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**Esteatosis Hepática Metabólica.
Algoritmo para su diagnóstico y tratamiento basados
en las guías de la EASL.**

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Responsable Consulta Especial de Hepatología.
2024**



**Jornada Científica Nacional de Gastroenterología
Ciego de Ávila, del 16 de octubre al 16 de noviembre de 2024**



Introducción

EHGNA / MASLD

ESTEATOSIS
SIMPLE

ESTEATOHEPATITIS

CIRROSIS HEPÀTICA

- Serio problema de salud pública mundial.
- Prevalencia global del 38 %.
- Causa frecuente de enfermedad hepática crónica e indicación frecuente de trasplante de hígado.

Historia del nombre.

1836

- Tomas Addison usa el término de "*hígado graso*".

1938

- Connor: EH precursora de CH en DM2 y en alcoholismo.

1980

- Ludwig introduce el término de *EHNA*.

1986

- Schaffner emplea por 1ra vez *NAFLD*.

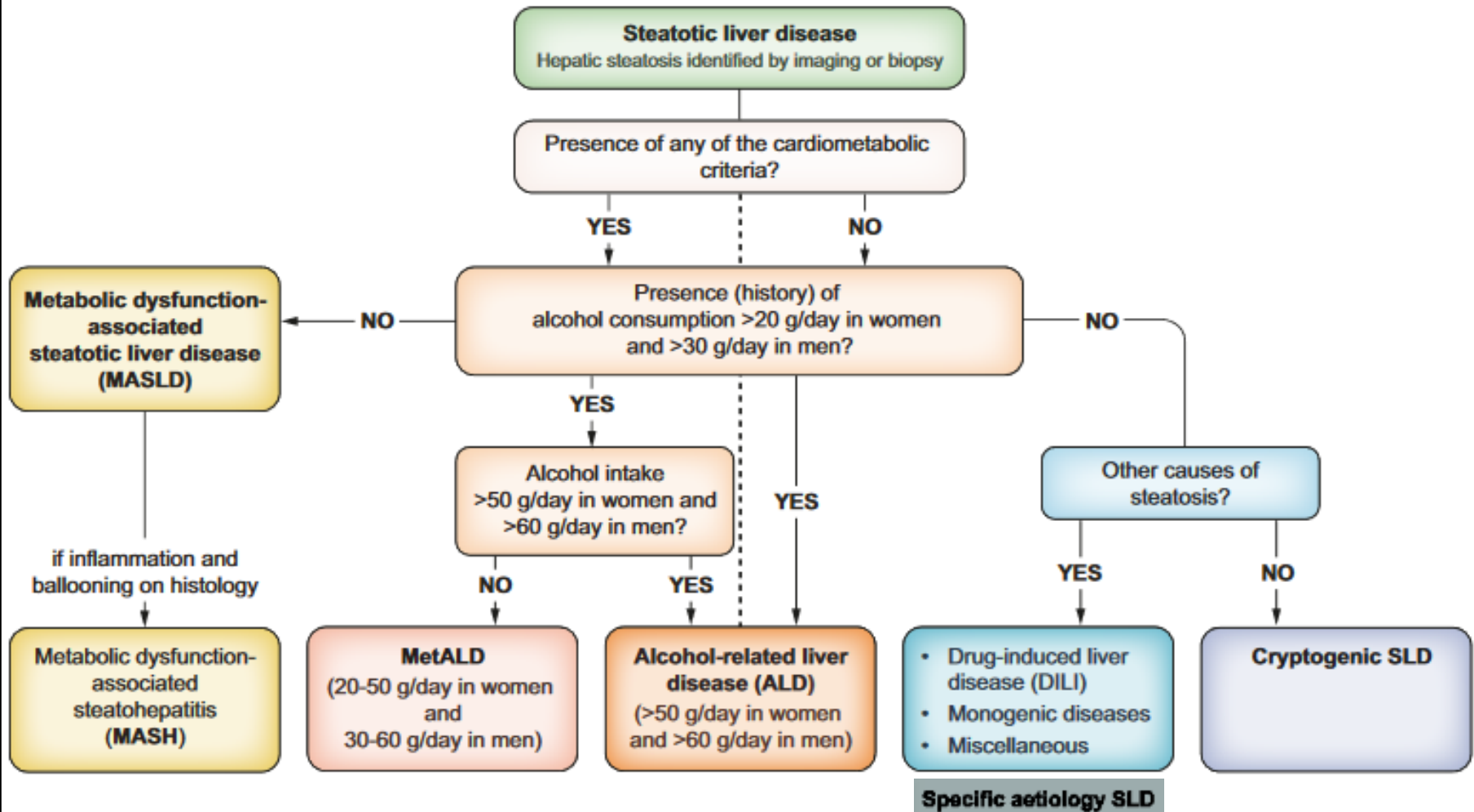
2020

- Grupo de expertos decide llamarla *MAFLD*.

2023

- Se sustituye por consenso *NAFLD* y *MAFLD* por *MASLD*.

Enfermedad hepática esteatósica y sub-categorías.



ESTEATOSIS HEPÀTICA METABÒLICA. CRITERIOS DIAGNÒSTICOS.

ESTEATOSIS
HEPÀTICA.
(imagen o biopsia)

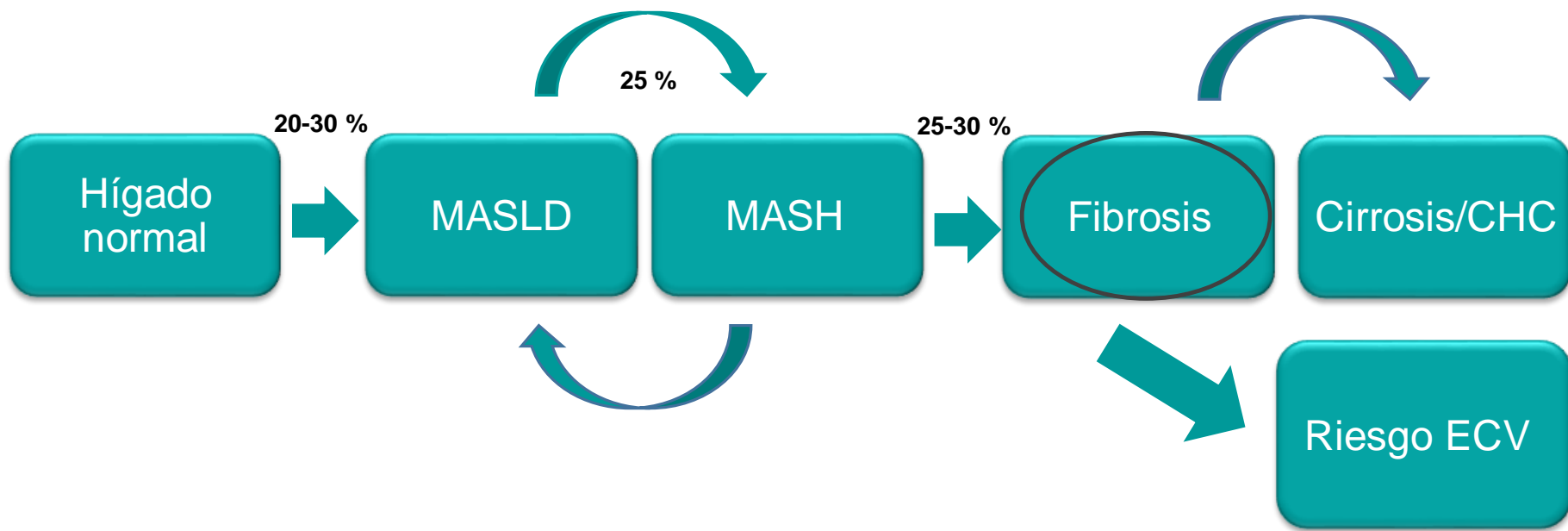
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Adult criteria

At least 1 out of 5:

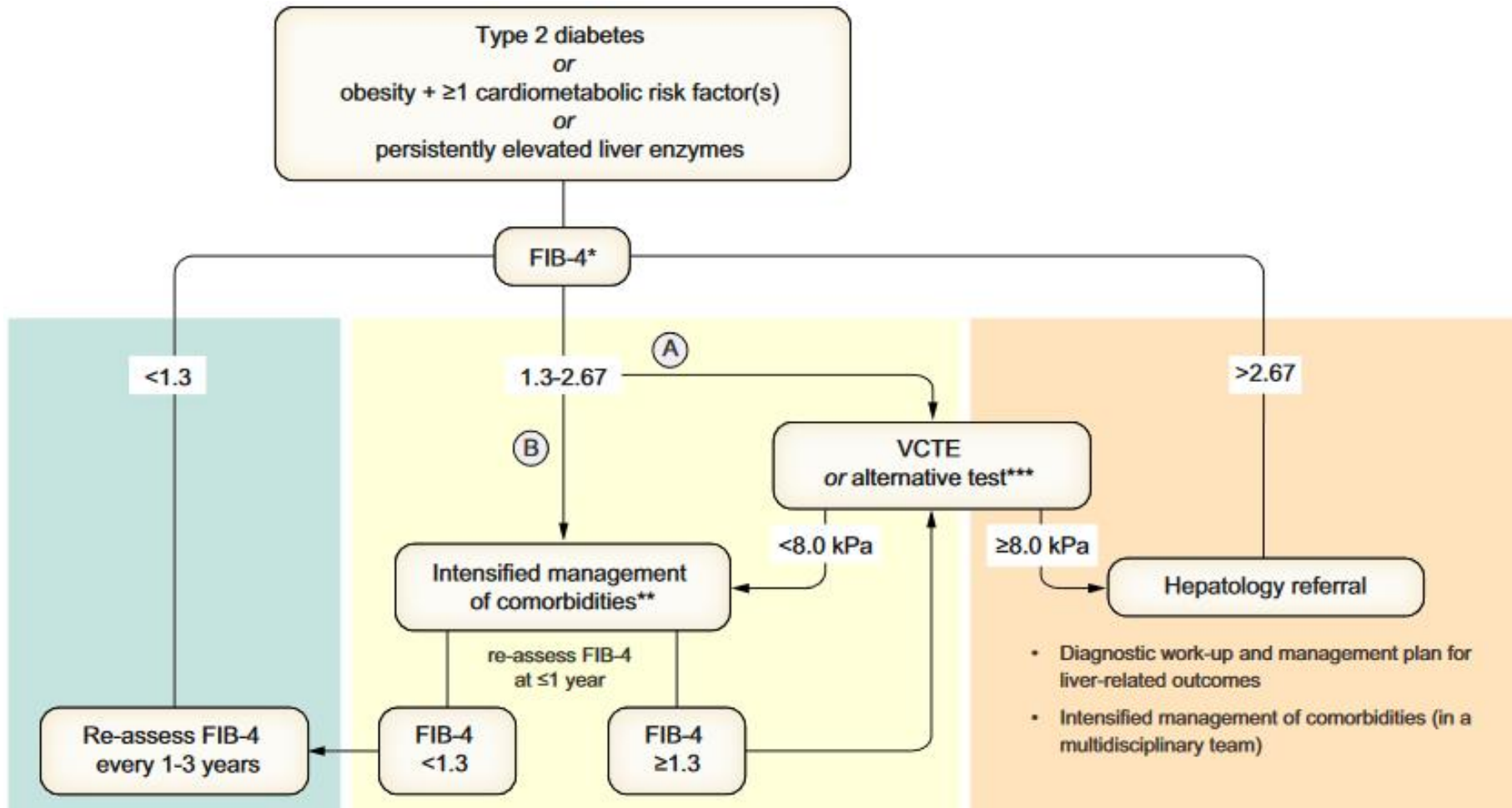
- BMI ≥ 25 kg/m² [23 Asia] **OR** WC > 94 cm (M) 80 cm (F) **OR** ethnicity adjusted equivalent
- Fasting serum glucose ≥ 5.6 mmol/L [100 mg/dl] **OR** 2-hour post-load glucose levels ≥ 7.8 mmol/L [≥ 140 mg/dl] **OR** HbA1c $\geq 5.7\%$ [39 mmol/L] **OR** type 2 diabetes **OR** treatment for type 2 diabetes
- Blood pressure $\geq 130/85$ mmHg **OR** specific antihypertensive drug treatment
- Plasma triglycerides ≥ 1.70 mmol/L [150 mg/dl] **OR** lipid lowering treatment
- Plasma HDL-cholesterol ≤ 1.0 mmol/L [40 mg/dl] (M) and ≤ 1.3 mmol/L [50 mg/dl] (F) **OR** lipid lowering treatment

Historia Natural de la MASLD



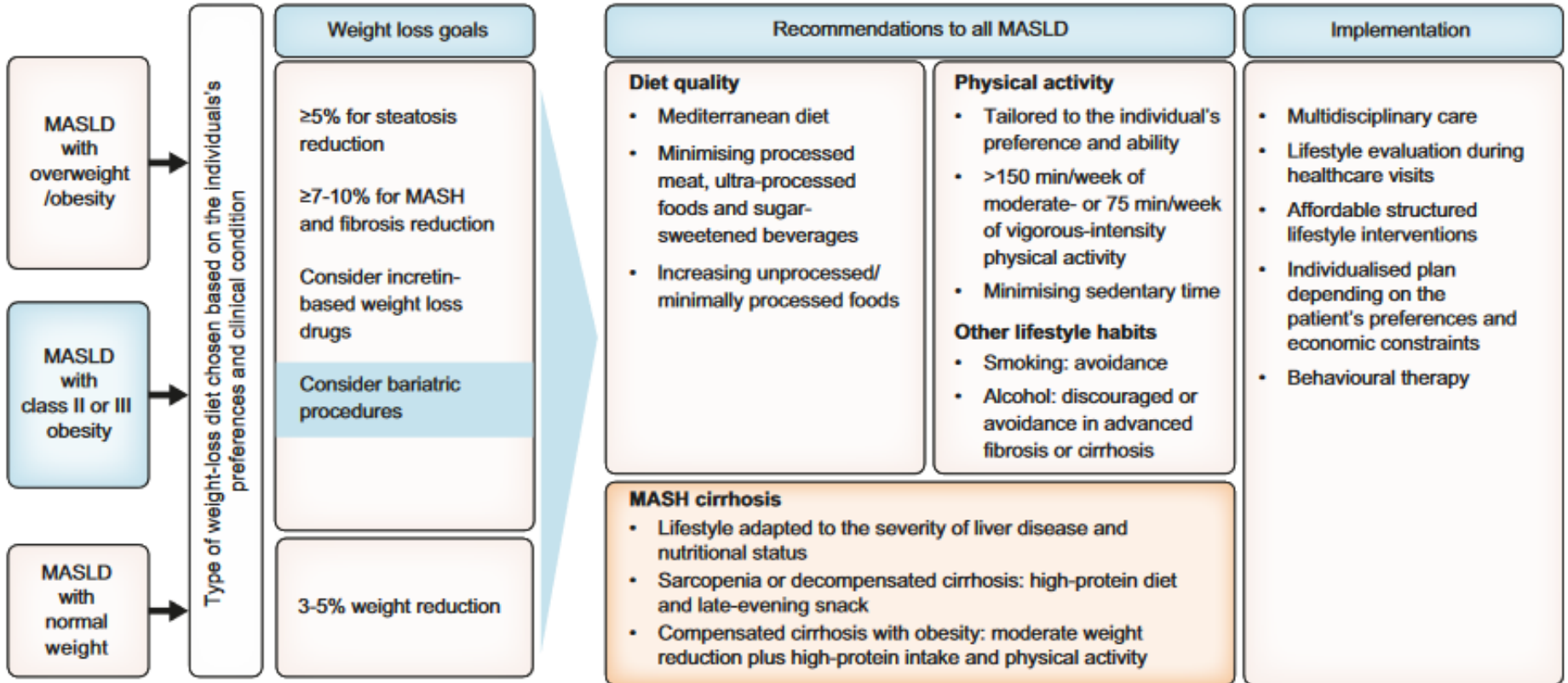
Factores que favorecen y aceleran la progresión de la enfermedad

Evaluación no invasiva del riesgo de fibrosis en pacientes con factores de riesgo metabólicos.

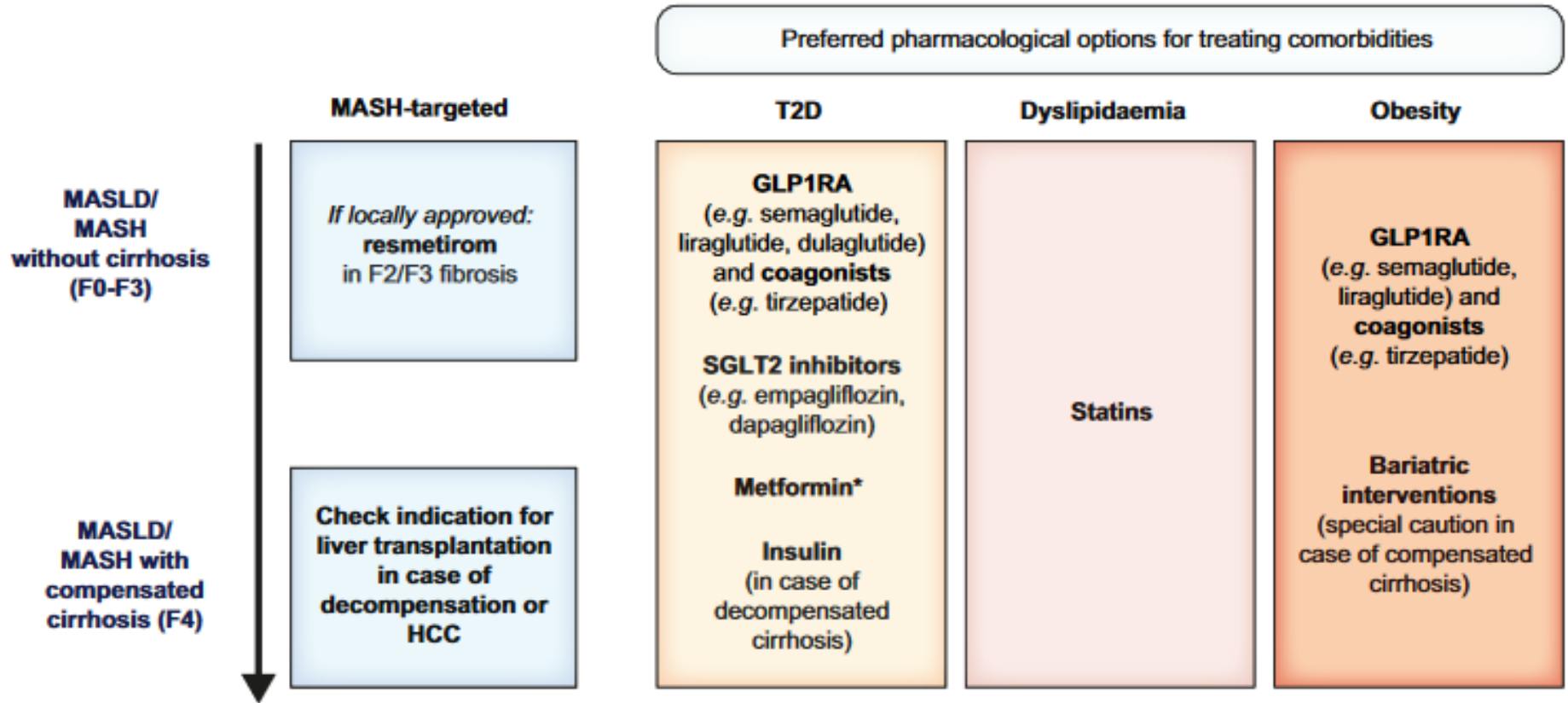


Tratamiento de la MASLD.

Cambios en el estilo de vida recomendados.



Otros tratamientos de la MASLD/MASH.



*if glomerular filtration rate >30 ml/min

Tratamiento

New Regimens: Drugs in Phase 3

Agent	Mechanism	
STOP Elafibranor	Lipototoxicity/oxidative stress (PPAR α / δ agonist)	GOLDEN-505 (n=276, fibrosis stage 0-3) <ul style="list-style-type: none"> Reversal of NASH without worsening of fibrosis
STOP Cenicriviroc	Inflammation/immune activation (CCR2/5 antagonist)	CENTAUR (n=289, fibrosis stage 1-3) <ul style="list-style-type: none"> Improvement in NAS by ≥ 2 points and ≥ 1-point decrease in lobular inflammation or hepatocellular ballooning without worsening of fibrosis at Year 1
STOP Selonsertib	Apoptosis/necrosis (ASK1 inhibitor)	STELLAR-4 (n=883, compensated cirrhosis) <ul style="list-style-type: none"> Fibrosis improvement ≥ 1 stage without NASH worsening Event-free survival
STOP Aldafermin	FGF-19 Analogue	STELLAR-3 (n=808, fibrosis stage 3) <ul style="list-style-type: none"> Fibrosis improvement ≥ 1 stage without NASH worsening Event-free survival
STOP Pegbiffermin	PEG-FGF-21	Phase 2b n=171, ALPINE 2/3) <ul style="list-style-type: none"> Improvement of fibrosis without worsening NASH
Semaglutide	GLP-1	Phase 2b (N=317) Falcon 2 <ul style="list-style-type: none"> Improvement of fibrosis without worsening NASH
Resmetrom	Lipototoxicity (TR β agonist)	Phase 3 SEMA (n=1200, fibrosis stage 2-3) <ul style="list-style-type: none"> Improvement of fibrosis without worsening NASH Reversal of NASH without worsening of fibrosis
Obeticholic acid	Lipototoxicity/oxidative stress (FXR agonist)	MAESTRO-NASH (n=2000, fibrosis stage 2-3) <ul style="list-style-type: none"> NASH resolution with at least a 2 point improvement in NAS without worsening of fibrosis
Lanifibranor	PPAR agonists	REGENERATE (n=2370, fibrosis stage 1-3) <ul style="list-style-type: none"> Fibrosis improvement ≥ 1 stage without NASH worsening
Aramchol	SCD-1 Modulator	NATIV3 (n=2000, fibrosis stage 2-3) <ul style="list-style-type: none"> Primary composite endpoint of NASH resolution and fibrosis improvement of at least one stage
		ARMOR (n=2000, fibrosis stage 2-3) <ul style="list-style-type: none"> Fibrosis improvement ≥ 1 stage without NASH worsening



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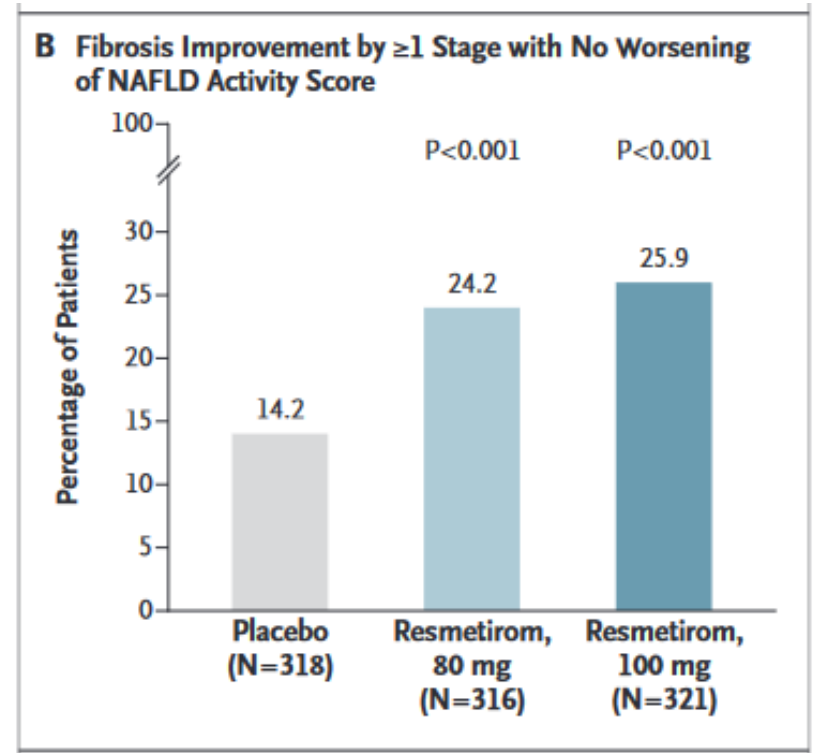
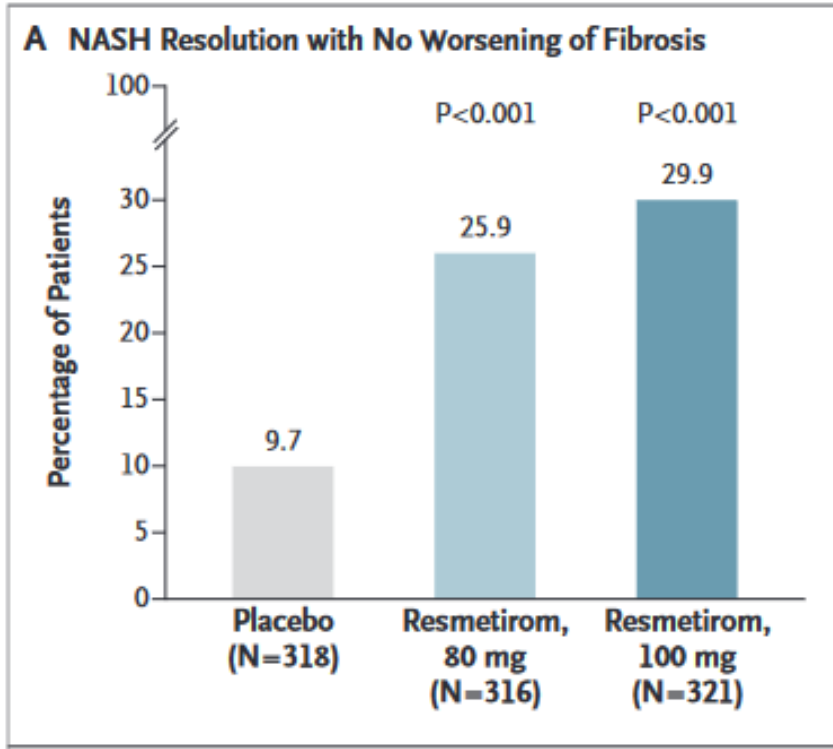
FEBRUARY 8, 2024

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A Phase 3, Randomized, Controlled Trial of Resmetirom
in NASH with Liver Fibrosis

S.A. Harrison, P. Bedossa, C.D. Guy, J.M. Schattenberg, R. Loomba, R. Taub, D. Labriola, S.E. Moussa, G.W. Neff, M.E. Rinella, Q.M. Anstee, M.F. Abdelmalek, Z. Younossi, S.J. Baum, S. Francque, M.R. Charlton, P.N. Newsome, N. Lanthier, I. Schiefke, A. Mangia, J.M. Pericàs, R. Patil, A.J. Sanyal, M. Noureddin, M.B. Bansal, N. Alkhouri, L. Castera, M. Rudraraju, and V. Ratziu, for the MAESTRO-NASH Investigators*

Resultados del estudio



N Engl J Med 2024;390:497-509.

March 28, 2024

Resmetirom, the First Drug Approved by the U.S. FDA for Treating Patients with Nonalcoholic Steatohepatitis

Allan S. Brett, MD

*Approval was based on 12-month liver biopsy
findings.*

¡Gracias!