITY OF LIFE IN PATIENTS WITH PRIMARY BILIARY CHOLANGITIS USING THE PBC-27 QUESTIONNAIRE AT A TERTIARY CARE CENTER

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Introduction and Objectives: Primary biliary cholangitis (PBC) is a chronic liver disease that significantly impacts patients' quality of life due to persistent symptoms like fatigue, pruritus, and emotional or cognitive disturbances. Understanding these effects is vital for guiding patient-centered care.

This study aimed to assess quality of life in patients with PBC using the validated PBC-27 questionnaire, identifying the most affected domains.

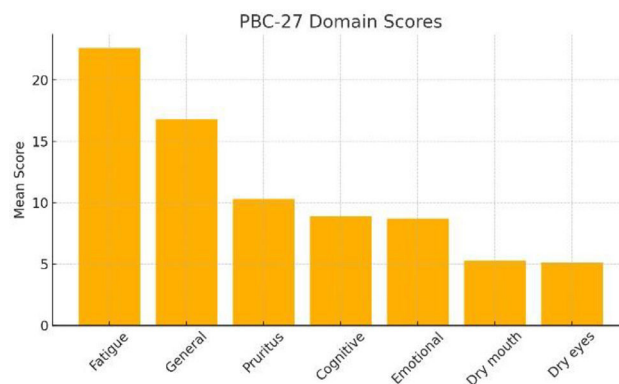
Materials and Methods: We conducted a cross-sectional, observational, and descriptive study in 50 adult patients with confirmed PBC, evaluated at a tertiary care center between March and May 2025. Variables included age, sex, comorbidities, disease duration, and PBC-27 domain-specific scores. Descriptive statistics were used, with medians and interquartile ranges for continuous variables, and absolute and relative frequencies for categorical data.

Results: All 50 patients completed the PBC-27 questionnaire. The mean overall score was 77.1 ± 4.2 , ranging from 68.5 to 86.2. Fatigue was the most affected domain, with a mean score of 22.6 ± 3.2 , followed by general symptoms (16.8 ± 2.9), pruritus (10.3 ± 2.1), and cognitive symptoms (8.9 ± 1.8). Emotional symptoms were also prevalent (8.7 ± 2.0). Domains related to dry mouth and dry eyes had the lowest impact, with mean scores of 5.3 ± 1.7 and 5.1 ± 1.5 , respectively.

Conclusions: These findings underscore the multidimensional burden of PBC on quality of life, particularly in physical and neuro-cognitive domains. Regular assessment using structured tools like the PBC-27 is crucial for tailoring follow-up and improving patient outcomes.

Conflict of interest: None

Chart 1. PBC-27 Questionnaire Results



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#180

CORRELATION BETWEEN LI-RADS CLASSIFICATION AND HISTOPATHOLOGICAL FINDINGS IN PATIENTS WITH SUSPECTED HEPATOCELLULAR CARCINOMA

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Introduction and Objectives: The Liver Imaging Reporting and Data System (LI-RADS) standardizes the interpretation of liver imaging in patients at risk of hepatocellular carcinoma (HCC). However, its correlation with histopathological parameters has not been sufficiently validated in Latin American settings.

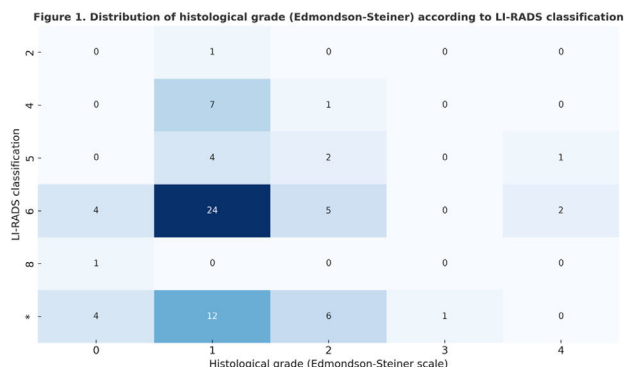
To evaluate the correlation between LI-RADS classification assigned through contrast-enhanced computed tomography (CT) or magnetic resonance imaging (MRI) and histopathological findings in patients with suspected hepatocellular carcinoma treated at Fundación Santa Fe de Bogotá.

Materials and Methods: A retrospective observational study was conducted in patients with histologically confirmed HCC and at least one contrast-enhanced imaging study available for blinded review. Clinical, radiological, and histopathological variables were collected. The correlation between LI-RADS category and tumor differentiation grade (Edmondson-Steiner scale) was evaluated using the chi-square test. Statistical analysis was performed with SPSS v25, and a p-value < 0.05 was considered statistically significant.

Results: A total of 154 patients were included, with a mean age of 64.4 years (95% CI: 63.3–65.4) and a male predominance (65%). Most patients were classified as Child-Pugh A or B and had solitary tumors ≤ 3 cm. No statistically significant association was found between the LI-RADS category and Edmondson-Steiner grade ($\chi^2 = 18.77$, $p = 0.537$). Histological grading was heterogeneously distributed within LI-RADS categories 4 and 5, with no clear predominance of poorly differentiated tumors.

Conclusions: In this cohort, LI-RADS classification did not show a significant correlation with histological differentiation of HCC. Although LI-RADS remains a useful non-invasive diagnostic tool, it should not be used in isolation to infer tumor aggressiveness. Further studies with greater statistical power are required to validate its use as a predictor of tumor histology in Latin American clinical contexts.

Conflict of interest: None



Source: Institutional data. Retrospective analysis of patients with suspected hepatocellular carcinoma treated at Fundación Santa Fe de Bogotá.

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#183

LYSOSOMAL ACID LIPASE ACTIVITY CORRELATES WITH IMMUNE AND BIOCHEMICAL BIOMARKERS METABOLIC DYSFUNCTION-ASSOCIATED STEATOTIC LIVER DISEASE BETTER EFFECT ON METABOLIC SYNDROME PATIENTS, PRELIMINARY STUDY

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Introduction and Objectives: Pathophysiology of Metabolic dysfunction- associated steatotic liver disease (MASLD) included dyslipidemia and genetic factors.

Lysosomal Acid Lipase (LAL) plays a key role in intra-cellular cholesterol trafficking. LAL activity is reduced on MASLD patients. LAL deficiency caused alterations in lipid and glucose metabolism, inflammation, myeloid cells function, and liver functions.

The main objective of these study was evaluating the biochemical profile, and immunological characteristics related to LAL activity on MASLD patients.

Patients and Methods: Patients were evaluated by hepatic elastography, LAL activity, and, saliva was collected to analyzed immune profile by Fourier-transformed infrared spectroscopy (FTIR) at IgG (1560-1464), IgA(1285-1237cm⁻¹), and IgM(1160-1028 cm⁻¹), IFN- γ (1061-1044 cm⁻¹), TNF- α (1243-1217 cm⁻¹), IL-6(1436-1428cm⁻¹). Anthropometric, clinical, and biochemical parameters were collected. Correlation analysis were employed.

Results: Total 12 patients with MASLD, most female 8 (66.7 %), 3 (25%) steatosis S1, 2 (16.7 %) steatosis S2 and 7 (58.3) steatosis S3, 7

(58.3) had prediabetes, 2 (16.7 %) had DM2, 1 (8.3 %) had hypertension, 8 (66.7%) had high triglyceride levels, and 6 (50 %) had low levels of HDL-cholesterol.

The median levels of Lysosomal Acid Lipase Activity were 0.43 $\pm$ 0.19nmol/punch/hour, there are not correlation with CAP or LSM but there are significant inverse correlation with haemoglobin, creatinine, uric acid, total bilirubin, indirect bilirubin, CH₃, C=O, IL-6 and IL1 β ; and a positive correlation with leukocytes, lymphocytes and platelets, lipid oxidation and serum carbonyl ratio.

Conclusions: MASLD patients has a low levels of LAL activity according with literature, and the LAL activity showed correlation with immune biomarkers and lipid changes on sera and saliva.

Conflict of interest: Yes, the AstraZeneca laboratory provided the kits for taking samples for the timely detection of lysosomal acid lipase deficiency (LAL-D).

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#185

CLINICAL AND EPIDEMIOLOGICAL CHARACTERIZATION OF PATIENTS WITH HEPATOCELLULAR CARCINOMA

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Introduction and Objectives: Hepatocellular carcinoma (HCC) is the most common primary liver cancer and a leading cause of cancer mortality. In Colombia, approximately 1,300 people die annually from this cause. Main risk factors include cryptogenic cirrhosis, hepatitis C, and nonalcoholic steatohepatitis (NASH), with diagnoses often occurring at advanced stages, limiting curative options.

To analyze the clinical, demographic, and therapeutic characteristics associated with clinical outcomes in patients diagnosed with HCC at a high-complexity center in Colombia between 2002 and 2024.

Materials and Methods: A retrospective cohort study with an analytical approach. Medical records of patients aged ≥ 18 years diagnosed by imaging or histology were reviewed. Sociodemographic variables, comorbidities, lab and imaging findings, tumor staging (BCLC, Child-Pugh, MELD), treatments, and outcomes were collected. Descriptive analyses were performed using R software.

Results: A total of 154 patients were included, with a mean age at diagnosis of 64.4 years (95% CI: 63.3–65.4), 65% male. Most common etiologies were cryptogenic cirrhosis (40%), hepatitis C (25%), and NASH (21%). Most patients were Child-Pugh A or B and met transplant criteria (Milan/UCSF). At diagnosis, 63% had a single tumor ≤ 3 cm, and 40% received locoregional therapy. Histopathology revealed vascular invasion (25%), satellite nodules (20%), and poorly differentiated tumors (30%). Only 1.9% had AFP > 1000 ng/mL, with no statistically significant association with vascular invasion. Median NLR was 5.0.

Conclusions: Most patients met transplant criteria at diagnosis, although a significant proportion had adverse histological features. There was a trend toward greater vascular invasion in patients with AFP > 1000 ng/mL, suggesting the utility of these markers for risk stratification. This study provides key institutional evidence to inform national strategies and develop predictive tools supported by artificial intelligence.

Conflict of interest: Yes, Funded project