## Comunicação Oral

## EP-01 - FIBROSCAN AS A TOOL TO IMPROVE CARDIOVASCULAR DISEASE STRATIFICATION: TRUTH OR MYTH?

Rui Magalhaes<sup>1</sup>; Sofia Xavier<sup>1</sup>; Joana Magalhaes<sup>1</sup>; Carla Marinho<sup>1,2</sup>; José Cotter<sup>1</sup>

1 - Serviço Gastrenterologia, Hospital senhora da Oliveira, Guimarães; 2 - x

Introduction: Non-alcoholic fatty liver disease (NAFLD) is the most common cause of chronic liver disease worldwide. Transient elastography (TE, Fibroscan) with controlled attenuation parameter (CAP) has been proven as an accurate measure of hepatic fibrosis and steatosis. Its role stratifying cardiovascular (CV) risk is unknown.

Methods: Cohort, retrospective, single center study, including consecutive NAFLD patients that underwent Fibroscan. Patients were followed at least a year.

Correlation towards outcome variable (Cardiovascular event) was assessed with univariate and multivariate analysis, using SPSS – p value <0.05 was considered statistically significant.

Results: We assessed 96 patients with NAFLD, 64 (66,7%) were female, all Caucasian, with a mean age of 51,6. Metabolic syndrome was found in 55.2%.

Several variables had statistical significance towards cardiovascular events incidence on the univariate analysis. (Cardiac failure; Hypertension; dyslipidemia, diabetes mellitus, metabolic syndrome, body mass index, CAP higher 290 db/m, Framigham score, hypocoagulation agents, antiplatelet agents, statins, antihypertension agents.)

We report 14 (14,4%) cardiovascular events during follow up. CAP mean in this subgroup was 318,4 db/m.

For CAP values superior to 290 db/m, the odd of incidence of cardiovascular events were 4,2 times higher, for each unit of cap increase (Odds ratio crude 4,250; p value 0.05). Adjusting the regression multivariate model with previous significant variables, the association trend to statistically non-significance.

Framingham score was not correlated statistically with CAP values.

Conclusion: We stablish a correlation between CAP and incidence of cardiovascular disease events. A CAP increase is associated with increase of incidence on CV events, mainly for high cap values, over 290 db/m. This correlation is diluted adjusting to another CV risk predictor covariables. Fibroscan is a safe and cost-effective method to evaluate NAFLD. CAP values are related to CV events, nevertheless, further studies are needed to identify properly the subpopulation that would most benefit from this feature.