Metabolic associated fatty liver disease is associated with a more severe acute pancreatitis: a prospective cohort analysis of 2053 cases

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BACKGROUND

We have shown in a meta-analysis that fatty liver disease influences the outcomes of acute pancreatitis (AP). The aim of this study was to further analyze the prognostic role of metabolic associated fatty liver disease (MAFLD) in AP in a prospective cohort.

METHODS

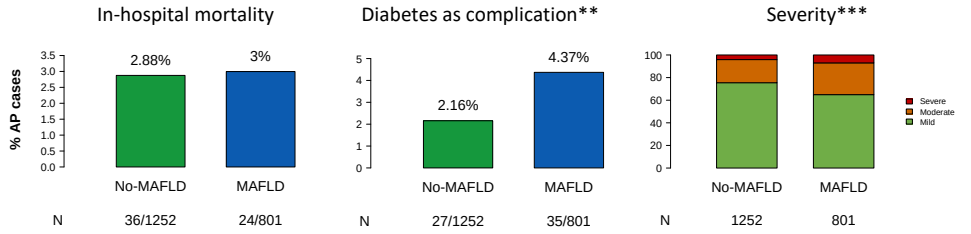
We identified our cohort from the multicentric prospective International Acute Pancreatitis Registry run by the Hungarian Pancreatic Study Group. AP was diagnosed by the revised Atlanta criteria. For the diagnosis of MAFLD the presence of liver steatosis on abdominal imaging was mandatory, in addition to obesity, type 2 diabetes mellitus or metabolic dysregulation. Outcomes of interest were in-hospital mortality, AP severity, length of hospital stay, local, and systemic complications of AP. Stars represent the following significance levels p≤0.05, p≤0.01, p≤0.001.

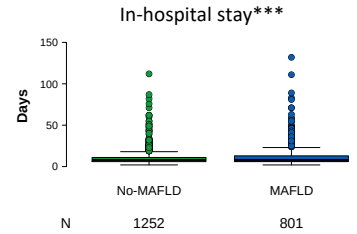
CONCLUSION

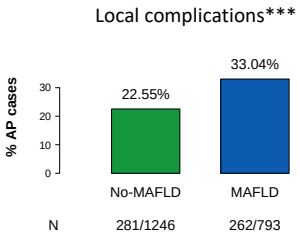
MAFLD increases severity and causes longer length of hospitalization in AP.

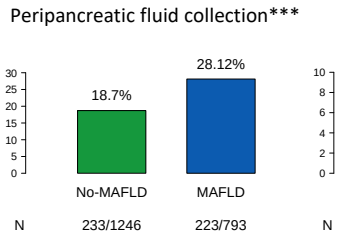
RESULTS

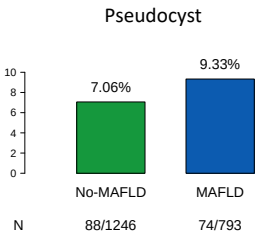
Out of the 2053 AP cases analyzed, 801 (39%) were diagnosed with MAFLD. Compared to the non-MAFLD group, MAFLD patients were more likely man (65.5 vs 50%, p=0.001), to have alcohol (28.2 vs 16.5%, p=0.001) and hypertriglyceridemia (13.5 vs 2.6%, p=0.001) induced AP.

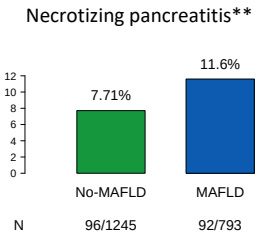


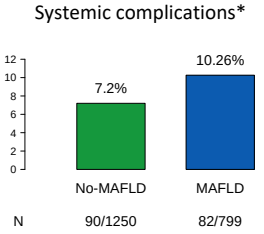


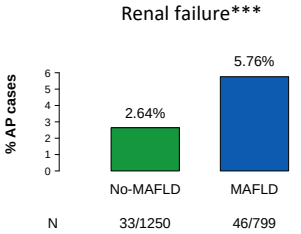


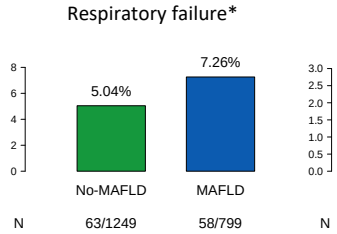


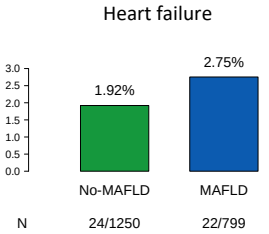


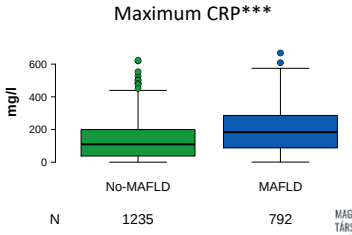












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