

Patient information from BMJ

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Cirrhosis: what treatments work?

Cirrhosis is scarring of your liver caused by long-term liver damage. This scarring affects how well your liver works. There is no cure for cirrhosis but treatments can help to stop more damage. Some people's liver damage is so severe that they need a liver transplant.

What treatments work?

Cirrhosis can't be cured. But if you have cirrhosis there are three main ways to try to keep your liver as healthy as possible:

- Treating the condition that has caused the liver damage (liver damage is usually caused by another condition: for example, hepatitis).
- Preventing further damage to your liver, for example from alcohol or some medicines.
- Preventing complications of cirrhosis that can cause serious health problems.

Treating the condition that has caused your liver damage

Many conditions can cause liver damage that can lead to cirrhosis. They include:

- Hepatitis B and C
- Alcoholic liver disease
- A condition called metabolic dysfunction-associated steatotic liver disease (MASLD) or non-alcoholic fatty liver disease (NAFLD)

Less common that may cause liver damage conditions include inherited conditions such as:

- Haemochromatosis, where your body absorbs too much iron from the food you eat
- Wilson's disease, a condition where too much copper builds up in the body including the liver. This causes liver damage
- Cystic fibrosis, which may damage the lungs and other organs including the liver.

These conditions are treated in different ways. The important thing is that getting the right treatment can reduce any further damage to your liver.

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Preventing further damage to your liver

It's important to try to avoid things that can damage your liver. Things that can help include:

- Not drinking alcohol. This is vital. People with cirrhosis should not drink alcohol at all. Even if your liver damage was not caused by alcohol, drinking alcohol when your liver is already damaged can make the problem much worse. If you have a problem with stopping drinking, talk to your doctor
- Avoiding medicines that can cause liver damage. These include non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen. You should also try to avoid taking paracetamol too often, and never take more than the dose recommended by your doctor. This will be less than the usual maximum daily dose
- Keeping to a healthy weight
- Eating a healthy, balanced diet. Because your liver is essential for storing and releasing energy and nutrients your body needs, it is important for people with cirrhosis to eat well to stay healthy
- Taking regular exercise.

You should also make sure you are vaccinated against hepatitis A and B if you are at high risk of infection. There is currently no vaccination for hepatitis C. You are at high risk of hepatitis if you:

- Inject recreational drugs
- Change sexual partners often
- Are a man who has sex with men
- Have close family members or a partner with hepatitis
- Travel to countries where hepatitis is common
- Are a healthcare worker.

Preventing complications

Cirrhosis can cause serious complications, so you will need to have some tests every 6 to 12 months. These tests can show if your cirrhosis has caused any complications. Your doctor will then be able to advise you about any extra treatment you might need.

These tests may include blood tests, scans, and an **endoscopy**. This is when a small camera is passed down your throat on a thin tube.

This test can spot blood vessels in your oesophagus (food pipe), which have become too wide and can sometimes bleed. These widened blood vessels are called **varices**. This problem is usually treated with medicines called beta blockers. Bleeding from these varices is sometimes treated while you are having an endoscopy, by tying up the blood vessels or sealing them with a special injection to make the blood clot.

Other complications of cirrhosis can include:

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Fluid collecting in your abdomen. This build-up of fluid is called **ascites**. This can be treated by reducing your salt intake, and with medicines called diuretics, which help stop your body from holding on to too much fluid. Sometimes ascites needs to be treated with a procedure to drain the fluid from your abdomen. This procedure is called **paracentesis**.

Infections. If you have ascites the fluid can become infected. This is called **bacterial peritonitis**. If this happens you will need treatment with antibiotics. You will also need to take antibiotics for the rest of your life to stop the problem returning.

Liver cancer. People with cirrhosis have an increased chance of getting liver cancer. Regular scans can help to detect the problem early. The earlier cancer is detected the easier it is to treat.

Toxins collecting in the brain. This is called **encephalopathy**. It happens when the liver is not clearing toxins from your blood properly. It can cause changes in your behaviour and personality. Symptoms may include drowsiness, forgetfulness and confusion, as well as slurring of your speech. It can be treated with medicines, including lactulose and antibiotics. Any underlying causes that may be triggering the build-up of toxins should also be treated.

Liver transplant

If you have serious complications, or if your liver is failing, your doctor might refer you to a specialist who might recommend that you have a liver transplant.

This is a major operation. The surgeon removes your damaged liver and replaces it with a healthy one from a donor. There are many risks involved. And you would need to take medicine for the rest of your life. And if you were put on the waiting list you may have to wait a long time for a replacement liver, because there are usually more people who need livers than there are livers available.

This sometimes means that people die while waiting for a suitable liver.

Palliative care

As cirrhosis cannot be cured, you may be referred to a palliative care team. They can help you manage some of your symptoms including pain and mental health problems, to try and keep you more comfortable.

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