

THE NEWCASTLE VARICES IN PRIMARY BILIARY CHOLANGITIS SCORE: AN UPPER ENDOSCOPY SUBSTITUTE FOR GASTRO-OESOPHAGEAL VARICES SCREENING?

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Poster

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A retrospective study of 72 primary biliary cholangitis patients found that the Newcastle Varices in PBC Score accurately predicted gastro-oesophageal varices with an AUC of 0.914.

KEY POINTS

- In 72 PBC patients treated with ursodeoxycholic acid (13-15 mg/kg/day) and followed for a median of 9 years, 47.2% developed esophageal varices and 6.9% developed gastric varices.
- The Newcastle Varices in PBC Score demonstrated good performance in predicting gastro-oesophageal varices development, with an area under the ROC curve of 0.914 ($p < 0.001$).
- Twenty-five percent of patients experienced variceal bleeding during follow-up.
- The authors suggest the NVP score may be considered as a non-invasive alternative to oesophageo-gastro-duodenoscopy for varices screening in PBC patients, though they note further studies are needed for confirmation.

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