
Discharge Instructions for Liver Cirrhosis

You have been diagnosed with cirrhosis of the liver. This is a long-term (chronic) problem. It occurs when liver tissue is destroyed and replaced by scar tissue. Causes of cirrhosis include:

- Infection, such as viral hepatitis.
- Chronic alcoholism.
- The body's immune system attacking healthy cells (autoimmune disorders).
- Obesity, diabetes, high blood pressure, and high cholesterol.
- Medicine side effects.
- Genetic diseases.

Sometimes the exact cause is unknown. You may not have any symptoms at first. Or your symptoms may be mild. But they usually get worse. Cirrhosis is likely to occur if you have a history of long-term alcohol abuse. Cirrhosis can't be cured but may improve with treatments. Treatment choices depend on the cause and extent of liver damage. The goals are to prevent further damage and prevent complications.

Home care

Alcohol

- People with cirrhosis should not drink alcohol. If you stop drinking, you may feel better and live longer. Even if cirrhosis is not from alcohol, alcohol may cause the liver disease to get worse.
- If you are a chronic alcohol user, you will have withdrawal symptoms. Talk with your health care provider for more information.
- If alcohol is a problem, ask your provider about medicine that can help you quit drinking.
- Find a local Alcoholics Anonymous support group online at www.aa.org/.

Diet

- Ask your provider what kind of diet you should follow. You may be asked to limit or not eat certain foods. Don't limit your lean protein intake.
- Weigh yourself daily and keep a weight log. If you have a sudden change in weight, call your provider.
- Cut back on salt.
 - Limit canned, dried, packaged, and fast foods.
 - Don't add salt to your food at the table.
 - Season foods with herbs instead of salt when you cook.

Medicines, supplements, and vaccines

- Take your medicines exactly as directed.
- Talk with your provider before taking vitamins, over-the-counter medicines, or herbal supplements. Some supplements may be toxic to the liver. Pain medicines called NSAIDs (nonsteroidal anti-inflammatory drugs), such as ibuprofen, can harm the kidneys if you have cirrhosis.
- Don't take aspirin or other blood-thinning medicines unless directed by your provider.
- Discuss vitamin supplements and deficiencies with your provider.
- Ask your provider about getting vaccines for viruses that can cause liver diseases.
- Control any underlying conditions that may cause cirrhosis or make it worse. These include diabetes, obesity, high blood pressure, and high cholesterol and high triglycerides. See your provider regularly.

Follow-up care

Follow up with your health care provider as advised. You will likely have the following tests:

- Lab tests
- Blood tests for liver cancer
- Ultrasound or MRI scan of your liver every 6 months
- Endoscopy to check for swollen veins (varices) in your digestive tract
- Other tests and medicines as needed if the cirrhosis gets worse.

When to contact your doctor

Call your health care provider or get medical care right away if you have any of the following:

- Fever of 100.4°F (38°C) or higher, or as directed by your provider
- Extreme tiredness (fatigue), weakness, or lack of appetite
- Vomiting (with or without blood)
- Yellowing of your skin or eyes (jaundice)
- Itching
- Swelling in your belly or legs
- Black or tarry stools
- Skin that bruises easily

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- Confusion or trouble thinking clearly