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Summary

# COMPARATIVE EFFICACY OF PHARMACOLOGIC THERAPIES FOR LIVER STEATOSIS AND FIBROSIS IN PATIENT WITH NONALCOHOLIC FATTY LIVER DISEASE BASED ON MAGNETIC RESONANCE IMAGING BIOMARKERS: SYSTEMATIC REVIEW AND NETWORK META-ANALYSIS

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UEG Week Copenhagen 2023 | Poster

Hepatobiliary

October 15, 2023

**Network meta-analysis of 30 randomized trials (2,511 participants) found that among pharmacologic interventions for NAFLD, thiazolidinediones, FGF analogues, GLP1-RAs, FXR agonists, and combination treatments significantly reduced liver fat content on MRI compared to placebo, with efruxifermin and vitamin E plus pioglitazone ranking as most efficacious.**

## KEY POINTS

- Thiazolidinediones reduced liver fat content by 7.4%, FGF analogues by 5.8%, GLP1-RAs by 4.3%, and FXR agonists by 3.6% compared to placebo, while vitamin E plus thiazolidinedione combination achieved 11% reduction.
- Among individual agents, efruxifermin showed the greatest reduction in liver fat content (13.5%), followed by aldafermin, semaglutide, liraglutide (4.0%), pioglitazone, vitamin E, tropifexor, and resmetirom, all superior to placebo.
- Pioglitazone and semaglutide were identified as the most efficacious glucose-lowering agents for liver fat reduction, while efruxifermin, vitamin E, and tropifexor were effective non-glucose-lowering options.
- No pharmacologic intervention was superior to placebo for reducing liver stiffness on MR-elastography, though trial durations were considered too short for definitive conclusions.
- This analysis may inform clinicians managing NAFLD patients and highlights the potential of combination therapies from different drug classes.

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