

EP09.04

Fibroscan, a new non-invasive tool for the follow up of patients with NAFLD: a pilot study

Francesco Freddo(1), S Angeletti Agnoletti(1), J Olivetti(1), L Grassi(1), E Corsi(1), R Inserra(1), S Cascia(2), I Cesaroni(3), M Capriotti(4), AM Schimizzi(5), F Ridolfi(5), E Brunelli(5)

(1) Doctor in Training for Family Medicine, ASUR2 – Regione Marche, Ancona, Italy

(2) FM Specialist, Coordinator of "Vallesina" FM Network, ASUR2, Jesi, Italy

(3) FM Specialist, Coordinator of "Castelli" FM network, ASUR2, Jesi, Italy

(4) FM Specialist, Regional School of FM, Teaching Activity Department, Ancona, Italy

(5) Internist, Liver Clinic, Carlo Urbani Hospital, ASUR2, Jesi, Italy

(6) Gastroenterologist, Liver Clinic, "Senigallia" Hospital, ASUR2, Senigallia, Italy

Corresponding author: Dr Francesco Freddo, Regione Marche, ASUR2 - Ancona, Ancona, Italy. E-mail: dott.freddo@gmail.com

Background and Aim: NAFLD is present in 20% to 40% of the general population in Europe. It is closely associated with obesity, diabetes, and metabolic syndrome, the most common diseases in our clinical practice. The aim of the study is to evaluate the role of CAP measurement as a rapid, non invasive tool to follow up the patients with NAFLD in outpatient clinic of family doctors.

Method: Retrospective interventional case series. The medical records of 16 consecutive patients with ultrasound diagnosis of liver steatosis and body mass index (BMI) ≥ 25 kg/m² were reviewed. Steatosis reduction was considered as decreasing of one or more steatosis grade according to the NAFLD activity score. All patients underwent physical examination, blood tests and fibroscan at time zero and after a period of diet restriction and counseling for the improvement of physical activity.

Results: A total of 16 patients were included (M/F:11/5), median BMI was 29.25 kg/m² (sd 5,19 kg/m²). The steatosis grade distribution was the following: 8 patients (50%) had S3, 4 patients (25%) had S2, 3 patients (18,75%) had S1 and 1 patient (6,25%) had S0. The mean follow up time was 6,7 months. At final follow up 11 patients(68,75%) showed reduction of steatosis grade. in the group of patients who showed reduction of steatosis grade the BMI, cholesterolemia and triglyceridemia were significantly lower ($p<0,05$).

Conclusions: Data suggest that CAP measurement can be used as a rapid non invasive tool to follow up patients with NAFLD. in patients with steatosis grade reduction we observed significant reduction of BMI, cholesterol and triglycerides levels. Further studies, with greater sample, are necessary although this study represents the largest series of NAFLD patients that underwent follow up with CAP measurement.