

EASL Clinical Practice Guidelines on acute-on-chronic liver failure

Standards and Guidelines

Hepatobiliary

June 23, 2023

Clinical Practice Guidelines for acute-on-chronic liver failure (ACLF) provide recommendations for recognition, triage, precipitant management, organ support, and transplantation decisions in this severe form of decompensated cirrhosis with high short-term mortality.

KEY POINTS

- ACLF, described in 2013, is a severe form of acutely decompensated cirrhosis characterised by organ system failure(s) and high risk of short-term mortality, caused by excessive systemic inflammatory response to precipitants that may or may not be clinically apparent.
- Some studies suggest patients with ACLF may benefit from liver transplantation and should be urgently stabilised with appropriate treatment of precipitants and full general management including ICU organ support.
- The guidelines provide graded recommendations (using Oxford Centre for Evidence-Based Medicine system) to help clinicians recognise ACLF, make ICU triage decisions, manage precipitants, identify organ systems requiring support, define futility criteria, and identify transplantation indications.
- The guidance is based on in-depth literature review and addresses key domains including infection, alcohol-related hepatitis, critical care, sarcopenia, frailty, prognosis, and mortality.

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