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Portal Hypertension

BY DR. FIRAS F. MUSSA

If you have liver disease or other liver problems, you may develop portal hypertension. As cirrhosis of the liver progresses, blood is unable to flow normally through your liver, which filters toxins from the blood. Instead, the blood backs up and causes bleeding and the accumulation of fluid inside your abdomen.

CHRONIC

Portal hypertension lasts as long as your liver disease or another underlying condition exists.

PREVENTING COMPLICATIONS IS IMPORTANT

Leads to an enlarged spleen that may reduce platelets in your blood, which are responsible for clotting (stopping bleeding). If excess fluid develops in your abdomen (a condition called ascites), the fluid may become infected (spontaneous bacterial peritonitis).

Symptoms

MAY BE ABSENT

Usually does not cause symptoms until complications develop.

CHANGES IN THE ABODMEN

You may notice new blood vessels visible on the skin of your abdomen, a bloated feeling due to excess fluid (a condition called ascites).

BLEEDING

You may vomit blood or pass dark or tar-like stools due to bleeding from extremely dilated blood vessels (varices), in your esophagus, stomach or colon.

Causes

In Western countries, the most common cause is liver cirrhosis.



SOME SPECIFIC ADDITIONAL CAUSES INCLUDE:

- A clot in the main vein that leads to your liver (portal vein thrombosis).
- A clot in the vein that connects your liver and your heart (Budd-Chiari Syndrome).
- Less commonly, infection can lead to similar problems.

Diagnosis

SEE A VASCULAR SURGEON IF YOU:

- Have liver disease.
- Experience any of the symptoms above.

You will be asked questions about symptoms and medical history, including questions about family members. Your vascular surgeon will also perform a physical exam.

TESTS MAY BE RECOMMENDED

In cases where the diagnosis is not straightforward, your vascular surgeon may perform some invasive testing to measure the pressure in the vein or obtain liver tissue to better diagnose the problem.

Treatments

The underlying cause must be treated to prevent or successfully treat or portal hypertension and its complications.

DIET AND MEDICATION

If fluid accumulates inside your abdomen (a condition called ascites), treatment often starts with dietary changes to restrict salt, and diuretics (water pills) to reduce water retention.

ENDOSCOPIC THERAPY

If bleeding occurs, you may need an endoscopy to look for extremely dilated blood vessels (varices). During the endoscopy the varices can be tied or banded and medication may be prescribed following the procedure to help control bleeding.

TIPS PROCEDURE

In severe cases, a TIPS procedure (transjugular intrahepatic portosystemic shunt) may be required. This is usually performed by a radiologist and may require anesthesia.

SURGERY

Rarely required.



Staying Healthy

- ♦ Stay active.
- ♦ Be on the lookout for the symptoms above.
- ♦ Ask your vascular surgeon how you can control or slow the progression of your liver disease or other underlying cause.