

肝硬化合併症之預防與治療： 感染之預防與治療

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Patients with cirrhosis of liver are at risk of developing serious bacterial infections due to altered immune defenses and bacterial translocation. Despite the widespread use of broad-spectrum antibiotics, bacterial infection is responsible for up to a quarter of the deaths of patients with liver disease. Risk factors associated with the development of infections are severe liver failure, variceal bleeding, low ascitic protein level and prior episodes of spontaneous bacterial peritonitis (SBP). The most common and life-threatening infection in cirrhosis is spontaneous bacterial peritonitis followed by urinary tract infections, pneumonia, endocarditis and skin and soft-tissue infections. Patients with decompensated cirrhosis have increased risk of developing sepsis, multiple organ failure and death. The prognosis of these patients is closely related to a prompt and accurate diagnosis. Preventive strategies are still in evolution and involve use of antibiotic prophylaxis in patients with gastrointestinal bleeding and spontaneous bacterial infections and selective decontamination of the gut and oropharynx. Though the advances in the management an prevention of bacterial infection in cirrhotic patients in recent years, this issue still claims a lot of life and remains a great challenge to hepatologists and patients alike.