

A RARE CAUSE OF LIVER CIRRHOSIS: IS COVID-19 THE ONE TO BLAME?

Inês Costa Santos

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Poster

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A case report describes a 22-year-old male who developed post-infantile giant cell hepatitis with rapid progression to cirrhosis following mild COVID-19 infection, representing a potentially novel trigger for this rare condition.

KEY POINTS

- The patient presented with abnormal liver biochemistry in March 2022 (ALT 476 U/L, AST 139 U/L, GGT 135 U/L) two months after mild COVID-19 infection, with normal values the previous year.
- Extensive work-up excluded hepatotropic agents, metabolic causes, autoimmune aetiologies, and haematological or lymphoproliferative disorders.
- Liver biopsy revealed septal fibrosis, regenerative nodules, interface hepatitis, focal hepatocellular necrosis, and numerous multinucleated giant hepatocytes, confirming post-infantile giant cell hepatitis in cirrhotic phase.
- The aetiology remains unknown, but the temporal association between SARS-CoV-2 infection and liver enzyme elevation raises the possibility of COVID-19 as a trigger, which the authors state would be the first such reported case.
- This case may be of interest to hepatologists and gastroenterologists managing unexplained liver injury in post-COVID patients.

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