

NCL Hepatology: Fatty Liver Primary Care Protocol

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Key

- "Must do" actions for GP's / (Triaged by RMS, where available)
- Recommendations for Primary Care
- Red flag / urgent referral
- Routine referral
- Public health intervention
- Audio-visual aids for patients and GP
- Click icon for clinical evidence

Follow this pathway for <75s only
(Only refer ≥ 75s If cirrhosis on ultrasound)

Fatty Liver on Ultrasound

Fatty Liver On Ultrasound without excess Alcohol consumption (<40 Units per week Male & Female)

FBC, LFT, AST

Calculate FIB-4

FIB4 ≥ 1.3

Organise ELF Test (yellow top bottle)

FIB4 < 1.3

Low Risk Advanced Fibrosis

Repeat tests on annual basis (including annual FIB-4 & if necessary ELF test if FIB-4 has risen)

<9.8

Consider Advice & Guidance for queries via e-RS in this group of patients where clinical uncertainty remains

≥ 9.8

High Risk Advanced Fibrosis

REFERRAL to Hepatology
Referral must state the number of Alcohol units (Only refer >75s If cirrhosis on ultrasound)
Hepatology will assess liver disease, manage advanced fibrosis, screen and treat Portal Hypertension and provide HCC screening and management where appropriate

Fatty Liver On Ultrasound with excess Alcohol consumption (>40 Units per week Male & Female)

Follow Alcoholic Fatty Liver pathway

Once alcohol managed, organise ELF Test (FIB4 is not reliable in patients with excessive alcohol consumption)

Lifestyle Advice Offered

Advise patients to do the following

- eat a healthy diet
- lose weight and keep it at a healthy level for your build and age
- cut out or cut down on alcohol, which is high in calories -1 pint of beer has more calories than a glass of wine
- <https://www.drinkaware.co.uk/understand-your-drinking/unit-calculator>
- about 215 calories in a pint of beer and 126 in a 175ml glass of wine
- <https://www.nhs.uk/live-well/alcohol-support/calories-in-alcohol/>
- do as much exercise as you can, such as walking or swimming for at least 30 minutes a day.