

Non-Alcoholic Fatty Liver Disease

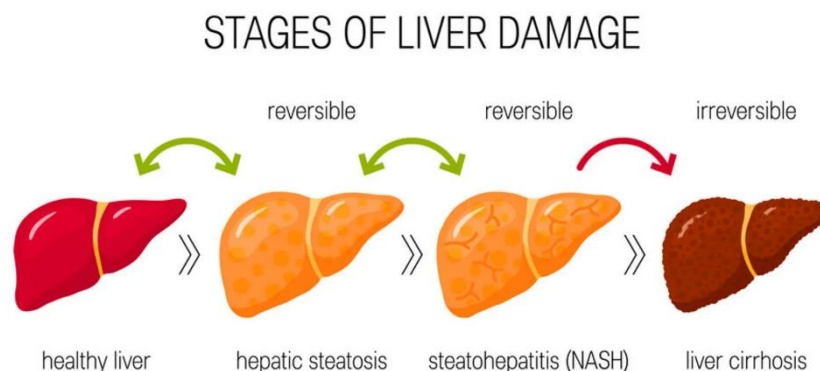
What is fatty liver?

'Fatty liver' describes the build-up of fat in your liver. A healthy liver should contain minimal fat. If fat builds up this leads to a condition called non-alcohol related fatty liver disease (NAFLD). It may be detected on abnormal liver blood tests or on an ultrasound scan. It is often found coincidentally when doing tests for another reason as most people have no symptoms. Most commonly this condition is found in people who are overweight or obese, however it can happen in people with a healthy weight. It is also often associated with other health problems such as high cholesterol, diabetes and high blood pressure. It is a common problem affecting over a third of the UK population, but the good news is that there are lifestyle changes which you can use to reverse it.

How does fat damage the liver?

There are 4 main stages:

1. Simple fatty liver (steatosis) – this is the mildest form of the disease. There is a small amount of fat in the liver that hasn't caused any damage yet.
2. Non-alcohol related steatohepatitis – there is a build-up of fat which triggers inflammation in the liver.
3. Fibrosis – ongoing damage and inflammation leads to scar tissue (fibrosis) forming through the liver.
4. Cirrhosis – develops over many years. Build-up of scar tissue affects how well the liver works and affects its shape. The damage is now permanent and may lead to liver failure (where the liver stops working properly).



How do I know which stage I am?

Most people (80%) have simple fatty liver, the mildest form. Your GP will check your fibrosis score (a score which takes into account blood tests and your age) to determine your risk of the other stages. If your score is raised you will receive further tests.

What is the treatment for NAFLD?

The main treatment for NAFLD is weight loss and regular exercise. Sustained 5-10% weight loss can be an effective treatment for fatty liver. At the moment there are no specific licensed drugs to treat this condition.

Treatment of other risk factors is also important, such as type 2 diabetes, high cholesterol and high blood pressure. These will help your liver and also reduce your risk of heart attack and stroke. Other lifestyle factors which can help are stopping smoking and drinking alcohol within recommended limits.

What can I do to help myself?

It may be possible to reduce the amount of fat in your liver. Things which may help are:

- Aim to reduce weight so have BMI in the healthy range 20-25.
- Losing 5-10% of your body weight can reduce the amount of fat in the liver.
- Aim for a healthy balanced diet which includes fresh vegetables, fruit, wholegrain carbohydrates and lean protein. Reduce processed foods and snacks that are high in fat and sugar.
- Drink alcohol within recommended limits (14 units per week in total).
- Aim for 150 minutes per week of moderate to intense activity e.g. 30 minutes 5 days per week. Examples include running, cycling or brisk walking.
- If you have diabetes it is important to get good control of your blood sugar as high blood sugar levels can cause more fat to be deposited in the liver.

What monitoring do I need?

If you have simple fatty liver you should make lifestyle changes and be reassessed by your GP every 3 years. If you have been identified as having steatohepatitis or fibrosis you will be reviewed more regularly.

Will my fatty liver disease progress?

For most people with NAFLD, the condition does not progress beyond simple fatty liver or non-alcohol related steatohepatitis. Fatty liver may reverse by weight loss or with good control of diabetes. About 2 in 100 people with simple fatty liver progress to cirrhosis over 15-20 years and about 12 in 100 people with steatohepatitis progress to cirrhosis over about 8 years.

Useful information

www.britishlivertrust.org.uk – has information on NAFLD and patient information leaflets on diet and lifestyle measures for NAFLD

www.nhs.uk/conditions/non-alcoholic-fatty-liver-disease

If you have any questions about NAFLD you can discuss with your GP, or any questions about lifestyle changes you can discuss with our in-house Health and Wellbeing Team. Our Health and Wellbeing Team can help support you make healthy lifestyle changes. They are non-medical and cannot discuss your clinical diagnosis.