Revolutionizing Care in Cirrhotic Patients Using HEPATIQ in a Community Setting

Thatcher Huynh[1], DO; Bethany Lyche[2]; Kip Lyche, MD[1]
[1]Community Memorial Health Systems,
[2]Wayne State University School of Medicine

Community Memorial Health System
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ABSTRACT

HEPATIQ is the first automated software that provides quantitative liver function analysis to predict outcomes of patients with liver diseases.

This is a single center, prospective, cohort study with participants from June 2017 to May 2022 in a community-based setting Gastroenterology practice.

Our data revealed that there was a lower baseline PHM in patients with decompensated cirrhosis with lowest PHM in patients with ascites. When comparing changes of serial PHM in different groups, patients with alcoholic liver disease had the greatest decrease in PHM compared to other etiologies.

HEPATIQ provides quantitative hepatic function to offer clinical information to monitor worsening cirrhosis, which can assist providers in counseling patients of proactive screening of complications.

PATIENTS

	Mean Age	Gender		Mean Initial PHM
		M	F	
Overall	70	68	48	92.32
Compensated Cirrhosis	71	27	21	99.13
Alcohol	67	2	2	97.78
HCV	69	19	11	100.1
Other	74	7	9	97.91
Decompensated Cirrhosis	68	41	27	87.51
Alcohol	66	15	7	84.94
HCV	67	22	12	91.44
Other	76	6	9	83.49

RESULTS

Comparison of Average Serial PHM
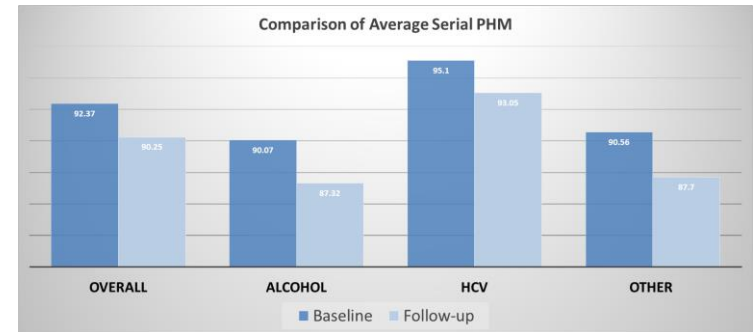
CONCLUSIONS

- If given the ability to track disease progression with serial HEPATIQ testing in community-based practice, we can predict outcomes based on trends in PHM indices.
- Current evaluation of liver function in cirrhotic patients is limited to calculation of Child-Pugh class and MELD score. While these measures address damage to the liver, the automated liver quantification from the HEPATIQ focuses on true hepatic function.
- In the HALT-C trial, baseline quantitative liver function tests were significantly independently predicting clinical outcomes in patients with hepatitis C.
- Increasing accessibility to serial HEPATIQ testing may dramatically improve care for cirrhotic patients by providing an accurate prognosis assessment.
- HEPATIQ can provide early detection of progressive liver disease prompting a vigilant evaluation for complications.