

HEPATIC STEATOSIS AND FIBROSIS IN CROHN'S DISEASE PATIENTS: PREVALENCE AND RISK FACTORS

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Poster

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A cross-sectional study of 100 Crohn's disease patients in clinical remission found hepatic steatosis in 18% and fibrosis in 11%, with corticosteroid therapy features associated with steatosis development.

KEY POINTS

- Hepatic steatosis was detected by CAP measurement in 18% of patients (S1 in 8%, S2 in 3%, S3 in 7%), while FibroScan revealed F1 fibrosis in 4% and F2 fibrosis in 7%.
- Diabetes, overweight or obesity, age over 35 years, and ALT level greater than 10.75 IU/L were associated with hepatic steatosis.
- Corticosteroid-related factors associated with steatosis included duration shorter than 18 months since last course, maximum prednisolone dose over 55mg/d, and duration on full dose exceeding 4.5 weeks.
- Diabetes, age over 51.5 years at study time, and age over 36.5 years at diagnosis were associated with F1 and/or F2 fibrosis.
- This study may interest gastroenterologists managing Crohn's disease patients on corticosteroid therapy and hepatologists assessing liver disease risk in inflammatory bowel disease populations.

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