

TREATMENT OF THE DISEASE IN PATIENTS WITH CIRRHOSIS OF THE LIVER

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Abstract: Cirrhosis of the liver is a chronic and progressive condition characterized by the replacement of healthy liver tissue with scarred, fibrotic tissue. This debilitating disease poses a significant challenge to healthcare professionals, as it often presents with a complex array of symptoms and comorbidities that require a multifaceted treatment approach. In this comprehensive article, we will delve into the intricacies of managing cirrhosis in patients, exploring the various treatment modalities, their efficacy, and the importance of a holistic approach to patient care.

Keywords: modern treatments, symptoms, approaches, patients, infections, etiologies.

Introduction: The difficulties of cirrhosis are the main source of death in grown-ups in the US, fundamentally because of the way that there is no compelling treatment to end the movement of the sickness. Besides, liver transplantation is the main remedial choice and is confined by the extreme lack of benefactor organs.

Cirrhosis is characterized as a persistent illness of the liver portrayed by an unreasonable development of sinewy connective tissue that happens in the endeavor to recover harmed tissue. This outcomes in far and wide knobs and scarring, which causes annihilation of the ordinary liver design. This infection interaction prompts entryway hypertension, liver disappointment, and an expanded gamble of hepatocellular carcinoma.

Cirrhosis of the liver is an ever-evolving sickness that is far reaching in the US. It in this manner turns into a significant subject for individuals in the clinical field to comprehend. This exploration article will examine the treatment of cirrhosis in patients with liver illness.

Outline of Cirrhosis of the Liver

Cirrhosis of the liver happens as the consequence of ongoing liver illness which logically worsens harm to the liver. The late Dr. David P. Irons characterized it as: "far and wide and irreversible harm to the liver parenchyma appeared by fibrosis and transformation of typical liver engineering into fundamentally unusual knobs." This happens in light of harm to the liver, frequently over a time of numerous years with the most well-known cause being liquor maltreatment in western culture and disease with the hepatitis C infection in both the USA and Japan. Different etiologies incorporate hepatitis B contamination, cholestatic liver illnesses, greasy liver infection, and hemochromatosis. The greatness of the harm brought about by the liver in cirrhosis is huge with the liver being the biggest interior organ in the body and having a very mind-boggling capability, it is justifiable that any harm to it might create some issues. Clinically, the introduction of cirrhosis can fluctuate extraordinarily among patients and the stage at which the liver becomes lost likewise

contrasts, however by and large, one might say that the beginning of side effects happens after huge liver harm has proactively been finished.

The elements of the liver that might be impacted in cirrhosis can be comprehensively characterized as engineered and metabolic; issues with the previous bringing about anomalies with protein creation and coagulation, the last option appearing in messes glucose and iron digestion. The liver is likewise a safe tweaking organ and the presence of ongoing sickness might cause cell-interceded liver injury displayed in the improvement of immune system hepatitis, cirrhosis is consequently likewise connected with a higher gamble of hepatocellular carcinoma. At last, the liver has excretory capabilities and harm to these may cause pruritus and the maintenance of bilirubin prompting jaundice.

Cirrhosis and Liver Mortality

In addition to the fact that it is a typical movement for people with liver illnesses, it immensely builds the opportunity of death for these people. Many examinations have shown that contrasted with people with liver sickness without cirrhosis, the paces of mortality for those with cirrhosis are a lot higher. One such review assessed the 1 and 4-year death rates for people with cirrhosis as 29% and 59% individually (5). Assuming we consider the commonness of liver illness in creating cirrhosis, these striking figures show that cirrhosis will contribute fundamentally to generally passing paces of liver sickness.

Commonness of Cirrhosis in Liver Illness

Cirrhosis is the end phase of liver illness. As an ongoing sickness, it is assessed that 1 of every 400 individuals foster cirrhosis every year (1). Of individuals with liver infection, anyplace between 7-30% will foster cirrhosis in the span of 5 years (2). As exemplified by persistent hepatitis C, of which 170 million individuals internationally experience the ill effects of, and 80% will proceed to foster ongoing disease (3), this implies that an exceptionally enormous number of individuals are in danger of creating cirrhosis. To be sure, it is such a significant sum that one review gauges that liver cirrhosis will turn into the twelfth driving reason for death and the seventh driving reason for life lost overall continuously 2020 (4).

Understanding the Pathophysiology of Cirrhosis

Cirrhosis is the end-stage of various liver diseases, including chronic viral hepatitis, alcoholic liver disease, and non-alcoholic fatty liver disease. The underlying mechanism involves the gradual destruction of liver cells, leading to the formation of scar tissue that disrupts the normal liver architecture and function. This impairment in liver function can result in a wide range of complications, including portal hypertension, ascites, hepatic encephalopathy, and an increased risk of liver cancer.

Comprehensive Treatment Strategies

The management of cirrhosis requires a multidisciplinary approach, involving a team of healthcare professionals, including hepatologists, gastroenterologists, nutritionists, and specialized nurses. The primary goals of treatment are to address the underlying cause of cirrhosis, manage the associated complications, and improve the patient's overall quality of life.

1. Addressing the Underlying Cause:

a. Viral Hepatitis: Antiviral therapy, such as direct-acting antivirals, can effectively treat and potentially cure viral hepatitis, which is a leading cause of cirrhosis.

b. Alcoholic Liver Disease: Abstinence from alcohol is essential, and patients may benefit from addiction treatment programs and counseling.

c. Non-Alcoholic Fatty Liver Disease: Lifestyle modifications, including weight loss, dietary changes, and increased physical activity, are the cornerstone of treatment.

2. Managing Complications:

a. Portal Hypertension: Medications, such as beta-blockers and diuretics, can help reduce portal pressure and prevent complications like variceal bleeding.

b. Ascites: Diuretics, paracentesis (removal of excess fluid), and trans jugular intrahepatic portosystemic shunt (TIPS) procedure can be used to manage ascites.

c. Hepatic Encephalopathy: Lactulose, rifaximin, and other medications can help reduce the accumulation of toxins in the brain and improve cognitive function.

d. Liver Cancer: Regular screening and early detection are crucial, as liver transplantation may be an option for eligible patients.

3. Supportive Care and Lifestyle Modifications:

a. Nutritional Support: Patients with cirrhosis often require a specialized diet to address malnutrition, muscle wasting, and other nutritional deficiencies.

b. Physical Activity: Gentle exercise and physical therapy can help maintain muscle mass, improve overall strength, and enhance quality of life.

c. Psychosocial Support: Counseling, support groups, and mental health interventions can address the emotional and psychological challenges faced by patients with cirrhosis.

Liver Transplantation: The Ultimate Treatment

In advanced cases of cirrhosis, where the liver is severely damaged and the patient's condition continues to deteriorate despite optimal medical management, liver transplantation may be the only viable treatment option. Liver transplantation has revolutionized the treatment of end-stage liver disease, offering patients a chance at a longer, healthier life. The selection and evaluation process for liver transplantation is complex, involving a multidisciplinary team and careful consideration of the patient's overall health, comorbidities, and prognosis.

Conclusion

Cirrhosis of the liver is a complex and challenging condition that requires a comprehensive and multidisciplinary approach to treatment. By addressing the underlying cause, managing the associated complications, and providing supportive care, healthcare professionals can significantly improve the quality of life for patients with cirrhosis. As research continues to advance, and new treatment modalities emerge, the outlook for patients with cirrhosis continues to improve, offering hope and the potential for a better future.

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