

# Facts about Delivery Falopathy (HE)

The Liver Association, in collaboration with the European Liver Patients Association (ELPA), is conducting an information campaign on delivery phalopathy: "Time to DeLiver". Hepatic encephalopathy also called hepatic encephalopathy (HE) is a serious complication of liver cirrhosis. The purpose is to raise awareness and improve the standard of care for HE. This information sheet describes the personal and societal burden that HE is, as well as the obstacles that may be to achieving better quality of life for people with HE. Finally, the post contains a call for action in the field.

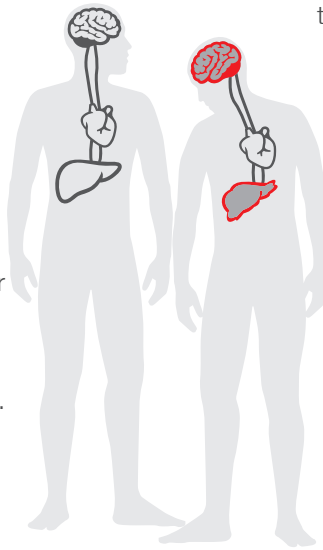
## The consequences of HE

*Liver cirrhosis* is severe chronic liver disease that has caused irreversible organ damage. The condition causes impaired liver function and can become so severe that it results in liver failure. It is estimated that 9,500 Danes live with severe chronic liver disease<sup>1</sup>.

### HE is a serious complication in liver cirrhosis

HE is a potentially life-threatening brain disorder that occurs when the liver is no longer able to purify the blood of toxins. The symptoms of HE episodes range from mild to very severe. In severe cases, the disorder can lead to coma and can eventually lead to death. 3,800 Danes are estimated to live with HE<sup>1</sup>.

HE is associated with poor health<sup>7-8</sup>, both physical and psychological consequences<sup>9-15</sup>, frequent admissions<sup>16-19</sup> and high sygehusomkostninger<sup>17,18</sup>.



Among people with liver cirrhosis who develop HE, the mortality rate is twice as high as in patients with liver cirrhosis without HE - measured over the same time period<sup>3</sup>. The more episodes with HE the patient is exposed to the greater the deterioration of the cognitive functions<sup>11</sup>. Patients with HE are also more likely to be admitted<sup>19</sup>, which entails considerable financial expenses for the Danish healthcare system. Evidence-based medicine offers the opportunity to prevent recurring HE episodes and thereby reduce the costs of hospitalization<sup>5</sup>. There have been national guidelines for managing HE since 2014<sup>23</sup>, but there is room for improvement in this area. Patients with HE face a number of obstacles to getting the best possible care, including stigma, delayed or incorrect diagnosis, and inadequate implementation of the national guidelines.

## HE in numbers

