

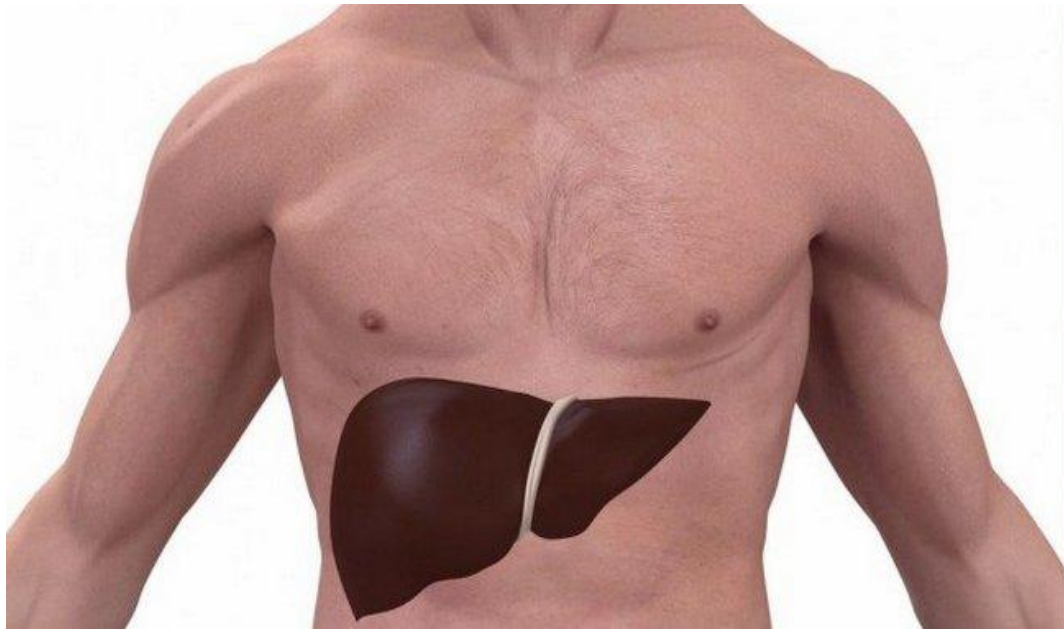
- Astana Medical University
- Department of Internal Disease №1

SIW

Topic: Chronic hepatitis

Made by Yeleukenova Zhanel 463 GM
Check by Baidurin S. A.

- Chronic hepatitis is defined as inflammatory disease of the liver lasting for more than six months. Also it is clinically shown astenovegetativ, dyspeptic and cholestatic syndromes or their combination, without signs of a portal hypertension.



Classification

1. Depend on an etiology:

- chronic viral hepatitis B, C, D.
- autoimmune hepatitis.
- alcoholic hepatitis.
- toxic or medicinal

- 2. Depend on a process degree of activity:
- low.
- moderate.
- high.

Etiology

1) The acute viral hepatitis B, C, D postponed in the past is the main reason.

- Ways of transfer:
- parenteral
- sexual
- from mother to a fetus



- 2) Medicinal lesions of a liver:
- - cytostatics
- - Salicylas
- - anabolic steroids
- - antidiabetic drugs



- 3) Toxic impact on a liver is made:
- - alcohol
- - chlorinated hydrocarbons
- - metals (lead, Hydrargyrum, arsenic, phosphorus)
- - benzene and its derivatives



Pathogenesis

- The chronic course and advance of a disease is explained by two processes:
- 1) Presence of a virus in an organism of patients against the background of weakening of immune system.

- 2) Development of autoimmune processes when under the influence of various factors hepatocytes gain antigenic properties.

Clinics

- Clinical syndromes
- Astenovegetativ – delicacy, the expressed fatigability, nervousness, weight loss.
- Dispepsitic – nausea, vomiting, a loss of appetite, an eructation, gravity in epigastrium, a meteorism, constipations.

Диспепсический синдром -
это неприятные ощущения,
связанные с пищеварением



ОТРЫЖКА ТОШНОТА ВЗДУТИЕ НЕТ АППЕТИТА ДИАРЕЯ

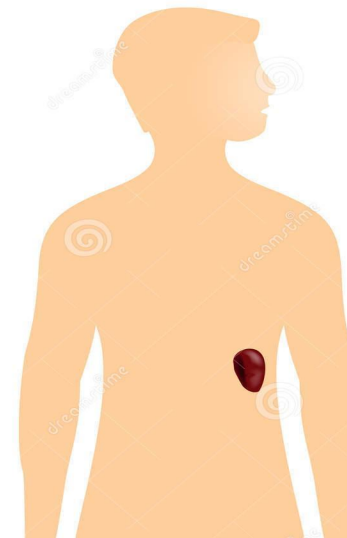
- 3. A syndrome of immune inflammation – ferverescence, a hyperadenosis, joint pains, a splenomegaly.
- 4. Cholestatic – an icterus, a dermal itch, a xanthopathy, santelazma, urine darkening.



- 5. A syndrome of a small liver failure – weight loss, an icterus, a hepatic smell from a mouth, appear "hepatic" palms, "hepatic" tongue, vascular asterisks on a body, fingers in the form of drum rods, fingernails in the form of hour glasses, santelazma on a skin.



- 6. Hemorrhagic – odontorrhagias, nasal bleedings, hemorrhages on a skin.
- 7. A hypersplenism syndrome – lien augmentation.



Healthy spleen



Splenomegaly

Diagnostic

- OAK – anemia, thrombocytopenia, a leukopenia, ESR augmentation.
- Biochemical blood analysis – a hyperbilirubinemia, a disproteinemia, at the expense of augmentation of quantity of globulins. Rising of level of sedimental assays – sulemovy, timolovy. Rising of level of transaminases – Al-At, As-At, and an alkaline phosphatase.

- 3. OAM – a proteinuria, a microhematuria, a bilirubin in urine.
- 4. Immunologic analysis.
- 5. Markers of a viral infection.

Instrumental

- US of a liver and gall bladder (the unevenness of a tissue of a liver, augmentation of the sizes is taped).
- Computer tomography of abdominal organs.
- Gastroscopy.

- 4. Colonoscopy.
- 5. The puncture biopsy of a liver with the subsequent histological research, can be carried out to time of a laparoscopy or chrezkozhno. Allows to judge activity of process and is important differential criterion for difference of chronic hepatitis from cirrhosis.

Treatment:

- Medical regimen. Work with exercise and psychoemotional stresses is excluded. Short-term rest during the day is shown. Hepatotoxic drugs, physiotreatment and a balniolecheniye are excluded. In the period of an exacerbation – a bed rest.



- 2. Clinical nutrition – a diet No. 5.
- Are excluded: fat grades of meat and fish, fried dishes, smoked products, salty and acute snack, bean, sorrel, spinach, fresh fruit, strong coffee, alcohol, carbonated drinks.



- 3. Antiviral treatment: to be carried out at hepatitis to a phase of reproduction of a virus and prevents development of a cirrhosis and cancer of a liver. Interferons within 6 months (the Interferon And, Velferon, Roferon).
- 4. Pathogenetic treatment: corticosteroids, cytostatics.

- 5. The immunomodelling therapy has the stimulating and normalizing effect on immune system: Thymalinum, D-Penicillinum, Timogen, T-activin.

- 6. Metabolic and kofermentny therapy is referred on improvement of processes of exchange in hepatic cells. Polyvitaminic complexes: Dekamevit, Undevitum, Duovit, vitamin E, Riboxinum, Essentiale.
- 7. Gepatoprotektors: Korsil, Legalonum, Katergen.

- 8. Disintoxication therapy: Haemodesum intravenous by drop infusion, 5% glucose. Enterosorbents – Laktofiltrum, Filtrum, Enterosgel.
- 9. Treatment of a hydropic and ascitic syndrome at a cirrhosis, in the beginning – Veroshpiron, Aldikton, and then in their combination to Uregitum, Hypothiazidum, Furosemidum.
- 9. Treatment of bleedings from expanded veins.

Prophylaxis of chronic hepatitis and cirrhosis:

- Primary: prophylaxis of a viral hepatitis, effective treatment of an acute viral hepatitis, balanced diet, control of reception of medicinal preparations, fight against an alcoholism, narcomania.



- Secondary: prophylaxis of exacerbations of a disease. Restriction of exercise stresses, correct workarrangement. Clinical nutrition, treatment of associated diseases of a GIT.



Citation

- ["Hepatitis"](#). MedlinePlus. [Archived](#) from the original on 11 November 2016. Retrieved 10 November 2016.
- ^ [Jump up to:](#)^{a b c d e f g} ["What is hepatitis?"](#). WHO. July 2016. [Archived](#) from the original on 7 November 2016. Retrieved 10 November 2016.
- ^ [Jump up to:](#)^{a b c d e f g h i j k l m n} ["Hepatitis"](#). NIAID. [Archived](#) from the original on 4 November 2016. Retrieved 2 November 2016.
- ^ [Jump up to:](#)^{a b} ["Liver Transplant"](#). NIDDK. April 2012. [Archived](#) from the original on 11 November 2016. Retrieved 10 November 2016.
- [Jump up](#)[^] ["Hepatitis \(Hepatitis A, B, and C\) | ACG Patients"](#). patients.gi.org. [Archived](#) from the original on 2017-02-23.