Non-alcoholic steatohepatitis, non - alcoholic fat

Non-alcoholic steatohepatitis, non - alcoholic fatty liver disease and chemotherapy-associated hepatitis

Non-alcoholic steatohepatitis (NASH) is the inflammatory subtype of non-alcoholic fatty liver disease (NAFLD) and is associated with disease progression, the development of cirrhosis and frequently the need for liver transplantation. NAFLD is now recognised as the most prevalent chronic liver disease worldwide and this is expected to increase 60% by 2030. Presently the prevalence of NAFLD is 25% and NASH 1.5–6%, with an estimated 20% of patients with NASH devel oping cirrhosis. Some drugs may induce hepatotoxic lesions, such as ste atosis or steatohepatitis found in NAFLD. Among these drugs there are some antitumoral molecules, such as methotrexate, 5-fluorouracil, irinotecan, tamoxifen and l-asparaginase. The hepatotoxic phenotype developed from treatment with such drugs is known as chemotherapy-associated, chemotherapy- induced acute steatohepatitis or chemotherapy-associated hepatitis (CASH). The parenchymal consequences of CASH are important surgically and must be considered when predict ing future liver remnant (FLR) function.

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