

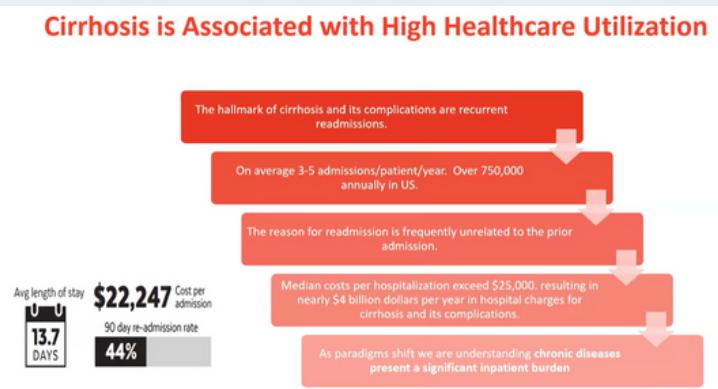
# Optimizing in-patient cirrhosis care: Learn 10 quick tips from the experts

Dr. Mayur Brahmania

## Key Messages

- Early identification of individuals at risk of liver disease can alter the trajectory of illness
- Cirrhosis care is fragmented and complex. 50% of hospitalized patients do not receive the best quality care.
- Chronic liver disease/Cirrhosis is overtaking Chronic Heart Failure (CHF) and chronic obstructive pulmonary disease (COPD) in admissions and mortality due to lack of national strategies
- To create change we need leadership, vision, networks, influencers, and need to tie them into a financial bottom-line the government cares about!
- Population level interventions affecting thousands of patients are needed most. Use of order sets and best practice alerts improves adherence to quality metrics and may decrease hospital length of stay.

## Gaps in Liver Care



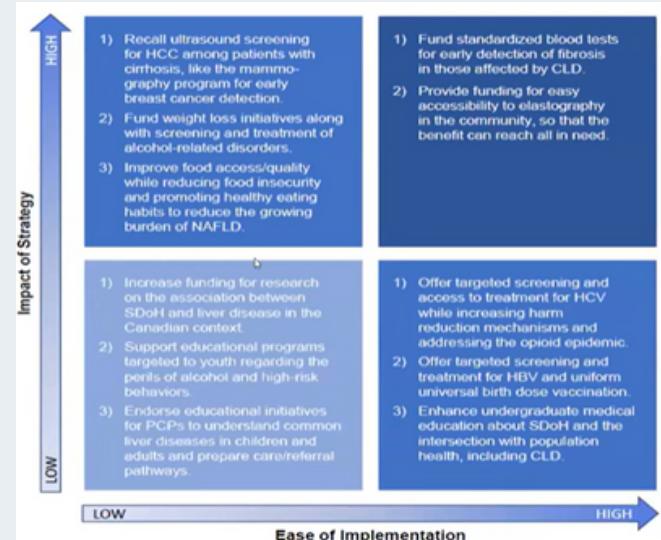
Volk ML, Tocco RS, Bazick J, Rakoski MO, Lok AS. Hospital readmissions among patients with decompensated cirrhosis. *Am J Gastroenterol*. 2012;107(2):247-52. doi: 10.1038/ajg.2011.314.

## Interventions to improve cirrhosis care



Fig. 1. Interventions to improve the delivery of cirrhosis care

Moghe A, Yakovchenko V, Morgan T, McCurdy H, Scott D, Rozenberg-Ben-Dror K, Rogal S. Strategies to improve delivery of cirrhosis care. *Curr Treat Options Gastroenterol*. 2021;19(2):369-79. doi: 10.1007/s11938-021-00345-y



Brahmania M, Biondi MJ, Joshi S, Lee E, Jung HM, Kehar M. Priority actions for elevating liver health in Canada: A call to action. *Can Liver J*. 2023;26(2):283-90. doi: 10.3138/canlivj-2022-0041



Kanwal F, Volk M, Singal A, Angeli P, Talwalkar J. Improving quality of health care for patients with cirrhosis. *Gastroenterology*. 2014;147(6):1204-7. doi: 10.1053/j.gastro.2014.10.029.

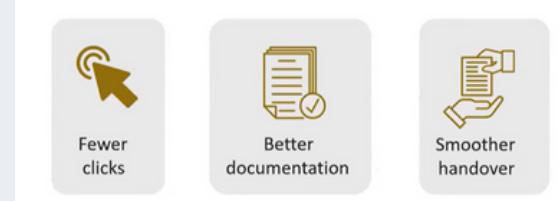
- The Non-Alcoholic Fatty Liver Disease (NAFLD) Primary Care Pathway pathway can be used by primary care providers to identify, risk stratify patients to determine whether referral
- Best practice alerts have been shown to reduce readmission rates, and lengths of stay
- Cirrhosis Order sets can improve outcomes.

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## Cirrhosis Summary Tool

- The Cirrhosis Summary Tool simplifies and **helps standardize care** to help you deliver the best outcomes with less effort while aligning provincial evidence and standards
- The tools were built to **reduce cognitive load, support decision making, and improve care without adding burden**
- One-screen dashboard with access to labs, medications, complications, and trends
- Using the same tools at every visit creates consistency and reduces guesswork.
- The Cirrhosis Summary tool is **embedded in ConnectCare** so the information is shared across the care team.
- You will receive real time alerts to reduce missed care opportunities
- Using the same tools at every visit results in consistency and reduces guesswork
- Find clinical pearls integrated with tools such as alerts, ordering links, and guidance



### A. Hepatic Encephalopathy

**Pearl:** Rifaximin + lactulose reduces recurrence.  
**Tool:** Alerts, ordering links, stool charting, lab trends.

### B. Ascites

**Pearl:** Early paracentesis improves outcomes.  
**Tool:** Order within 12 hours, diuretic guidance.

### C. SBP

**Pearl:** Early antibiotics save lives.  
**Tool:** Alerts for initiation and prophylaxis.

### D. Variceal Bleed

**Pearl:** Early antibiotics and beta blockers.  
**Tool:** Octreotide, prophylaxis prompts.

### E. Alcohol-Associated Hepatitis

**Pearl:** Steroids guided by Maddrey; nutrition is key.  
**Tool:** Lille Score display, steroid guidance.



**Better decisions, faster.**

## Resources and Additional References

- **Cirrhosis Care Alberta** - Provides essential knowledge about liver cirrhosis. Offers expert insights, and support for both patients and care providers
- Tapper EB, Warner MA, Shah RP, Emamallee J, Dunbar NM, Sholzberg M, et al. Management of coagulopathy among patients with cirrhosis undergoing upper endoscopy and paracentesis: Persistent gaps and areas of consensus in a multispecialty Delphi. *Hepatology*. 2024;80(2):488-99. doi:10.1097/HEP.0000000000000856.
- Bhavsar-Burke I, Guardiola JJ, Hamade N, Gerke S, Burke SM, Merrill K, et al. Use of a cirrhosis admission order set improves adherence to quality metrics and may decrease hospital length of stay. *AM J Gastroenterol*. 2023;118(1):114-20. doi:10.14309/ajg.00000000000001930.
- Asrani SK, Hall L, Hagan M, Sharma S, Yeramaneni S, Trotter J, et al. Trends in chronic liver disease-related hospitalizations: A population based study. *Am J Gastroenterol*. 2019;114(1):9-106. doi: 10.1038/s41395-018-0365-4.
- Government of Canada SC. Leading causes of death, total population, by age group [Internet]. 2022 Aug 27. Available from: <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1310039401>

## We need your feedback about the Best Practice Alerts/Cirrhosis Summary Tool!



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Consider using **MyL3Plan**, a free online tool developed by the Office of Lifelong Learning (L3) that can be used to meet and support the 3 activities/action plans required by the PPIP-CPSA and earn up to 36 Mainpro+ certified credits.

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