

# Relationship Between Clinical Severity and Health Related Quality of Life in Chronic Liver Diseases

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## Objectives

To assess the relationship between the type of chronic liver diseases (CLDs), clinical severity and patients' HRQoL.

## Methods

A naturalistic, multicentre study has been conducting to identify and test quality of care indicators. Adult CLDs patients (age>18 years) have been enrolling at gastroenterology unit of 3 Italian hospitals. We are collecting socio-demographic, clinical and HRQoL data with the EQ-5D-3L. Patients are sub-grouped according to CLD type and to clinical severity using the modified Child-Turcotte-Pugh score: with this instrument, patients are classified as non-cirrhotic, early cirrhotic (class A), advanced cirrhotic (classes B and C). We conducted Kruskal-Wallis tests to assess relationship between EQ-5D-VAS score and disease type or severity score.

## Results

Results are based on data from 2,221 patients (67% male, median age=62 years), classified into the following subgroups: HCV or HBV chronic hepatitis (36.0%), compensated cirrhosis (CC, 23.5%), hepatocellular carcinoma (HCC, 19.8%), decompensated cirrhosis (DC, 13.5%), patients in evaluation or listed for liver transplant (LT, 7.2%). Non-cirrhotic patients (HCV or HBV chronic hepatitis) had significantly ( $p<0.001$ ) higher median VAS (80) than patients with any other CLD types (70). In contrast, patients listed for LT had the lowest ( $p<0.05$ ) median VAS (65) and the highest proportion of patients (58.1%) in Child class B-C. DC patients had a median VAS not significantly different from that of HCC or CC patients (70 versus 70 and 73, respectively). On the other hand, DC patients in child class A showed a significantly ( $p<0.05$ ) higher median VAS (72.5) than HCC and CC patients in class B-C, who had a median VAS of 70 and 60, respectively.

## Conclusions

HRQoL of CLDs patients is significantly related with the Child-Turcotte-Pugh severity score. These results could be useful to understand the impact of the disease severity on patients' HRQoL and guide some decisions in clinical care.