

# Demographics of decompensated cirrhotic patients who present to an urban, tertiary care hospital



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## BACKGROUND

- Decompensated cirrhosis is a common condition encountered at our urban, tertiary care center
- Patients were admitted to either our primary hepatology service (HH), general medicine service with a hepatology consult (MH), or general medicine team without a hepatology consult (GM)

## AIMS

Identify demographic and clinical profiles of patients that presented for decompensated cirrhosis who were admitted to each one of these services

## MATERIALS & METHODS

- Retrospective chart review was conducted on patients that presented to our tertiary care center for decompensated cirrhosis
- Patients admitted to the hospital with a complication of cirrhosis such as hepatic encephalopathy, ascites, gastrointestinal bleeding, hepatorenal syndrome, hepatocellular carcinoma, or spontaneous bacterial peritonitis
- January 1, 2016 and December 31, 2020
- Demographic data, including age, gender, race, ethnicity, and BMI
- We compared patients demographics of each service, i.e., primary hepatology service, general medicine service with a hepatology consult, or general medicine team without a hepatology consult
- Stat statistical software was utilized for statistical analysis

## RESULTS



Figure 1. Inclusion criteria for study.

Table 1. Demographics of decompensated cirrhosis patients admitted to our hospital under the primary Hepatology service, general medicine service with a hepatology consult, and general medicine without a hepatology consult. (p = 0.001).

Variable	Medicine without Hepatology consult	Medicine with Hepatology consult	Primary Hepatology	p-value
N	115	112	122	
Male	57 (49.6%)	66 (58.9%)	76 (62.3%)	0.12
Age, mean (SD)	56.1 (10.4)	59.2 (8.5)	59.1 (10.2)	0.022
Race				0.024
African American/Black	42 (36.5)	42 (37.5%)	27 (22.1%)	
Caucasian/White	27 (23.5)	24 (21.4%)	40 (32.8%)	
Hispanic	37 (32.2%)	40 (35.7%)	36 (29.5%)	
Asian/Pacific Islander	1 (0.9%)	0 (0.0)	3 (2.5%)	
Unknown/Other	8 (7.0%)	6 (5.4%)	16 (13.1%)	
Ethnicity				0.53
Hispanic	39 (33.9%)	39 (34.8%)	36 (29.5%)	
Non-Hispanic	65 (56.5%)	68 (60.7%)	76 (62.3%)	
Unknown	11 (9.6%)	5 (4.5%)	10 (8.2%)	
BMI, median	27.0 (23.1 - 31.4)	26.7 (23.7 - 31.3)	28.1 (24.6 - 32.6)	0.37

## RESULTS

- 349 patients were included in the study
- Majority of our patients were male (49.6%, 58.9%, and 62.3%) with a mean age of 56 to 59 years old
- BMI between the groups ranged between 26.7 (medicine with hepatology consult) to 28.1 (primary hepatology service)
- Patients on each service were mainly non-Hispanic (56.5%, 60.7%, and 62.3%)
- However, when compared against each other, there were differences demonstrated between race on each service
- Primary hepatology service had a higher number of Caucasian/white patients
- General medicine services had a higher number of African American/black patients

## SUMMARY / CONCLUSIONS

- This study found a difference amongst patients' race on the primary hepatology service compared to the general medicine services
- The difference most likely reflects:
  - 1) outside hospital transfers for liver transplant evaluation go to the primary hepatology service where the patient population of these largely suburban and rural centers is not as diverse as Temple's
  - 2) the better establishment of care of white patients at outpatient hepatology clinics, thereby leading to admissions on hepatologist led services which in turn can lead to greater listing of white patients for orthotopic liver transplantation