



# Preface

## Consultations in Liver Disease



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*Editor*

Community practitioners in the field of Gastroenterology are frequently consulted to evaluate inpatients and outpatients with acute and chronic liver issues. Many of the medical problems are complex, and recent advances in the field may be difficult to follow for busy providers. This issue of *Clinics in Liver Disease* on Consultations in Liver Disease is the fourth in a series dedicated to supporting community providers with pertinent clinical information about consultations that are commonly encountered in community practice. The first issue, "Approaches to Consultation for Patients with Liver Disease," was published in May 2012, and the second and third, each entitled "Consultations in Liver Disease," were published in February 2015 and November 2017, respectively. These issues present concise, clinically oriented reviews of complicated topics with an emphasis on diagnosis and management. In this issue, additional topics have been selected to help practitioners care for patients with liver-related problems.

Reactivation of chronic hepatitis B virus infection has been increasingly recognized as a problem with potentially severe consequences and has been observed more frequently in the age of immunotherapy for various disease states. Drs Ekpanyapong and Reddy discuss the contemporary approach to evaluation and management of patients in this setting.

Bleeding from esophagogastric varices continues to be a frightening complication of cirrhosis. Management of patients with varices is guided by recommendations that are routinely updated. Drs Jakab and Garcia-Tsao detail the current practice strategies.

Many patients with liver disease have dermatologic manifestations. Drs Patel, Katz, and Gordon discuss commonly encountered dermatologic problems observed in such patients. In addition, one of the central modalities in the diagnosis of the cause of liver disease is histologic evaluation. Common pathologic terms and presentations are reviewed by Drs Deeken-Draisey, Rao, and Yang.

Transjugular transhepatic portosystemic shunts have been used for more than 20 years in patients with certain complications of end-stage liver disease. There are emerging data on newer uses for the procedure, and they are reviewed by Dr Boike and me.

Benign liver lesions are frequently identified on abdominal imaging. Distinguishing between focal nodular hyperplasia and hepatic adenoma is an important but difficult distinction because the management is different. Ms Myers and Dr Ahn discuss the approach to evaluation of such benign liver lesions.

Patients with elevated liver enzymes are commonly encountered in practice. Viral hepatitis is always a consideration. The common hepatitis virus infections (A, B, and C) are generally easy to diagnose. However, viral hepatitis from other viruses is not uncommon and yet is difficult for the community practitioner. Drs Cheung and Kwo review the causes of non-A, -B, and -C viral hepatitis.

Cholangiocarcinoma (intrahepatic and extrahepatic) is a grave diagnosis. Drs Buckholz and Brown review the approach to evaluation and management of this condition.

Severe thrombocytopenia is frequently observed in the setting of advanced liver disease. There have been recent advances in the management of severe thrombocytopenia in patients with cirrhosis who are undergoing elective procedures. These advances are discussed by Dr Nilles and me.

Budd-Chiari and alpha-1 antitrypsin deficiency are uncommon problems seen in patients with liver disease. However, it is important not to miss either diagnosis. Drs Haque and Lim detail the approach to evaluation and management of Budd-Chiari, and Drs Manne and Kowdley discuss alpha-1 antitrypsin deficiency.

An evolving area of investigation in the field of hepatology is the understanding of the effects of the microbiome on patients with chronic liver disease. It is expected that the therapeutic landscape in patients with chronic liver disease will eventually involve the microbiome. Drs Reuter and Bajaj discuss this important topic.

Finally, acute on chronic liver failure is a relatively new concept for which there have been increasing data. Inpatient consultation for providers who care for patients with liver disease is not uncommon for this entity. Drs Aday and O'Leary elaborate on this topic.

This issue of *Clinics in Liver Disease* complements the previous issues by introducing additional important clinical topics that help the community practitioner evaluate and manage common problems observed in the inpatient and outpatient setting.

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