▼ Alcohol Associated Hepatitis	
Consider US Liver Biopsy (Percutaneous or Transjugular) if patient has MELD greater than 20 or Maddrey's DF greater than or equal to 32 and there is uncertainty about the clinical diagnosis.	
Additional Work Up	
Investigate for infection and other potential etiologies of liver dysfunction. Consider additional investigations as clinically warranted (such as diagnostic paracentesis to rule out infection). Order if not already done.	
Blood Culture Panel - Adult x 2	
Urine Culture, Routine	
Hepatitis B Virus Surface Antigen	
Hepatitis B Surface Antibody	
Hepatitis C Virus Serology	
Anti-Actin / Anti-Smooth Muscle	
Anti-Nuclear Antibody (ANA) panel	
Immunoglobulins (IgG, IgA, and IgM)	
GR Chest 2 Projections	
Routine, Once	
US Abdomen Limited	
Routine, Once	
Once	
IR Liver Biopsy Transjugular	
Once	
Medications	
For alcohol related hepatitis	
Steroids	
Consider if MELD greater than 20 or Maddrey's DF greater than or equal to 32. Before starting steroids perform a septic work-up to exclude, infection and rule out alternate etiologies as a cause for liver dysfunction (including viral and autoimmune hepatitis). Delay steroids in situations including active GI bleeding and active infection.	
If <u>Lille</u> is less than 0.45 at 7 days after starting steroids (responder), continue prednisone or prednisolone for a total of 28 days. If Lille is greater than or equal to 0.45 (non-responder), consider stopping prednisone or prednisolone.	
O predniSONE tablet (\$80) 40 mg, oral, daily, with breakfast, for 7 days	
 prednisoLONE sodium phosphate 1 mg/mL liquid oral (\$2.67) 40 mg, oral, daily, for 7 days 	

© 2021, Alberta Health Services, CKCM

This work is licensed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. The license does not apply to content for which the Alberta Health Services is not the copyright owner. To view a copy of this license, visit http://creativecommons.org/licenses/by-nc-nd/4.0/.