

EP-095 - CRITÉRIOS EXPANDIDOS DE BAVENO VI PARA PREDIÇÃO DE VARIZES – VALIDAÇÃO CENTRO

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Introduction:

According to Baveno VI, patients with chronic liver disease with platelets >150,000 u/L and liver stiffness measured by elastography <20kPa can avoid upper endoscopy for screening varices. These criteria were widely validated presenting high specificity but low sensitivity. Recently, Augustin S et al. proposed expanded Baveno criteria (platelets > 110,000u/L and liver stiffness <25kPa). The aim of this study was to validate Baveno's expanded criteria in our center.

Aims and methods:

Retrospective study of patients with chronic liver disease submitted to elastography in a 3-year period with complete blood count and upper endoscopy within 12 months. Small varices with red wale marks or large varices were considered as high risk varices.

Results:

A total of 104 patients were included; mean age 57 years, 69% male. The etiology of chronic liver disease was hepatitis C in 80%, alcohol in 12%, hepatitis B in 4% and other causes in 5%. The prevalence of varices was 25%.

Baveno's expanded criteria had a sensitivity of 92% and a specificity of 74% for the prediction of esophageal varices (vs 100% and 62% Baveno's classical criteria). If we considered only high-risk varices the sensitivity of expanded criteria was 100% and specificity was 65% (vs 100% and 50% classic criteria).

Conclusion:

The expanded Baveno's criteria present similar sensibility as classic criteria but with higher specificity. In clinical practice, it continues to correctly identify patients with high risk varices but decreases the number of potential screening endoscopies.