

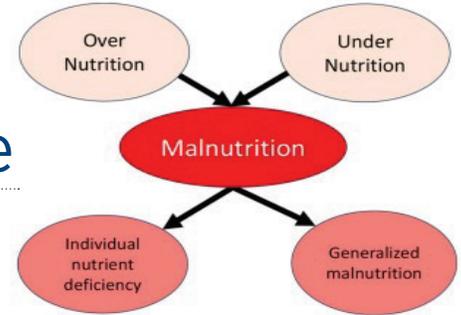


ACG GUIDELINE

Highlights

Malnutrition and Nutritional Recommendations in Liver Disease

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| Definitions  | <ul style="list-style-type: none"> Malnutrition includes both under- and over-nutrition Sarcopenia (including sarcopenic obesity) is the major consequent body composition change due to malnutrition | |
| Causes | Food-related | <ul style="list-style-type: none"> Poor availability/quality Unpalatable (low Na, protein, etc.) |
| | Medical causes | <ul style="list-style-type: none"> Fasting for procedures Interruption of feeding |
| | GI-related | <ul style="list-style-type: none"> Nausea/vomiting/diarrhea Dysbiosis/bacterial overgrowth |
| | Complication of liver disease | <ul style="list-style-type: none"> HE, ascites |
| Treatment | Team Approach  | Structured programs are needed to assess and treat sarcopenia before, during, and after transplant in patients with cirrhosis. |
| | Nutritional Assessment | Body mass index is more easily assessed than waist circumference. However, waist circumference better correlates with metabolic disease risks. Subjective Global Assessment, hand grip strength, bioelectric impedance, and imaging are increasingly used assessment methods. |
| | Lifestyle Modifications | Encouraged for all, decreases adverse clinical outcomes in patients with MASH. |
| | Dietary Recommendations | |
| <ul style="list-style-type: none"> Low-fructose diet is recommended for all patients with chronic liver disease across the spectrum of disease. Late evening snacks to improve lean muscle tissue and decrease risk for ascites/HE Nutritional supplementation for patients with alcohol-associated hepatitis and cirrhosis In patients with non-cirrhosis MASH, consider daily supplementation of vitamin E 800 IU. In patients with chronic liver disease, drinking two or more cups of coffee per day can decrease risk for fibrosis progression or development of HCC. In patients with chronic liver disease, protein should not be restricted. For patients with cirrhosis and HE who need nutritional supplementation, ACG suggests a diet enriched with plant-based sources of protein. ACG refrained from making a recommendation for or against rigorous restriction of dietary sodium among patients with cirrhosis and ascites who are managed with diuretic therapies. | | |

HCC = hepatocellular carcinoma
HE = hepatic encephalopathy

IU = international units
MASH = metabolic dysfunction-associated steatohepatitis

Na = sodium

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