Preface

Advances and Evolving Concepts in Nonalcoholic Fatty Liver Disease

The field of nonalcoholic steatohepatitis (NASH) continues to evolve rapidly. This issue of Clinics in Liver Disease captures many of the advances and evolving concepts that will be relevant for clinicians who take care of patients with nonalcoholic fatty liver disease. In an era where personalized medicine is not just a concept but a reality in many areas, such as the use of IL-28 gene status to determine therapeutic strategies for hepatitis C, there has been remarkable advances in the understanding of the genetic predisposition to NASH and activation of disease pathways relevant to disease progression. These are comprehensively reviewed by Dr Sookian. There is considerable sampling variability with liver biopsies and there are intra- and interobserver variability in assessment of liver histology that confound evaluation of the role of liver biopsies in defining prognosis in NASH. The controversies associated with this subject are thoughtfully reviewed by Dr McCullough. The limitations of liver biopsies and their interpretation are driving research to developing noninvasive biomarkers that can identify those with disease and its progression versus regression. The current state of the art is summarized lucidly by Dr Angulo. It is also now appreciated that the liver has a limited repertoire for expressing a disease phenotype and that steatosis and liver injury can result from a multitude of molecular pathways. Clinical scenarios that can cause NASH but are not classically related to obesity-related NASH and their associated pathophysiology are reviewed by Dr Rinella. Advances in the understanding of classical steatosis and disease progression are also reviewed with a view toward providing translational insights into how this knowledge can be used to prevent or treat the disease in the future. The critical role of behavioral factors that drive eating and exercise behaviors and the impact of drugs used to treat such conditions are often underplayed in the clinical literature. A very practical and clinically relevant analysis
of these conditions is provided to help clinicians manage patients in their practice along with a state-of-the-art review of best practices in the management of NASH. We believe that this compilation of reviews will bring practicing clinicians in both academic and community settings up to date with the major advances in the field and will enhance their clinical practice.

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