

FATTY LIVER / MAFLD & NASH DISEASE CAN WE SAVE MORE LIVES ?

Fatty Liver Disease associated with metabolic dysfunction (MAFLD) is a heterogeneous disease whose pathogenesis involves different genetic and metabolic factors.

Fatty Liver / MAFLD can be mild and symptomless, but it can progress to Nonalcoholic steatohepatitis (NASH) and cause liver damage similar to that caused by alcohol abuse, even if they do not drink. **The effects might be severe in the long term**, as the scar tissue eventually replaces liver tissue. This process is progressive and is known as fibrosis. That can lead to cirrhosis, a life-threatening condition in which irreversible damage prevents the liver from working properly. Cirrhosis may generate **liver cancer**.

NASH-related cirrhosis has become one of the leading indications for liver transplantation.

The prevalence of fatty liver disease in adults is estimated to be 25% (1 out of 4 in EU have the disease) in the general population and varies with the clinical setting, race/ethnicity, and geographic region. Fatty liver disease also affects children, and it is the most common cause of chronic liver disease. Children can also develop NASH or related complications as adults.

Although Fatty Liver Disease associated with metabolic dysfunction is the leading cause of liver-related morbidity and mortality **often remains undiagnosed**, placing a significant burden on the healthcare system. The situation is aggravated by some factors that come to add an increase in the prevalence of the disease.

SOME FACTORS:

- The worldwide rise of **obesity and comorbid metabolic disease** (T2 diabetes mellitus, obesity, hypertension, dyslipidaemia and hypertension).
- Lack of awareness regarding the severity of the disease (even among healthcare providers).
- The alarming increase of the disease among children and the psychosocial effects of the disease on our children such as stigmatisation, labelling etc.
- Genetic factors.
- Lack of medication.
- Lack of a consensus about terminology.

Preventing the disease

- 1) Healthy diet and lifestyle choices that can help protect the liver. (Minimize alcohol intake, avoid processed food, avoid sugar beverages, eat more low-glycemic index foods, more fruits and vegetables).
- 2) Educational programs for patients and their families, primary nurses and physicians.
 - **3) Invest in children**. Prevention programs in schools (Involvement of various organizations such as parent associations, teachers, gymnastics.

Discussions around the definition of the disease should not monopolise the concern about the disease. It is not the name but the disease that decides the outcome and the course of a patient.

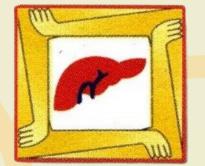
It is clear, with the alarming growth of the prevalence of the disease, the factors that will further aggravate the situation that the problem is at our door. There is a need to address this problem with the participation of all parties and stakeholders involved.

JOIN US!

























WHO WE ARE

