Hepatitis C, Fatty Liver Disease, and Cirrhosis

August 2, 2013 By Lucinda K. Porter RN

Sometimes I get incredibly emotional about hepatitis C, not necessarily from having it, but from watching the devastation hepatitis C brings with it. Although we are making rapid progress with improved treatments for hepatitis C, we have a long way to go to reach the millions who are unaware that they are walking around with a potentially life-threatening disease.

Although so many of us live with hepatitis C, we also live in a time and a society where unhealthy habits deepen our chances of progressing to cirrhosis. Cirrhosis and liver cancer are on the rise because of a lifestyle-related condition called non-alcoholic fatty liver disease (NAFLD). It is the most common liver disease. NAFLD is associated with obesity, high cholesterol, high triglycerides, insulin resistance, and diabetes. Most discouraging is that children are showing signs of liver damage from diet and lifestyle choices.

Make no mistake; cirrhosis is a horrendous diagnosis. I know of some especially strong warriors who are managing their lives valiantly, but it is heartbreaking to witness their challenges. For insight into the seriousness of cirrhosis, watch the film, *Wrestling the Monster - Living with Hepatic Encephalopathy*.

Wrestling the Monster captures the appalling nature of hepatic encephalopathy, the dementia that accompanies cirrhosis. Hundreds of thousands of Americans have it, a number that will top a million if we don't change the course of hepatitis C and other causes of liver disease. Warning: This documentary is heartbreaking, particularly if you know it could happen to you or a loved one.

We know we are "supposed to" eat well, exercise, get enough sleep, and so on, but it is one thing to know this, something entirely different to practice healthy behaviors on a regular basis. While talking to a family member about America's tendency towards eating high caloric, fatty foods with artificial ingredients that our grandmothers wouldn't recognize, let alone pronounce, she said, "It isn't living if I can't eat the way I want. I replied, "Yes, but the problem is that we don't die from poor health habits--we live with them for an average of fifteen years, dying slowly and painfully. What if you have a small stroke and are dependent on others for your care?" She said if that happened, she would go to Washington to end her life. At that point I kept my mouth shut, but I was wondering how she was going to get across the country if she was paralyzed from a stroke. I

certainly wasn’t going to be her travel companion on her flight to death.

I know it is hard. Let’s face it, exercise sucks if you aren’t athletic. Vegetables are dull and I don’t salivate thinking about them. Pizza is practically as good as an orgasm (although the orgasm won’t add a single ounce of fat). However, given the choice between pie and hepatic encephalopathy vs. eating beets and going for a daily walk, I’ll opt for veggies and exercise. I may be stuck with hepatitis C (for now) but I do not have to hasten its destruction by adding in a fatty liver diagnosis.

To keep it that way, I have a new mantra : Feeling good tastes better than any food.

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