Liver Fibrosis Diagnosis Promotes Lifestyle Changes

People reported that they adopted better diets, drank less and got more exercise even two years after the initial diagnosis.

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Screening that reveals liver fibrosis was linked to improvements in lifestyle, including reduced calorie and alcohol consumption as well as more exercise in people at risk for liver disease. While these lifestyle changes were initially self-reported six months after the scan, they were maintained for two years, according to study findings published in Clinical Gastroenterology & Hepatology.

Over time, chronic hepatitis B or C, fatty liver disease or heavy alcohol consumption can lead to liver fibrosis, cirrhosis and even liver cancer. Metabolic dysfunction-associated steatotic liver disease (MASLD; formerly known as non-alcoholic fatty liver disease is often associated with obesity, type 2 diabetes and other metabolic abnormalities. Until the recent approval of Rezdiffra (resmetirom), there were no approved medical therapies for MASLD, so management has relied on lifestyle changes such as diet, exercise and weight loss.

Diagnosing liver fibrosis at an early stage may motivate changes in eating, drinking and exercise habits. Maria Kjaergaard, MD, of Odense University Hospital in Denmark, and colleagues carried out a screening trial for people who were at risk for MASLD or alcohol-related liver disease (ALD). All participants were offered advice about healthy lifestyle changes.

The research team analyzed self-reported changes in diet, alcohol intake, exercise and weight after screening using transient elastography (FibroScan). They assessed lifestyle changes using electronic questionnaires at one week and six months. A small subgroup also underwent a reassessment after two years.

The researchers recruited 2,946 people at risk for MASLD and 1,850 people at risk for ALD. About half were men, and the average age was 58 years. Within this population, 383 people (8%) came back positive for liver fibrosis (7% in the MASLD group and 10% in the ALD group). Some 87% and 84% of participants, respectively, responded to the questionnaires at the one-week and six-month marks.

Among people at risk for MASLD, 26% adopted a better diet or reduced their calorie intake one week after screening, with the proportion rising to 35% at six months. In addition, 12% increased

their exercise levels at one week, rising to 22% at six months. Half a year after fibrosis diagnosis, 13% dropped at least 5% of their baseline body weight and 3% lost more than 10%.

Among people at risk for ALD, overconsumption of alcohol dropped from 46% at baseline to 32% at six months after the liver screening. Irrespective of their fibrosis status, just 15% said they drank more after screening. But high-risk drinkers who tested positive for fibrosis were more likely to decrease their alcohol intake or even become abstinent six months later.

In a smaller subgroup of 752 people, overconsumption of alcohol dropped from 52% to 41% two years after the diagnosis. A positive fibrosis test continued to be a predictor of reduced drinking or abstinence two years later.

“Screening for liver fibrosis is associated with sustained improvements in alcohol consumption, diet, weight and exercise in at-risk ALD and MASLD,” wrote the researchers. “A screening program may combine early detection of advanced fibrosis with increased motivation to lifestyle changes, and may consequently act as both prevention, early detection and part of the treatment.”

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