

CLINICAL OUTCOMES AND RISK FACTORS IN PATIENTS WITH ALCOHOLIC LIVER CIRRHOSIS: A RETROSPECTIVE ANALYSIS

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Poster

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A retrospective study of 357 patients with alcoholic liver cirrhosis identifies urinary tract infection as an independent predictor of prolonged hospital stay and hepato-renal syndrome as the sole independent predictor of in-hospital mortality.

KEY POINTS

- In-hospital mortality was 21.5% among the cohort of 357 patients with alcoholic liver cirrhosis (mean age 57.8 ± 9.8 years, 85% male).
- The most common causes of admission were urinary tract infections (57.7%), hepato-renal syndrome (28.2%), digestive hemorrhage (22.6%), and acute alcoholic hepatitis (19.3%).
- Urinary tract infection was the only independent predictor of prolonged hospitalization (defined as greater than 3 days) in multivariate analysis.
- Hepato-renal syndrome was the only independent predictor of in-hospital mortality in multivariate analysis (p less than 0.0001).
- The authors conclude that early recognition and management of infections and renal complications are important in this high-risk population.

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