

SUMMARY

Prediction of Hepatic Encephalopathy after Transjugular Intrahepatic Portosystemic Shunt

One of the common complications of Transjugular Intrahepatic Portosystemic Shunt (TIPS) is the development of Hepatic Encephalopathy (HE). Several studies attempted to find predictors of HE after TIPS in the past. Unfortunately, many findings were contradicted by other studies. We have completed two studies of HE:

The first study focused on finding predictors of development of overt HE after TIPS. Data of 895 patients' cohort were retrospectively analysed. Patients' age, pre-TIPS portal venous pressure, serum creatinine, aspartate transaminase, albumin, presence of diabetes mellitus and aetiology of portal hypertension were associated with the occurrence of HE after TIPS ($p < 0.01$). The knowledge of the risk factors could be helpful in aftercare planning for patients undergoing TIPS.

The second study looked at HE in detail and studied cognitive changes prospectively. The patients were tested before TIPS, and 1 month and 6 months after TIPS. We used standardised hepatic encephalopathy test, PHES.

The cognitive performance after TIPS worsened in the overall sample, which is consistent with world literature (median PHES score = -9). However, there was a significant subgroup of 8 patients in the sample, who showed a significant improvement of cognitive functioning 1 month after TIPS ($p = 0.005$). This could bring a new direction in the research about HE.