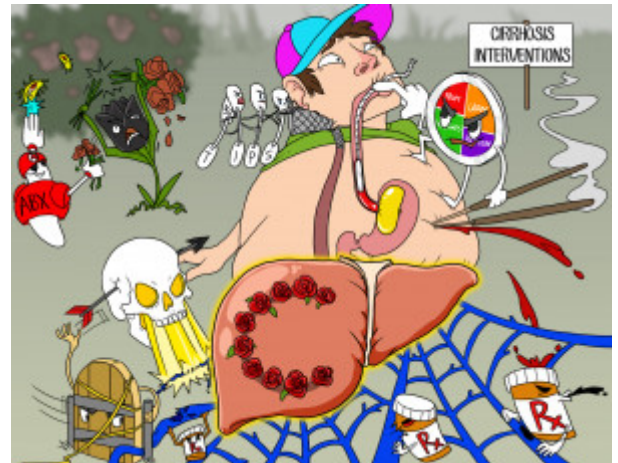


Cirrhosis Interventions

Care of the patient with cirrhosis involves relieving the discomfort from ascites, excess fluid volume, skin changes, nutritional deficiencies and preventing complications associated with hematologic problems, esophageal and gastric varices, and hepatic encephalopathy. Patients should avoid alcohol, NSAIDs, and other medications that impair liver function.



PLAY PICMONIC

Interventions

Maintain Nutrition

Nutritional-plate

Patients with cirrhosis should have a high carbohydrate diet with low fat, as malnutrition is a serious clinical problem they can face. Patients should have a low sodium diet to decrease edema and ascites, and should take B complex vitamins and abstain from alcohol.

Paracentesis

Centesis-incense

Paracentesis, which is a needle puncture into the peritoneum, is used as a diagnostic and therapeutic intervention. It helps remove the ascitic fluid, but this fluid can also be tested for infection.

Esophageal and Gastric Varices

Drug Therapy

Med-bottle

There is no specific drug therapy for cirrhosis, but there are several medications used to treat the various complications of disease. Bleeding varices can be controlled by vasopressin and octreotide, and beta blockers are used to reduce portal venous pressure.

Endoscopic Band Ligation or Sclerotherapy

Line-gate and Skull-arrow-laser

Endoscopic band ligation (endoscopic variceal ligation also called banding) or sclerotherapy may be used to reduce bleeding of varices in patients with cirrhosis. Ligation is done by placing an o-ring around the base of the enlarged vein, and sclerotherapy involves injecting a sclerosing agent into the varix (base of enlarged vein).

Balloon Tamponade

Balloon Tampon

Balloon tamponade mechanically compresses the varices, controlling hemorrhage. This procedure involves two balloons with three lumens, one for the gastric balloon, one for the esophageal and one for gastric aspiration (Sengstaken-Blakemore tube). It is an important safety precaution to label the lumens to avoid confusion during the procedure.

Transjugular Intrahepatic Portosystemic Shunt (TIPS)

Q-TIPS giving Transjugular Shunt

TIPS, or transjugular intrahepatic portosystemic shunt is a nonsurgical procedure that creates a shunt. This shunt connects systemic and portal venous systems, which redirects portal blood flow to reduce venous pressure. This is done by puncturing the wall of the hepatic vein and using a catheter to connect it to the portal vein. This is contraindicated in those with severe hepatic encephalopathy.

Hepatic Encephalopathy

Lactulose

[Black-tulip](#)

Lactulose is used to eliminate ammonia in the blood stream. It does so by acidifying the feces in the bowel, trapping ammonia, allowing it to be eliminated during defecation.

Antibiotics

[ABX-guy](#)

Antibiotics like rifaximin (Xifaxan) work to decrease bacterial flora, which normally would form ammonia in the gut. Removing these bacteria decreases ammonia formation.