Liver Cirrhosis Causes and Links to Liver Cancer

by LANA BARHUM

Cirrhosis and Liver Cancer

Liver cirrhosis is a serious condition which causes scar tissue to replace healthy liver tissue.

Sometimes cirrhosis is the result of damage caused by alcoholism or chronic hepatitis infections.

What Is Liver Cirrhosis?

The scarring process of cirrhosis is gradual, but once scar tissue replaces your liver cells, the process is irreversible.

The scarred liver tissue affects the liver's natural structure and also affects its future regrowth. Eventually, liver cells die.

Your liver will eventually lose its ability to function well. Blood flow also becomes obstructed, forcing blood back into the liver, a condition called portal hypertension.

Symptoms

In its early stages, cirrhosis has no symptoms. At least 40 percent of people do not experience symptoms, according to a 2006 report in *American Family Physician*.

Once the liver damage is extensive, you will start to notice symptoms.

Symptoms may include:

- Fatigue
- Loss of appetite, weight loss, and nausea
- Easy bruising or bleeding
- Itchy skin and/or spider-like blood vessels on the skin
- Jaundice (yellow discoloration of eyes and skin)
- Ascites (fluid in the abdomen)
- Testicle shrinkage and/or breast enlargement in men
- Confusion, drowsiness, memory loss, and slurred speech (hepatic encephalopathy)

You should see your doctor as soon as notice any of the symptoms listed above.

Next page: learn about the causes and risks of liver cancer as well as possible treatment methods.

Causes and Risk Factors

In 2015, the number of American adults living with cirrhosis was 633,323, according to researchers from Loyola University Chicago and the University of Michigan Ann Arbor. According to Johns Hopkins Medicine, at least 31,000 people in the United States die from cirrhosis annually.

The leading causes of cirrhosis in the United States are excessive alcohol use, chronic viral hepatitis, and non-alcoholic fatty liver disease.

Liver Cancer

Liver cancer is common in people with liver cirrhosis, according to the National Institute of Diabetes and Digestive and Kidney Disease. In fact, 60 to 80 percent of people with liver cancer have some signs of cirrhosis, according to OncoLink Penn Medicine.

In fact, 60 to 80 percent of people with liver cancer have some signs of cirrhosis, according to OncoLink Penn Medicine.

Liver cancer has low survival rates, with a 5-year survival rate of 31 percent for people whose cancer is confined to the liver and in stage I, II, or III, according to the American Cancer Society. If cancer has spread outside the liver, the survival rate is 3 percent.

Current treatments are only helpful if liver cancer is found early. If you have cirrhosis, your doctor should be checking you every 6 to 12 months for signs of liver cancer.

Excessive Alcohol Use

Your liver cells break down alcohol, but too much alcohol eventually causes damage to cells. The heavier you drink, the higher your risk is for developing alcoholic cirrhosis.

About 10 to 15 percent of those who drink heavily will develop alcoholic cirrhosis, according to the National Institute of Alcohol Abuse and Alcoholism (NIAAA) in the United States.

NIAAA further reports a 90 percent 5-year survival rate with cirrhosis if you stop drinking, compared to 70 percent if you do not stop drinking. If you have late-stage cirrhosis, your survival rate is 65 percent if you quit drinking and 35 percent if you do not.

Chronic Hepatitis

Chronic viral hepatitis includes both hepatitis B and C. The longer a patient has chronic viral hepatitis, the greater their risk is for liver cirrhosis.

Viral hepatitis causes liver inflammation and damage to liver cells. When inflammation and damage are severe enough and progressive, the liver becomes brutally scarred.

The people most at risk for hepatitis B and C are those who share a needle or have unprotected sex with multiple partners and/or with someone who is infected. Some healthcare workers may be exposed to hepatitis C if they handle contaminated blood.

Nonalcoholic Fatty Liver Disease

Nonalcoholic fatty liver disease (NAFLD) occurs in people who do not consume a lot of alcohol. Fat marks it in the liver where liver damage has not occurred.

Obesity and type 2 diabetes are the two leading causes of NAFLD. NAFLD is usually benign and slow developing,

but it increases your risk for heart disease.

NAFLD has the potential to develop into nonalcoholic steatohepatitis (NASH). NASH causes liver inflammation and injury and can lead to scarring of the liver associated with cirrhosis.

Diagnosis and Treatment

Since most people don’t have symptoms early, cirrhosis is usually found with routine blood work. Your doctor may order more laboratory tests and imaging studies if he or she thinks you may have a problem with your liver.

Treatment is aimed at slowing down scar tissue progression of the liver, treating symptoms, and preventing complications. Two important things you can do are to stop drinking alcohol and lose weight.

Once you have cirrhosis, any amount of alcohol is dangerous to the liver. If quitting alcohol is too hard, you should talk to your doctor about a treatment program. If you have cirrhosis caused by nonalcoholic fatty liver disease, you should lose weight, get active, and control blood sugar.

Outlook

The outlook for liver cirrhosis depends on the underlying cause and how early you are diagnosed and treated. If your scarring isn’t too extensive, you can have a healthy life and medications can keep scarring from getting worse or causing complications.

The outlook isn’t good if you have liver damage, especially due to alcoholism and if you do not quit drinking. Cirrhosis can also cause complications, including bleeding, liver failure and severe infections, and an increased risk for liver cancer.

You can minimize your risk for liver cancer and complications by having regular checks and keeping your doctor apprised of how you are feeling or if you experience new symptoms.