



FREE Liver Disease Screening Program

Think Liver Think Life is American Liver Foundation's national public health campaign which aims to ensure every American understands their risk for liver disease. Fatty liver disease affects an estimated 80-100 million Americans. Two of the most common risk factors for fatty liver disease are diabetes and obesity.

ALF is looking for new partner clinics throughout the country that serve those at greatest risk for liver disease. Patients at clinics will receive **FREE** blood based liver screenings, a **FREE** premium membership to MyFitnessPal, and individualized follow-up assistance.

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Think Liver
Think Life 

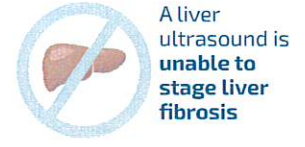
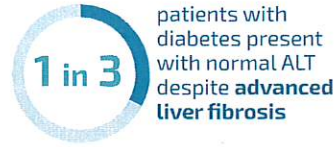
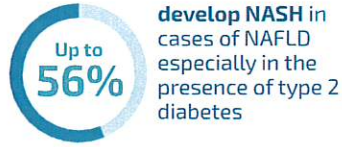
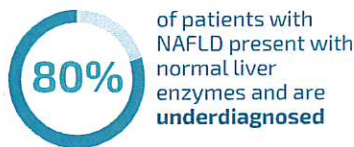
The "Think Life" logo features the words "Think Liver" in a smaller, italicized font above the words "Think Life" in a larger, bold font. To the right of the text is a stylized silhouette of a person in a dynamic, athletic pose, similar to the one in the American Liver Foundation logo.

LIVERSTAT

A Clinical Aid for Steatotic Liver Disease* (SLD) and Liver Fibrosis

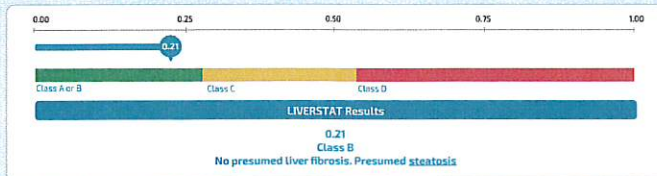
*formerly called NAFLD (Non-alcoholic fatty liver disease)

LIVERSTAT as first-line clinical aid for advanced fibrosis and steatosis risk assessment in patients with metabolic syndrome (MetS).



What is LIVERSTAT?

LIVERSTAT is a blood-based test utilizing 7 biomarkers from patient's blood draw and their anthropometrics to generate a quantitative fibrosis assessment and to determine the presence of steatosis only in those subjects without fibrosis.



7 Blood Biomarkers: Triglycerides, Total Cholesterol, Total Bilirubin, Fasting Glucose, AST, ALT, GGT

4 Anthropometrics: Age (Date of Birth), Weight, Height, Gender

Managing SLD (NAFLD) risk with LIVERSTAT

- Order LIVERSTAT for all MetS patients as first-line clinical aid
- Receive LIVERSTAT report for:
 - Class A** - No presumed liver fibrosis. No presumed steatosis
 - Class B** - No presumed liver fibrosis. Presumed steatosis
 - Class C** - Presumed liver fibrosis, mild or moderate
 - Class D** - Presumed liver fibrosis, advanced (severe)
- Determine the best patient management plan:
 - Intensive lifestyle change
 - MetS correction
 - Referral to liver specialist
 - Monitor progression with LIVERFAST*

*LIVERFAST™ is a clinical aid for staging and monitoring of liver damage related to NAFLD, NASH, chronic viral hepatitis B and C and for prognostication of liver related outcomes in NAFLD and NASH.

High risk conditions for SLD and Metabolic Dysfunction-Associated Steatohepatitis* (MASH)



*formerly called NASH (Non-alcoholic Steatohepatitis)

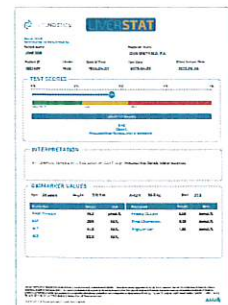
- High performance for severe fibrosis detection

AUROC (95% CI) for bridging fibrosis (F3F4)

	Training cohort N=270	Validation cohort N=310
LIVERSTAT	0.806 (0.737 - 0.841)	0.759 (0.701 - 0.808)
FIB-4	0.807 (0.630 - 0.756)	0.757 (0.698 - 0.805)
P value	NS	NS

Compared to FIB-4, LIVERSTAT has several advantages:

- Provides grading of steatotic liver disease from simple steatosis to advanced fibrosis
- No grey zone
- Analytically calibrated
- No drawbacks related to age, gender, ethnicity or diabetes



References:

- Alkhourri N. J Hepatol. 2023 (Suppl)
- De Ledinghen V. J Hepatol. 2023 (Suppl)
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- De Ledinghen V. Dig Liver Dis 2012
- Chalassani N. Hepatology 2018
- Rinella M. Hepatology 2023 AASLD Practice Guidance on the Clinical Assessment and Management of Nonalcoholic Fatty Liver Disease
- Sandulescu O. Hepatology 2022 (Suppl)
- European Association for the Study of the Liver (EASL). "EASL-EASD-EASO Clinical Practice Guidelines for the management of non-alcoholic fatty liver disease."
- DeWeerd S. "Disease progression: Divergent paths." Nature. 2017
- Rinella M. Hepatology 2023 A multi-society Delphi consensus statement on new fatty liver disease nomenclature.

Abbreviations

- AI Artificial Intelligence
- ALT Alanine Aminotransferase
- AST Aspartate Aminotransferase
- GGT Gamma-Glutamyl Transpeptidase
- MetS Metabolic Syndrome
- OSA Obstructive Sleep Apnea
- PCOS Polycystic Ovary Syndrome
- NAFL Non-alcoholic Fatty Liver
- NAFLD Non-alcoholic Fatty Liver Disease
- NASH Non-alcoholic Steatohepatitis
- MASH Metabolic Dysfunction-associated Steatohepatitis
- SLD Steatotic Liver Disease

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The Silent Liver Diseases You Need to Know About: NAFLD and NASH

We are on the onset of an epidemic of NAFLD and NASH. Never heard of NAFLD or NASH? You aren't alone and that's part of the problem. Potentially affecting the livers of

MORE THAN 100 MILLION AMERICANS, NAFLD and it's more severe form, NASH can lead to cirrhosis of the liver and liver cancer is not caught early. The good news is that NAFLD is reversible if caught in the early stages.

Get the facts so you can prevent these diseases.



NORMAL LIVER



NAFLD



NASH



CIRRHOSIS

WHAT IS IT?

NON-ALCOHOLIC FATTY LIVER DISEASE is the accumulation of significant amounts of excess fat in the liver, which is not caused by alcohol

FATTY LIVER: Liver becomes inflamed and 5% - 10% of liver's weight is fat

It is more common among

PEOPLE WHO ARE:

- overweight
- diabetic
- high cholesterol or triglycerides

SYMPTOMS

Typically there are **no symptoms of NAFLD**. If they appear, symptoms include fatigue, weakness, weight loss, limited appetite, nausea, abdominal pain, jaundice, swelling in the legs and abdomen, and mental confusion?

DIAGNOSIS

The blood tests that catch NAFLD in the early stages are not standard. If you have certain risk factors, ask your doctor to perform a liver function test.

MANAGING NAFLD

There is currently no treatment for NAFLD. You can reverse or slow the progression by following these healthy steps:

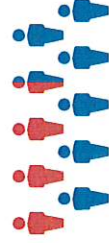
- Consume 800 units of Vitamin E daily
- Eliminate alcohol
- Weight loss diet, with low carbohydrates
- If diabetic, tight control of the glucose level
- Regular aerobic exercise of at least 50 minutes three times per week
- Lose 7-10% of body weight

NAFLD AT A GLANCE



NAFLD is one of the **MOST COMMON CAUSES** of liver disease in the U.S.³

BETWEEN 30 AND 40 PERCENT of adults in the U.S. have NAFLD³



WHAT IS IT?

When NAFLD becomes severe it progresses to a condition called non-alcoholic steatohepatitis (NASH), cause by the swelling of the liver leading to liver damage.

RISK FACTORS

- Obesity or overweight
- High triglycerides
- Diabetes
- People between the ages of 40 and 60 years of age²
- High cholesterol
- More common in women than men

NASH AT A GLANCE

#1

By 2030, NASH will be the **most frequent reason for liver transplants** in the United States.¹

NASH affects between **2 - 5%** of Americans⁴ which equals between **6.5 - 16.3 million** people.



Experts estimate that **ABOUT 20%** of people with NAFLD have NASH³



UP TO 25% of adults with NASH may have cirrhosis²

References:
¹World Journal of Gastroenterology, "Liver transplantation for nonalcoholic fatty liver disease: New challenges and new opportunities," May 14, 2014. Accessed on August 8, 2017. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4017047/>
²American Liver Foundation, "NASH," Dec. 2016. Retrieved from: <http://www.liverfoundation.org/about/liver/factsheet/>

³National Institutes of Diabetes and Digestive and Kidney Diseases, "Definition & Facts of NAFLD & MASLD," Nov. 2017. Retrieved from: <https://www.niddk.nih.gov/health-information/liver-diseases/nonalcoholic-fatty-liver-disease>. Accessed on June 8, 2017.
⁴National Institutes of Diabetes and Digestive and Kidney Diseases, "Nonalcoholic Steatohepatitis," Nov. 2006. Retrieved from: <http://www.niddk.nih.gov/health-information/liver-diseases/nonalcoholic-steatohepatitis>

To learn more about NAFLD, NASH and other liver diseases, visit LiverFoundation.org or call **1-800-GO-LIVER**.

