Experience of Using Elastography in the Diagnosis of Liver Fibrosis in the Practice of Hepatology Center

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Abstract

We examined 24 patients aged from 22 to 70 with liver cirrhosis of different etiology. All patients were performed with complex abdominal ultrasound, Doppler ultrasound of the portal system and elastography. All information is compared with puncture biopsy of the liver in 100 % cases. In applying to the method of liver elastography average shear wave velocity was 2,9 ± 0,5 m/s or 24,4 ± 6,2 kPa. According to elastography the liver fibrosis F3 Metavir classification diagnosed in the 1st (4,2 %) patient, F3-F4 — in 6 (25 %), F4 — in 14 (70,8 %). After a liver biopsy in all patients has been diagnosed liver cirrhosis, which corresponded stage F4 liver fibrosis. Divergence diagnostic stage fibrotic process in liver biopsy and elastography data recorded in one case, which was 4,2 %. In 95,8 % there has been a complete coincidence of liver fibrosis by Metavir. Elastography can improve the early non-invasive diagnosis of liver fibrosis and cirrhosis and confirm the diagnosis without performing a biopsy of the liver.

Key words: Elastography of the Liver, Liver Fibrosis, Liver Cirrhosis, Liver Biopsy.

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