**Prevalence of non-alcoholic fatty liver disease in four different weight related patient groups: association with small bowel length and risk factors**

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## Abstract

Non-alcoholic fatty liver disease (NAFLD), defined by non-alcohol related excessive fat accumulation in the liver, is a leading cause of chronic liver disease worldwide. Obesity is a major risk factor for NAFLD. Although simple steatosis carries a relatively benign prognosis, a significant proportion of patients will progress to non-alcoholic steatohepatitis (NASH). NASH is the advanced form of NAFLD, leading to liver cirrhosis, end-stage liver disease, and hepatocellular carcinoma. In this retrospective study, we analyzed 136 liver samples obtained from patients operated upon in our surgical department and determined the prevalence of NASH in relation to gender and body mass index (BMI). Furthermore, we assessed the association of NASH with the length of the small bowel measured intraoperatively. Simple steatosis of the liver is highly prevalent especially in the obese. In our study, we found steatosis of the liver in more than 80% of morbidly obese patients, however, probable/definite NASH was found in only 30% of these patients (and a further 30% of these patients were classified as uncertain NASH). The exact pathogenesis and natural history are still being defined. Therapy currently addresses the features of metabolic syndrome, including diabetes, obesity, and dyslipidemia, however, if a connection between NASH and small bowel length is confirmed, malabsorptive bariatric surgery should be considered as a further option.

## Biography

Andreas Hillenbrand graduated from Medical Center of the University of Munich - LMU Munich in 2000 and started his surgical career in Ulm. After completing his specialist examination in surgery in 2008, he was focused on general and endocrine surgery.

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