Chronic liver disease and COVID-19:management and recommendations: Non-viral liver disease

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- 1. Patients with COVID-19 and liver function abnormality should have investigations for the underlying cause, including screening for common liver diseases such as chronic hepatitis B, chronic hepatitis C and non-alcoholic steatohepatitis.
- 2. Patients with non-alcoholic fatty liver disease are at a greater risk of developing severe COVID-19 due to underlying co-morbidities (for example, obesity and metabolic syndrome).
- 3. Cirrhotic patients with COVID-19 may experience a higher mortality rate. Whether patients with viral hepatitis are more susceptible to liver injury in patients with COVID-19 awaits exploration.
- 4. Children with COVID-19 have lower chances to have abnormal liver biochemistries. Investigation of other causes of hepatitis may be warranted.
- 5. Drug-induced liver injury should be considered and closely monitored in particular using remdesivir, lopinavir—ritonavir, chloroquine, hydroxychloroquine, and tocilizumab for COVID-19. On the other hand. Patients with COVID-19 and abnormal liver function should not be viewed as a contraindication for investigational/off-label therapeutics.
- 6. Consider other causes of hepatitis in patients with COVID-19 including myositis (particularly when AST>ALT), ischemia, cardiac injury and cytokine release syndrome if liver function deteriorates consistently and progressively.
- 7. Do not assume disease flares in patients with autoimmune hepatitis or acute rejection in liver transplantation recipients. The use of immunosuppressive and/or immune modulation agents should not be adjusted casually without liver biopsy confirmation. Consultation for the specialists for drug modification as needed.
- 8. Canceling or postponing diagnostic tests including ultrasound, computed tomography, magnetic resonance imaging is suggested to avoid COVID-19 transmission during patient transportation unless bile duct obstruction, cholangitis, and acute venous thrombosis are suspected and interventional procedures are required.