NASH-FibroTest for excessive Alcohol

Screening asymptomatic liver fibrosis and cirrhosis

NASH-FibroTest is a liver panel including 3 non-invasive tests: FibroTest, SteatoTest 2 and AshTest

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Diagnose and motivate for alcohol withdrawal

NASH-FibroTest[1-3] in subjects with excessive alcohol intake should help the clinician to:

- Rule out advanced fibrosis in excessive drinkers from primary and secondary healthcare centers [1]
- Better manage patients with severe injuries such as advanced fibrosis and severe ASH, at risk of cirrhosis and liver cancer [4-5]
- Motivate subjects with steatosis only, without fibrosis, to undergo alcohol withdrawal [6-7]
- Detect at-risk subjects with underestimated declared alcohol intake [5,8]

NASH-FibroTest (FibroTest+SteatoTest 2+AshTest)

NASH-FibroTest[1-2] is used in the diagnosis and the follow-up of liver fibrosis, steatosis and inflammation with a blood sample and is done at local laboratory:

- FibroTest: estimates the liver fibrosis and provides prognosis of complications[1,4,10,]
- SteatoTest 2: estimates the liver steatosis [2,3,7]
- AshTest: estimates the severity of alcoholic steatohepatitis [4-5]

Heavy drinkers: diagnosis and prognosis

FibroTest diagnostic [1,10-11] and prognostic [11] performances are similar to liver biopsy.

FibroTest classifies patients into risk groups for long-term complications: [5-11]

- F3 and F4 (cirrhosis) : screen patient for complications,
- F1and F2 : motivate patient to undergo alcohol withdrawal treatment.

AshTest is a quantitative estimate of alcoholic hepatitis in heavy drinkers. It reduces the need for liver biopsy, and therefore enables earlier treatment of alcoholic hepatitis. [4-5]

Better than GGT, AST/ALT ratio, similar to transitent elastography

The combination of FibroTest, SteatoTest 2 and percentage of CDT has the accuracy for identifying patients with excessive undeclared alcohol consumption (≥30 g/day) better than GGT and AST/ALT ratio. [8]

Unlike FIB-4 or APRI, FibroTest does not include AST nor ALT transaminases, avoiding the risk of confounding features of fibrosis and activity. [12]

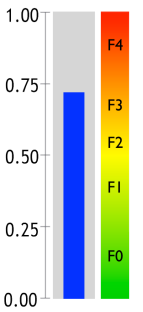
Unlike VCTE**, FibroTest is not biased by steatosis and alcoholic hepatitis [10]

For severe fibrosis, FibroTest has similar performance to ELF*, VCTE$ and 2D-SWE€ [1]

**ELF: enhanced liver fibrosis index; $VCTE: vibration controlled transient elastography; €2D-shearwave elastography*

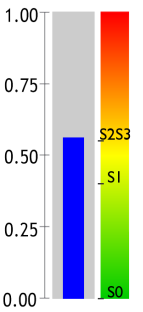
« In high-risk drinkers, we have suggested that fibrosis screening be recommended starting at the age of 40 »

Naveau S et al. Hepatology 2009



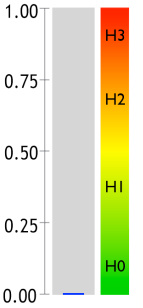
FibroTest estimates liver fibrosis:

- F0: no fibrosis
- F1: minimal fibrosis
- F2: moderate fibrosis
- F3: advanced fibrosis
- F4: severe fibrosis (cirrhosis)



SteatoTest 2 assesses liver steatosis:

- S0 : no steatosis (<5%)
- S1 : mild steatosis (but clinically significant) (5-33%)
- S2S3 : moderate to severe steatosis (clinically significant) (34-100%)



AshTest is the test that assesses inflammation.

- H0 : no alcoholic steatohepatitis
- H1 : moderate alcoholic steatohepatitis
- H2 : significant alcoholic steatohepatitis
- H3 : severe alcoholic steatohepatitis

Assays (done at a local lab.): *Alpha-2 macroglobulin, Haptoglobin, Apolipoprotein A1, Total Bilirubin, GGT, ALT, AST, Cholesterol, Triglycerides, Fasting Glucose, age, sex, weight, height - according to BioPredictive precautions of use (biopredictive.com)*

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