Hepatitis C Patients at Risk for Portal Hypertension

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Hepatitis C patients who have cirrhosis are at risk for complications such as portal hypertension, ascites, cancer as well as other conditions.

The most common cause of portal hypertension is cirrhosis of the liver, but thrombosis (blood clot) can also be a contributor to portal hypertension.

The portal vein carries blood to the liver from your digestive organs. It's a mainstream blood source that is vital to your liver. When increased pressure is within the portal vein it is called hypertension.

Increased pressure in the portal vein causes large veins (varices), to develop across the esophagus and stomach to get around the blockage. The varices become fragile and can bleed easily.

The Mayo Clinic states the following symptoms and complications can be associated with portal hypertension:

- High blood pressure in the veins that supply the liver (portal hypertension). Cirrhosis slows the normal flow of blood through the liver, thus increasing pressure in the vein that brings blood from the intestines and spleen to the liver.
- Swelling in the legs and abdomen. Portal hypertension can cause fluid to accumulate in the legs (edema) and in the abdomen (ascites). Edema and ascites also may result from the inability of the liver to make enough of certain blood proteins, such as albumin.
- Enlargement of the spleen (splenomegaly).Portal hypertension can also cause changes to the spleen. Decreased white blood cells and platelets in your blood can be a sign of cirrhosis with portal hypertension.
- Bleeding. Portal hypertension can cause blood to be redirected to smaller veins, causing them

to increase in size and become varices. Strained by the extra load, these smaller veins can burst, causing serious bleeding. Life-threatening bleeding most commonly occurs when veins in the lower esophagus (esophageal varices) or stomach (gastric varices) rupture. Gastrointestinal bleeding can cause black, tarry stools or blood in the stools; or vomiting of blood due to the spontaneous rupture and bleeding from varices. If the liver can't make enough clotting factors, this also can contribute to continued bleeding. Bacterial infections are a frequent trigger for bleeding.

- Encephalopathy. Confusion and forgetfulness caused by poor liver function and the diversion of blood flow away from your liver.
- Reduced levels of platelets or decreased white blood cell count.

For patients who have cirrhosis, regular follow up exams with their liver specialist, along with blood tests, ultrasounds, CT scans, and an endoscopy is recommended.

There are procedures and medications to help with portal hypertension and associated conditions. Be proactive, talk to your physician about your liver condition and what tests you need to take.

Continue to follow as we present more information on portal hypertension, and other liver-related conditions, symptoms, and treatment.

Have you experienced portal hypertension? Do you have a question or comment about portal hypertension, tests, or treatment?

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