

Seronegative auto immune hepatitis

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Abstract

Autoimmune hepatitis (AIH) is a chronic progressive inflammatory disorder that characterizes with lobular inflammation and elevation of liver transaminases. The diagnosis of AIH is based on a combination of clinical, biochemical, immunological and histological features and the exclusion of other known causes of liver disease. It means that one fourth to one third of AIH patients could have atypical presentation and they are prone to delay in diagnosis and treatment and also it means more cases progress toward advanced liver injury including liver cirrhosis and or liver failure. Based on several reports, seronegative cases of AIH have a more aggressive course. This is just one side of the coin. Traditionally we used to pertain cryptogenic liver cirrhosis to neglected fatty liver and the question is “Are they really fatty livers or something else?” Routinely, we suppose fatty liver to sedentary life and over weight because of urban sedentary life style which has begun much more earlier than silent pandemic of NAFLD and a considerable part of those who involved by NAFLD has normal BMI, known as lean NASH. Surprisingly the mortality of lean NASH is twice NAFLD. So is it pure fatty infiltration or something else? Could it be an atypical presentation of AIH or a combination and overlap of AIH & NASH? Based on my mentor comment, we can call it toxic steatohepatitis and potentially an overlap of seronegative AIH & NASH.

Conclusion

AIH could have an atypical presentation as seronegative AIH. Seronegative AIH could be more aggressive. There could be diagnosis delay in challenging with seronegative AIH. Some cases with NAFLD, NASH and especially lean NASH could be atypical cases of AIH or at least immunogenicity could have a role in their pathogenesis and we should be aware of this possibility.



Biography:

Pezhman Alavinejad, associate professor of gastroenterology and hepatology. He graduated as general physician (MD) from Tehran University in 1998. He worked as GP up to September 2001 and in 2001, accepted as internal medicine resident in Ahvaz Jundishapur university of Medical sciences, and graduated as internist in 2005. He worked as internist for 4 years and in 2009 accepted for GI and hepatology fellowship. His current position is associate professor of gastroenterology and hepatology in Ahvaz Jundishapur university of Medical sciences, Ahvaz, IRAN.

Speaker Publications:

1. Functions of coenzyme Q10 supplementation on liver enzymes, markers of systemic inflammation, and adipokines in patients affected by nonalcoholic fatty liver disease
2. Evaluation of L-carnitine efficacy in the treatment of non-alcoholic fatty liver disease among diabetic patients: a randomized double blind pilot study
3. Prevalence of H. pylori infection and precancerous gastric lesion in family relative of gastric cancer in South West of Iran
4. “Sulphydryl functionalized activated carbon for Pb(II) ions removal: kinetics, isotherms, and mechanism”; Journal of Separation Science and Technology/ Vol 55, 2020- Issue 7
5. Relationship between serum ferritin level and transient elastography findings among patients with nonalcoholic fatty liver disease
5. A senile man with cystic lesion of liver and biliary obstruction

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