

Cirrhosis: Overview for Patients

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What is Cirrhosis?

When something attacks and damages the liver, liver cells are killed and scar tissue is formed. This scarring is called fibrosis, and it happens little by little over many years. When the whole liver is scarred, it shrinks and gets hard. This is called cirrhosis, and usually this damage cannot be undone.

Any illness that affects the liver over a long period of time may lead to fibrosis and, eventually, cirrhosis. Heavy drinking and viruses (like hepatitis C or hepatitis B) are common causes of cirrhosis. Cirrhosis may also be caused by a buildup of fat in the liver of people who are overweight or have diabetes, called non-alcoholic fatty liver disease. There are other, less common, causes of cirrhosis.



What Are the Symptoms of Cirrhosis?

At first, you may have no symptoms at all (this is called compensated cirrhosis). In fact, a person may live many years with compensated cirrhosis without being aware that their liver is scarred. This is because there are still enough healthy liver cells to keep up with the body's needs.

But if nothing is done about the cause of cirrhosis (if you continue to drink, don't lose weight, or don't treat your hepatitis C, for example), the few remaining cells get overwhelmed, and the liver can no longer function normally

or do its usual jobs for the body. Then you may notice symptoms like low energy, poor appetite, weight loss, or loss of muscle mass. You may also experience any of the serious problems described below, in which case your disease has progressed from compensated cirrhosis to decompensated cirrhosis.

Bleeding varices (internal bleeding)

Large blood vessels (varices) can develop in the esophagus (the food tube) and get bigger and bigger over time and may even burst open. When this happens, you will vomit blood or notice your stool is black and tarry. If either of these things happens, you should go to the emergency room immediately to get help and stop the bleeding.

The risk of bleeding from varices can be reduced by finding them before any bleeding takes place. Then you can start taking special blood pressure medicines (called beta-blockers) or have the varices treated by a special procedure in which tiny rubber bands are tied around the varices.

Ascites (fluid in the belly)

Another problem caused by high pressure in the veins of the liver is ascites. Fluid leaks out of the veins and into the belly. As the belly fills with fluid, the abdomen can enlarge, like a balloon filled with water. The legs can get swollen too. This can be very uncomfortable. Ascites may go away with a low-salt diet, and with diuretics (water pills) ordered by your provider. But sometimes a provider must drain the fluid from the belly using a special needle.

If you have ascites and you suddenly get a fever or new belly pain, you should go to the emergency room immediately. These could be signs of a serious infection that can be life-threatening.

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Encephalopathy (confusion)

A liver with decompensated cirrhosis also may not be able to get rid of toxic substances like ammonia (which comes from the intestines), and it may allow these substances to go into the brain and cause confusion. Besides confusion, toxins in the brain cause changes in your sleep, your mood, your concentration, and your memory. In severe cases, these toxins can even cause a coma. These changes are all symptoms of hepatic encephalopathy. If you have encephalopathy, you may have problems driving, writing, and performing other activities of daily living. Signs of encephalopathy are trembling and hand “flapping.” Your provider might prescribe lactulose, a laxative syrup that makes your bowels move more often. The goal is to move the bowels two to three times a day, which helps get rid of ammonia.

If you are not acting like yourself, if you are confused, or if you are very sleepy, you should be taken to the emergency room immediately. These symptoms could be a sign of a serious medical problem. You should not drive when you have these symptoms.

Jaundice (yellowing of the eyes and skin)

Bilirubin is a normal substance in the bloodstream, but when bilirubin levels are too high, there will be a yellowing of the eyes and skin called jaundice. People with jaundice also frequently have itching. A healthy liver helps regulate the bilirubin level in the body, but people with hepatitis and cirrhosis can develop high levels of bilirubin. Too much alcohol and some medicines can also lead to jaundice. If you suddenly develop jaundice, you should go to the emergency room immediately.

What Can You Do About Your Cirrhosis?

The most important thing you can do is protect your liver from further damage and follow the treatment prescribed by your provider. The following checklist is a guide to taking care of your liver and keeping you well.

- I am not drinking any alcohol or using any drugs.
- I always take the medications that my provider has ordered for me. I know their names and purpose.
- I tell my provider if I am taking over the counter or herbal medications.
- I don't take pain pills like ibuprofen (Motrin®, Advil®) or Naprosyn (Aleve®), especially if I have ascites.
- I don't take too many Tylenol® (acetaminophen) pills, and I never take Tylenol with alcohol.
- I avoid sleeping pills or tranquilizers.
 - If my provider tells me to take lactulose, I take enough to move my bowels two to three times a day.
- I keep all my medical appointments or call if I need to reschedule.
- I have been tested to see whether I need to get the hepatitis A and B vaccines (hepatitis A and B are viruses that attack the liver).
- I have received the pneumonia vaccine, and I get my annual flu shot (people with cirrhosis are more likely to get infections).
- I get blood tests and an ultrasound (or CT or MRI) every 6 months.
- I eat a well-balanced diet that is low in fat and includes enough protein. I cut down on salt (sodium), read food labels, and avoid canned or prepared foods, especially if I have ascites.
- I never let myself get constipated. If it happens, I tell my health care provider.
- I keep a healthy weight and weigh myself regularly if my provider recommends it.
- I make sure to have a balance of work, rest, and exercise in my life.
- I cope well with stress (or I ask for guidance when I can't cope).
- I tell my health care provider if I am depressed.
- I have never smoked cigarettes, I have quit smoking, or I have discussed quitting with my health care provider.
- I have asked my health care provider whether I need a liver transplant.

For more information, visit www.hepatitis.va.gov