

# FATTY LIVER DISEASE

**N**on-Alcoholic Fatty Liver Disease (NAFLD), while potentially serious, is the diagnosis you hope to receive when you learn that your client has just been declined for "Abnormal Liver Enzymes".



By Donald V. Victorson, CLU

## What is NAFLD?

A non-infectious condition caused by the accumulation of fat in the liver of people who drink little or no alcohol, that is unfortunately becoming much more common as a result of obesity, diabetes, or other medical conditions.

NAFLD is an extremely common disorder affecting it is estimated 20% of adults and 5% of children in this country. In just the past 10 years, obesity in adults has doubled and in children it has tripled. Could this help explain the epidemic of NAFLD / NASH we are seeing?

## What is NASH?

Approximately 25% of those with NAFLD progress to the much more serious Non-Alcoholic Steatohepatitis (NASH). With NASH, fat accumulation is associated with liver cell inflammation, scarring, and eventually cirrhosis. When the liver's ability to function properly is sufficiently impaired a liver transplant becomes essential.

## What causes NAFLD / NASH?

A metabolic syndrome aggravated by obesity, elevated blood lipids including cholesterol and triglyceride, high blood pressure, diabetes, or insulin resistance (pre-diabetes).

Medications including: oral corticosteroids, synthetic estrogens for menopause, heart arrhythmias, breast cancer, and immune suppressing medications for rheumatoid arthritis can all contribute as well.

Other less common conditions are implicated including: Wilson's disease, a hereditary condition, and Weber-Christine disease, a congenital disorder affecting our ability to metabolize fats.

The American Liver foundation estimates that NAFLD occurs in 20 to 40 percent of middle-aged overweight American non-alcoholics!

## How is NAFLD / NASH Diagnosed?

Although NAFLD can be present with normal liver test results, most commonly it is suspected by the physician in an obese person with elevated liver enzymes.

When liver enzymes are elevated Alcohol abuse, the most common cause must be ruled out.

Hepatitis, another common contributor to fatty liver must be ruled out. Hepatitis A will not usually cause permanent damage. The more chronic Hepatitis B and C, may however over time cause severe liver damage.

Since blood tests will rarely yield a definitive diagnosis, an Ultrasound of the Liver, approximately 90% accurate is usually ordered by the physician. In more ominous cases a CT scan will be ordered to look for blockages that an Ultrasound may miss. Nevertheless, currently the only true gold standard test to determine whether NASH is present or simply Fatty Liver is to do a Liver Needle Biopsy.

## What are the symptoms of NAFLD / NASH?

Simple fatty liver (Steatosis) may exhibit no symptoms at all.

Symptoms that may occur include: Fatigue, Malaise, and possibly a dull ache in the upper abdomen, a possible sign of an enlarged liver.

In more advanced cases many of the following may be experienced:

- Lack of appetite
- Weight loss
- Nausea
- Small, red spider veins under the skin, easy bruising
- Weakness or fatigue
- Jaundice including Yellowing of the skin and dark urine
- Bleeding from the esophagus or intestines
- Loss of interest in sex
- Fluid in the abdominal cavity (ascites)
- Itching of the hands and feet, or the entire body
- Swelling of the lower extremities from retained fluid
- Mental confusion, forgetfulness, trouble concentrating
- Liver failure

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**Underwriting Prognosis**

Fatty Liver disease with Non-elevated, or only slightly elevated liver enzymes, providing that alcoholism can be ruled out can usually be offered on a Standard basis.

NASH, if suspected, or proven by a liver biopsy will require a rating.

Severely elevated liver enzymes or where cirrhosis is established will generally be declined by all underwriters.

**Conclusion:**

Pray for Fatty Liver, not something worse. ❖

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