

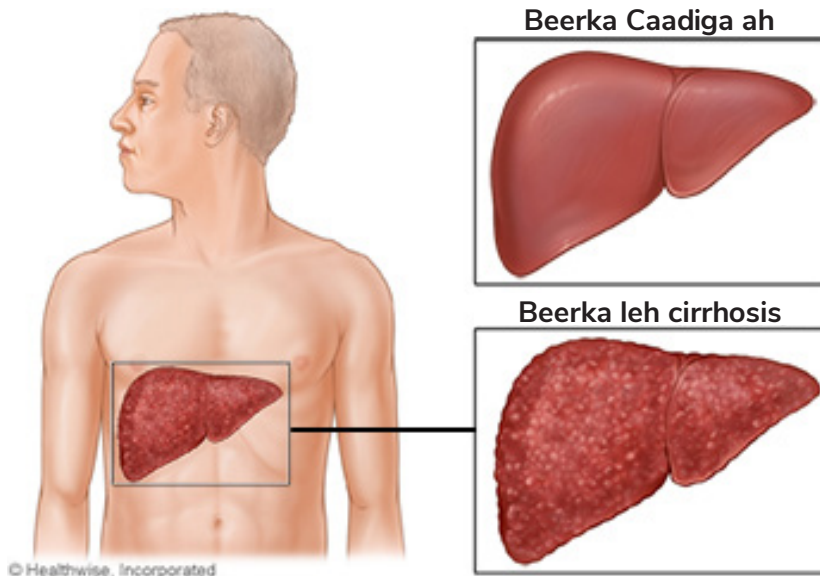
# Fahamka Cirrhosis (Xanuunka) ee Beerka



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Marka uu jiro cirrhosis, beerka ayaa dhaawacma oo nabra noqda muddo ka dib. Unugyada nabartu waxay xannibaan qulqulka dhiigga ee beerka. Xannibaadani waxay keentaa in beerka uu ka gaabiyo jebinta walxaha cuntada, hormoonnada, daawooyinka, iyo waxyaalaha qashinka ah ee jidhka ku jira. Waxa kale oo ay hoos u dhigtaa awoodda beerka ee samaynta borotiinnada iyo walxaha kale.



## Calaamadaha cirrhosis

Waxaa laga yaabaa inaad lahayn calaamadaha cirrhosis ilaa beerkaagu si xun u dhaawacmo.

Calaamadaha hore ee cirrhosis waxaa ka mid noqon kara:

- Dareen daal ama daciifnimo
- Cunto xumo
- Miisaanka oo luma adiga oo aan isku dayin
- Lallabo iyo matag
- Xanuun yar ama nafis la'aan dhinaca midig ee sare ee calooshaada

Marka shaqada beerkaagu sii xumaato, waxaa laga yaabaa inaad yeelato astaamo kale, oo ay ka mid yihiin:

- Nabar iyo dhiigbax si fudud ah
- Jahwareer, dhibaatooyinka fikirka, lumista xusuusta, isbedel shakhsiyeed, ama hurdo la'aan
- Bararka lugahaaga hoose, anqawiyada, ama cagahaaga, oo loo yaqaan cagabarar
- Dibbiro ka yimaada dheecaanka calooshaada ku urura, oo loo yaqaan ascites
- Maqaar cuncun daran
- Madawga midabka kaadidaada
- Midab huruud ah oo leh caddaanka indhahaaga iyo maqaarkaaga, oo loo yaqaan cagaarshow

## Sababaha keena cirrhosis

Cuduradaan iyo xaaladahan waxay dhaawici karaan beerka, taasoo keenta cirrhosis.

### Sababaha Ugu badan

- Isticmaalka khamriga
- Cudurka beerka dufanka leh ee aan khamriga lahayn (Nonalcoholic fatty liver disease, NAFLD), waa xaalad uu baruurku ku ururo beerka
- Cagaarshowga C ee raaga, caabuqa fayras oo sababa caabuqa beerka iyo dhaawaca
- Cagaarshowga B raaga, caabuq fayras ah oo sababa caabuqa beerka iyo dhaawaca

### Sababaha Yaryar

- Cagaarshowga difaac-jirka, waa cudur joogto ah kaas oo habka difaaca jirku uu weeraro beerka, taasoo keenta barar iyo dhaawac beerka
- Cudurada wax yeeleeya, baabi'iya, ama xannibaya xuubka xameetida (tubooyinka ka qaada xaniinyaha beerka ilaa xameetida iyo xiidmaha yar), sida biliary cholangitis (primary biliary cholangitis, PBC) iyo Sclerosing cholangitis (primary sclerosing cholangitis, PSC)
- Cudurada beerka laga dhaxlo ee saameeya sida beerku u shaqeeyo, sida:
  - dhiso Cudurka Wilson, waa cillad uu jirku ku naxaas aad u badan
  - Hemochromatosis, waa cillad uu jidhku ku dhiso bir aad u badan
  - Yaraanta Alfa-1 antitrypsin (AAT), xaalad kor u qaadaysa khatartaada cudurada sambabada iyo beerka
- Isticmaalka muddada dheer ee daawooyinka qaarkood
- Wadne-gabka joogtada ah oo leh beerka oo ciriiriya, xaalad meesha qulqulka dhiigga ee beerka uu yaraado

## Tijaabada cirrhosis

Kala hadal dhakhtarkaaga calaamadahaaga inta lagu jiro baaritaanka jireed. Bixiyahaagu waxa laga yaabaa inuu kugula taliyo 1 ama in ka badan oo tijaabooyinkan ah:

- **Baaritaannada dhiigga** si loo hubiyo sida beerkaagu u shaqeeyo.
- **Sawirka CT-ga caloosha (computerized tomography)**. si loo hubiyo beerka. Baadhitaankani wuxuu u oggolaanayaa bixiyahaaga inuu arko sawirada jeexjeexyada dhuuban ee xubnaha calooshaada.
- **Sawirida Ifinta Bir-labka (Magnetic resonance imaging, MRI)** kaas oo isticmaala mowjadaha raadiyaha ee goobta birlabka si loo hubiyo lafaha iyo unugyada jilicsan, sida beerka.
- **Ultrasound** ee beerka oo isticmaala mowjadaha dhawaaqa si ay u abuuraan sawiro beerka si loo eego sida wanaagsan ee beerku u shaqeeyo.
- **Ka-soo-baxa beerka** halkaasoo irbad maqaarka laga mariyo si muunad looga qaado unugyada beerka si loo hubiyo shaqada beerka.

## Dhibicda MELD 3.0

Dhibicda MELD 3.0 (Sawirka Marxalada Dambe ee Cudurka Beerka) waa qalab waxtar u leh adiga iyo kooxdaada daryeelka caafimaadka labadaba. Waa miisaan nambaraysan oo qiyaasaya sida wanaagsan ee beerkaagu u shaqeeyo. Iyadoo cirrhosis jirto, shaqada beerku si joogto ah ayey isu beddeli kartaa, xitaa maalin kasta. Isbeddeladan waxaa lagu arkaa shaqadaada dhiiga, taasoo loo isticmaalo in lagu helo dhibcahaaga. Dhibcuhu wuxuu u dhexeeyaa 6 (taasoo macnaheedu yahay beerku si fiican ayuu u shaqaynayaa) ilaa 40 (taasoo macnaheedu yahay beerku si liidata u shaqaynayo). Nambarka waxaa lagu xisaabiyaa qaacido iyadoo la isticmaalayo jinsiga (aad ku dhalatay) iyo 5 natiijooyinka shaybaadhka caadiga ah:

- **Jinsiga (aad ku dhalatay):** Qodobbada dhibcaha ee jinsiga bukaanka si wax looga qabto farqiga u dhexeeya ragga iyo dumarka. Dumarku taariikh ahaan way ka yaraayeen ragga inay helaan deeq beerka ah.
- **Creatinine:**Wuxuu cabbiraa shaqada kelyaha sababtoo ah shaqada kelyaha waxaa inta badan saameeya cudurka beerka.
- **Bilirubin:**Wuxuu cabbiraa sida wanaagsan ee beerkaagu uga takhaluso xaniinyaha, dareeraha beerka laga soo saaro kaas oo ka caawiya nuugista iyo dheefshiidka.
- **INR:** Wuxuu cabbiraa awoodda beerkaagu u leeyahay inuu sameeyo arrimo xinjiro dhiig ah.
- **Sodium (Na)/Cusbo:** Nooc ka mid ah elektroytka kaas oo gacan ka geysta xakamaynta qadarka dareeraha ee jidhkaaga.
- **Albumin:**Barootiinka ugu weyn ee ku jira balasmaha dhiigga kaas oo uu sameeyo beerku.

Dhibcahaaga MELD 3.0 ayaa waxtar leh si loo maareeyo daryeelkaaga, sida marka la samaynayo hababka qaarkood ama marka la tixgeliyo u gudbinta beerka beddelka.

## Baaritaanka kansarka beerka

Cirrhosis waxay kordhin kartaa fursada kansarka beerka ee loo yaqaan **kansarka hepatocellular (hepatocellular carcinom, HCC)**. Bixiyahaaga ayaa dalban doona baaritaanno lagu hubinayo HCC 6dii biloodba mar. Baaritaanada waxaa ku jiri kara MRI caloosha, CT scan, ama ultrasound.

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**Qoraalkan waxa loogu talagalay ujeeddooyin macluumaad oo keliya. Kala hadal dhakhtarkaaga haddii aad wax su'aalo ah ka qabto daryeelkaaga.**

Wixii macluumaad dheeraad ah oo caafimaad, tag [wexnermedical.osu.edu/patiented](https://wexnermedical.osu.edu/patiented) ama la xidhiidh Maktabadda Macluumaadka Caafimaadka 614-293-3707 ama [health-info@osu.edu](mailto:health-info@osu.edu). -

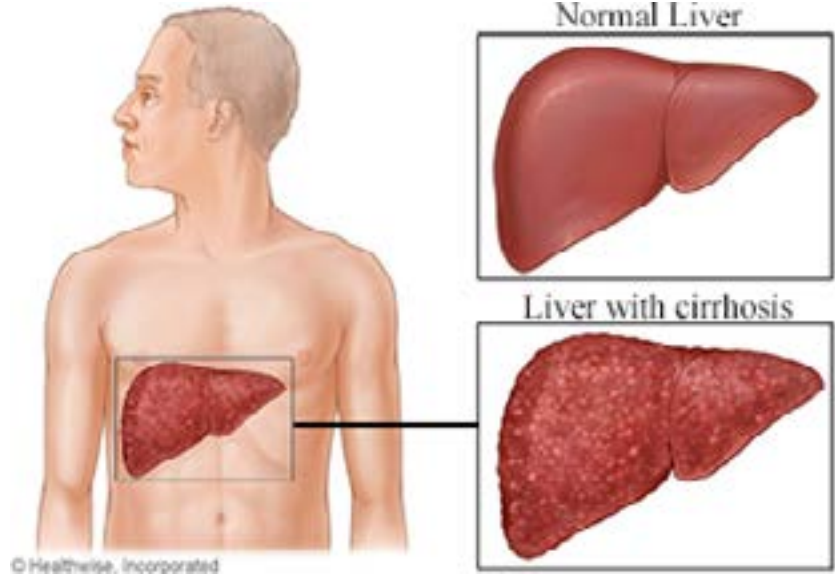
# Understanding Cirrhosis of the Liver



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With cirrhosis, the liver becomes injured and scarred over time. The scar tissue blocks the flow of blood through the liver. This blockage causes the liver to be slow in breaking down food products, hormones, medicine, and waste products in the body. It also slows the liver's ability to make proteins and other substances.



## Symptoms of cirrhosis

You may have no symptoms of cirrhosis until your liver is badly damaged.

Early symptoms of cirrhosis may include:

- Feeling tired or weak
- Poor appetite
- Losing weight without trying
- Nausea and vomiting
- Mild pain or discomfort in the upper right side of your abdomen

As your liver function gets worse, you may have other symptoms, including:

- Bruising and bleeding easily
- Confusion, problems thinking, memory loss, personality changes, or sleep disorders
- Swelling in your lower legs, ankles, or feet, called edema
- Bloating from buildup of fluid in your abdomen, called ascites
- Severe itchy skin
- Darkening of the color of your urine
- Yellowish tint to the whites of your eyes and skin, called jaundice

## Causes of cirrhosis

These diseases and conditions can damage the liver, leading to cirrhosis.

### Most Common Causes

- Alcohol abuse
- Nonalcoholic fatty liver disease (NAFLD), a condition in which fat builds up in the liver
- Chronic hepatitis C, a viral infection that causes liver inflammation and damage
- Chronic hepatitis B, a viral infection that causes liver inflammation and damage

### Less Common Causes

- Autoimmune hepatitis, a chronic disease in which the body's immune system attacks the liver, causing inflammation and liver damage
- Diseases that damage, destroy, or block bile ducts (the tubes that carry bile from the liver to the gallbladder and small intestine), such as primary biliary cholangitis (PBC) and primary sclerosing cholangitis (PSC)
- Inherited liver diseases that affect how the liver works, such as:
  - Wilson disease, a disorder in which the body builds up too much copper
  - Hemochromatosis, a disorder in which the body builds up too much iron
  - Alpha-1 antitrypsin (AAT) deficiency, a condition that raises your risk for lung and liver disease
- Long term use of certain medicines
- Chronic heart failure with liver congestion, a condition where blood flow out of the liver is slowed

## Testing for cirrhosis

Talk with your provider about your symptoms during your physical exam. Your provider may recommend 1 or more of these tests:

- **Blood tests** to check how your liver is working.
- **Abdominal CT (computerized tomography) scan** to check the liver. This scan allows your provider to see pictures of thin slices of your abdominal organs.
- **Magnetic resonance imaging (MRI)** that uses radio waves in a magnetic field to check bones and soft tissue, such as the liver.
- **Ultrasound** of the liver that uses sound waves to create pictures of the liver to check how well the liver works.
- **Liver biopsy** where a needle is put through the skin to take a sample of the liver tissue to check liver function.

## MELD 3.0 score

The MELD 3.0 score (Model for End-stage Liver Disease) is a useful tool for both you and your health care team. It is a numbered scale that estimates how well your liver is working. With cirrhosis, the function of the liver can change constantly, even every day. These changes are seen in your blood work, which is used to find your score. The score ranges from 6 (which means the liver is working well) to 40 (which means the liver is working poorly). The number is calculated by a formula using sex (at birth) and 5 routine lab test results:

- **Sex (at birth):** The score factors in patient sex to address disparity between males and females. Females have historically been less likely than males to receive a donor liver.
- **Creatinine:** Measures kidney function because kidney function is often affected by liver disease.
- **Bilirubin:** Measures how well your liver gets rid of bile, a fluid produced in the liver that helps with absorption and digestion.
- **INR:** Measures your liver's ability to make blood clotting factors.
- **Sodium (Na):** A type of electrolyte that helps control the amount of fluid in your body.
- **Albumin:** The main protein in blood plasma that is made by the liver.

Your MELD 3.0 score is helpful to manage your care, such as when to do certain procedures or when to consider referral for liver transplant.

## Testing for liver cancer

Cirrhosis can increase the chance of cancer in the liver called **hepatocellular carcinoma (HCC)**. Your provider will order tests to check for HCC every 6 months. Tests may include abdominal MRI, CT scan, or ultrasound.

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**This handout is for informational purposes only. Talk to your healthcare provider if you have any questions about your care.**

For more health information, go to [wexnermedical.osu.edu/patiented](https://wexnermedical.osu.edu/patiented) or contact the Library for Health Information at 614-293-3707 or [health-info@osu.edu](mailto:health-info@osu.edu).