VIEW OF THE NON-ALCOHOLIC FATTY LIVER IN NON-OBESE PATIENTS FROM THE MAFLD PERSPECTIVE

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ABSTRACT:

Background: Recently, a consensus by an international panel of experts recommended a change in name for NAFLD to metabolic (dysfunction) associated fatty liver disease (MAFLD). The new definition is a landmark in hepatology bringing a new way of thinking about diseases of the liver that are associated with fat deposition and metabolic dysfunction Importantly, this "MAFLD definition" avoid the dichotomous view of NAFL and NASH, since it is based in "positive" criterion (evidence of hepatic steatosis) instead of "negative" criterion hard to exclude.

Lean NAFLD is defined as NAFLD that develops in patients with a body mass index (BMI) <25 kg/m2. The prevalence of lean NAFLD varies from 7% in the United States (5) to as high as 19% in Asia.

Main text: the recommended BMI cut-off points for Asians for defining overweight (23–25 kg/m2) and obesity (>25 kg/m2) are lesser than those of Western populations. (8)The term "lean NAFLD" is used to describe fatty liver in patients who are not overweight or obese, as per region-specific BMI.Therefore, NAFLD with BMI <23 kg/m2 for Asian populations and <25 kg/m2 for non-Asian populations are considered lean NAFLD. The respective BMI cut-off points for non-obese NAFLD are <25 kg/m2 and 30 kg/m2, respectively.

New diagnostic criteria for MAFLD in lean persons were proposed **,**in which alcohol consumption is not an exclusion criteria, but requires, evidence of hepatic steatosis and the presence of at least 2 of the metabolic abnormalities:

Regarding the association with metabolic features, lean patients with NAFLD seem to have an intermediate phenotype between healthy subjects and obese patients with MAFLD**,**regarding glucose intolerance and insulin resistance (IR), type-2 diabetes mellitus (T2DM), hypertension, and hyperuricemia. The lipid profile, however, appears to be similar between lean and obese patients with NAFLD, with similar levels of total cholesterol and triglycerides, although lean patients tend to present higher levels of HDL cholesterol

Conclusion: Adequate understanding of the spectrum of MAFLD in association with non-obese NAFLD constitutes a new line of research which would provide a better and more exhaustive understanding of the relationship between metabolic dysfunction and fatty liver disease, especially in non-obese patients in any of It would be necessary to delve further in non-Asian patients to establish a better characterization of the disease.

Keywords: MAFLD, Lean NAFLD, Lean MAFLD, Non obese NAFLD.