Preface

Consultations for Liver Disease Patients

Inpatient and outpatient consultation for patients with liver disease is commonly encountered in clinical gastroenterology practice. Many issues are complicated and infrequently seen. Some of the disease states have potential life-threatening consequences, causing anxiety for the practitioner. Further, there have been diagnostic and therapeutic advances for many of the problems, making the gastroenterologist somewhat uncomfortable when consultation is sought. This issue of Clinics in Liver Disease is entitled “Approach to Consultations to Patients with Liver Disease” and is intended to provide a framework for dealing with many of the vexing issues that face the clinical gastroenterologist on a daily basis. The articles are not exhaustive literature reviews: rather, they are clinical discussions that guide the practitioner on how to handle common consultations.

The first article is entitled “Evaluation of Elevated Liver Enzymes” by Dr Kim. The next discussion is a clinical approach to the complicated topic of drug-induced liver disease by Dr Davern. The next article is a clinical approach to the patient with elevated alkaline phosphatase and hepatic cholestasis by Dr Kowdley.

The following series of articles deal with troubling symptoms and complications observed in patients with chronic liver disease. Dr Gordon discusses the evaluation and management of ascites and hepatorenal syndrome, and Dr Poordad provides a description of the state-of-the-art assessment and management of hepatic encephalopathy. A presentation of shortness of breath in the cirrhotic patient involves a unique set of problems that is described by Dr Kwo. Dr Reddy outlines the management of the particularly troublesome issue of pruritus in patients with chronic liver disease.

Several difficult disease entities are presented thereafter. Alcoholic hepatitis is discussed by Dr Runyon, and hepatitis B virus infection is presented by Dr Gish. I have written an article on the common problem of granulomatous liver disease. The frequently encountered issue of evaluation and management of liver lesions is outlined.
by Dr Afdhal, and a clinical approach to the assessment and management of non-alcoholic liver disease is presented by Dr Harrison.

The last section involves general enigmatic issues that are frequent reasons for consultation for the gastroenterologist. Dr Brown discusses liver transplantation candidacy and Dr Muir presents an approach to surgical clearance in patients with chronic liver disease. Finally, Dr Reau outlines an approach to the unsettling problem of liver disease in pregnancy.

This issue of *Clinics in Liver Disease* should be an invaluable resource to the practicing gastroenterologist and allow for appropriate handling of many complicated problems in liver disease.

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Steven L. Flamm, MD
Liver Transplantation, Department of Medicine
Division of Gastroenterology and Hepatology
Northwestern University Feinberg School of Medicine
Chicago, IL 60611, USA

E-mail address: s-flamm@northwestern.edu