INFECTIONS PRECIPITATING HEPATIC ENCEPHALOPATHY IN DECOMPENSATED LIVER DISEASE

ABSTRACT

INTRODUCTION: Infection and sepsis are a major burden in management of patients with liver cirrhosis. Its occurrence alters the natural course, precipitates hepatic encephalopathy and is associated with increased risk of mortality. Patients with liver cirrhosis are prone for infections which culminate in HE.

AIMS AND OBJECTIVES: To assess spectrum of infections precipitating hepatic encephalopathy in patients with liver cirrhosis.

Materials and methods: It is a observational type of study. Patients of with diagnosis of liver cirrhosis and hepatic encephalopathy admitted in PSG hospitals were included. Data was collected through a pretested proforma.

Results: In our study 44(88%) were males, 06 (12%) were females. More number of patients were in the age group of less than 50 years (44% ) followed by patients in age group of 50 to 60 years .35 (70 %) were found to have ethanol consumption, 4 patients (8%) were found to have NAFLD, 3 (6%) were found to have Hepatitis B, 3 (6%) were found to have Hepatitis C, 1 (2%) had were autoimmune hepatitis, 1 (2%) were Wilson’s, and 3 (6%) have no cause. 20 patients (40 %) had urosepsis, 15 patients (30 %) had blood culture proven sepsis, 5 patients (10%) had spontaneous bacterial peritonitis, 7 patients (14%) with respiratory tract infection, 3 patients (6 %) with
cellulitis. 20 patients (40%) were found to have E.coli sepsis, 13 patients (26%) had Klebsiella sepsis, 5 patients (10%) had Staphylococcal sepsis, 4 patients had Enterococcus sepsis, 3 patients (6%) had candida albicans sepsis. 6 patients (12%) died.

CONCLUSION: It is found that patients with hepatic encephalopathy associated with infections as the precipitating factor. It is found that urinary tract infection is the most common among several infections associated with hepatic encephalopathy. E.coli is the major etiological organism precipitating infection in this study.