

老醫之家系列 *Old Doc's Home -- Dr. Wu's Series*

Dr. Wu's Liver Diseases (Hepatitis,...)

PBL for the diagnosis of Liver Disease

*Dr. Wu's Liver diseases
for professionals (medical students and residents)*

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PBL for the diagnosis of Liver Disease

- **What is PBL and PBeL ?**

- Traditional medical education --- Lectures in the classroom by a teacher.
- Integration of basic and clinical medical knowledge.
- Problem-based or Practice-based Learning (e: electronic).
- Best method of learning medical knowledge technique and in bedside teaching.
- Problem of the patient's physical condition (character, mechanism, etiology, diagnosis, treatment)
- Small group teaching and an instructor.
- Search and study of resources for solving problems from journals, references, and Internet contents by students themselves.

- **What is a liver ?**

- Liver is the **largest** and the **most complex** organ in the body, located in the right upper part of the abdomen, and it is usually not palpable from the abdominal wall.

- Under the liver, there is a **gall bladder**, the liver and gallbladder are connected by ducts known as the **biliary tract**.
- Refer to:
 - [Structure and physiology of the liver](#)
- **What is a liver disease?**
 - Most of the liver disease is a condition in which the **normal structure and physiological function** of the liver is damaged.
 - The other two conditions are **congenital** and **new growth** of the liver.
 - And the most of the **new growths** of the liver are **derived from the damages** of the liver.
 - Refer to:
 - [How to approach a liver patient](#)
 - [Classification of liver diseases](#)
 - [Common liver diseases in Taiwan](#)
- **What is the main symptoms and signs of the liver disease ?**
 - Jaundice (sclera, skin).
 - Pruritus.
 - Hepatomegaly.
 - Flu-like symptoms, headache, muscle pain, fever.
 - Malaise, fatigue, weakness.
 - Nausea, vomiting.
 - Fever.
 - RUQ Pain.
 - Deep discoloration of urine.
 - Clay color stool.
 - [Portal hypertension](#) (splenomegaly, esophageal varices, ascites, edema of the lower legs)
 - Spider angiomata (nevi), palmer erythema, engorgement of superficial veins of the

abdomen and thorax, gynecomastia.

- **Bleeding tendency (Purpura: ecchymosis, petechiae, suggilation)**
- **Hemopoiesis: anemia, leukopenia, throbocytopenia**
- **Encephalopathy (drowsiness, tremor, asterixis, dysarthrias, delirium, coma)**
- **No any symptoms and signs.**
- **Refer to:**
 - [Clinical features of acute viral hepatitis:](#)
 - [Clinical features of chronic hepatitis:](#)

- **Laboratory data of liver diseases**

- **Transaminase (ALT -- GPT, AST -- GOT).**
- **Bilirubin.**
- **Biliary enzymes (Al-P, GGTP).**
- **Albumin.**
- **Globulin.**
- **Ammonia.**
- **Amylase.**
- **Ceruloplasmin, serum copper, urine copper**
- **Serum ferritin, transferrin saturation, iron**
- **Alpha-1-antitrypsin**
- **Hepatitis marker (anti-HAV, HBsAg, anti-HBs, anti-HBc, HBeAg, anti-HBe, anti-HCV, anti-HEV).**
- **Tumor marker (AFP, AFP-L3, CEA, Isoenzymes, PIVKA-II, CA19-9)**
- **PIIP, IV Collagen, TGF-£]**
- **Refer to:**
 - [Introduction to liver test](#)
 - [Item of liver test](#)

- [Implication of liver test](#)
- [Liver-cell function test](#)
- [Bilirubin metabolism](#)

- **Image diagnosis of liver diseases**

- Simple X-ray film
- Ultrasonography
- Endoscopic ultrasonography
- CT
- Angiography
- MRI

- **How to proceed the diagnosis of liver diseases**

- SOAP (Subjective, Objective, Analysis, Planning)
- PBL (Problem based learning), PBeL (Problem based e-learning)

- **Neighboring organs of the liver**

- Lung, diaphragm, gall bladder, bile duct, duodenum, stomach, pancreas and transverse colon.
- Pain and tumor.



Practical application

- **SOAP = PBL**
- **Basic data:**
 - Name, age, sex
 - Residence history:
 - past, present, and duration.
 - Travelling.
 - What is the endemic diseases of the indwelling or travel place. (i.e: HAV, HEV,

Dengue fever, Schistosomiasis)

- Past history: (alcoholics, drug intake, IVDA, infection)
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Case 1:Da-Ming Yang. 72 yrs old, male

- S: (subjective)Chief complaint:
 - Fever, epigastralgia, vomiting, jaundice for 3 days.
 - Residence and travelling
 - Living in Taipei city for 50 yrs.
 - Came from mainland China at the age of 22.
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◦ Analysis

- Epigastralgia:position neighboring organ:
- Nausea, vomiting:G-I tract dis.,acute & chronic hepatitis, biliary tract dis., pancreatitis, and other diseases.
- Jaundice: Bilirubin
 - Liver: infection, cirrhosis, neoplasm.
 - biliary tract: stone, infection, neoplasm.
 - Hemolysis.
- Fever:
 - Infections: Bacteria, Rickettsia, Chlamydiae, Mycoplasma, Virus, Parasite,
 - Refer to:
 - Virus -- liver damage
 - Viral hepatitis -- History
 1. Viral hepatitis A

2. [Viral hepatitis B](#)
 3. [Viral hepatitis C](#)
 4. [Viral hepatitis D](#)
 5. [Viral hepatitis E](#)
 6. [Viral hepatitis F and G](#)
 7. [TTV](#)
 - [Definition of chronic hepatitis](#)
 - [History of chronic hepatitis](#)
 - Malignant neoplastic disease:
 - Hematologic disease:
 - CNS diseases:
 - Factitious :
 - Diseases of other systems:
 - **Residence history in China:** [Kala azar \(Leishmaniasis\), Schistosomiasis, Clonorchiasis \(intake of raw fresh water fish\)](#)
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- **Past history**

- [Alcohol intake for more than 30 yrs. \(chronic alcoholics\).](#)
 - [History of jaundice 5 yrs. ago, but no further study at that time.](#)
 - [Occasional eigastralgia.](#)
 - [No history of any drug intake \(Drug-induced liver disease\)](#)
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- **Analysis**

- **Liver disease: (alcoholic, infection)**
- **Biliary tract disease:**

- **Pancreatitis:**
 - **(G-I tract)**
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- **Physical examination**

- **Skin:** slightly icteric.
- **Sclera:** mod. icteric.
- **Spider angioma on upper chest.**
- **Hepatomegaly** (3 cm below right costal margin)
 - Margin: dull
 - Consistency: firm.
 - Surface: irregular, no mass.
- **Portal hypertension:**
 - **Ascites:**
 - Abdomen: slight frog belly.
 - Superficial venous engorgement on abdominal wall.
 - Shifting dullness (+).
 - **Splenomegaly:** (3 cm below left costal margin)
 - **Lower leg pitting edema (+).**

- **Analysis**

- **Chronic liver disease (chronic hepatitis, cirrhosis, HCC) -- (alcoholic, viral)**
 - **Chronic biliary tract diseases (stone, PBC)**
 - **Pancreatitis (alcoholic)**
 - **(G-I tract disease)**
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- **Laboratory data:**

- RBC: 334×10^4
- WBC: 8,200
- Platelet: 70,000
- Bilirubin: Direct: 3.2, Total: 4.6
- AIP: 112 U; GGTP: 340 U.
- ALT: 62 IU; AST: 176 IU.
- Amylase: 310
- HBsAg (+), anti-HBc (+), anti-HBs (-), anti-HCV (-), HBeAg (+) ([HBV](#))
- AFP: 5.3 ng. ([Hepatitis virus and hepatocellular carcinoma.](#))

- **Image & endoscopic study:**

- Abdominal echo: [Fatty liver](#)
 - Panendoscopy of upper G-I tract: [Esophageal varices.](#)
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- **Analysis**

- Portal hypertension
 - Chronic liver disease (cirrhosis)
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- **Final Diagnosis:**

- [Cirrhosis of the liver](#) : Etiology ([HBV](#) and [Alcoholic](#))
 - [Acute alcoholic hepatitis](#)
 - [Chronic relapsing pancreatitis.](#)
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[\[Curriculum Vitae \]](#)



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