



# THE SCIENTIFIC ANALYSIS OF LIVER CIRRHOSIS PATIENTS

scientific.

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## Project Aims & Objectives

\*To Study and Analysis of My Mother (Smt Usha Singh) Liver Cirrhosis's Condition With Post EVL; Melena Severe Anaemia & Ascites.( liver Cirrhosis Problem since 2019 – 2024.....).  
\*The Aim of The Study is to determine the Frequency of Pulmonary Hypertension in Patients With Cirrhosis & Portal Hypertension.( innovation).  
To Determine The Possibility of an Accurate Ultrasound Diagnosis of the Characteristics of this Complication  
\*To Reduce Your Chance of Getting Non Alcoholic Fatty liver Disease which lead to Cirrhosis & Make Sure You Are a Healthy Balanced Diet & Exercising Regularly.( innovation).

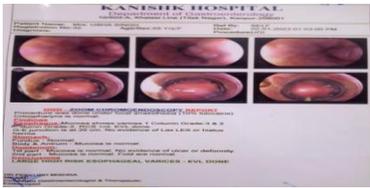
## Project Background/Methods

A Various Examination Procedure (Methods) have Done During liver Cirrhosis infected Patients with Additional Disease Problem.  
World Wide Prevalence of Cirrhosis is unknow

Methods:- Real Time PCR (HCV Viral Load Quantitative)  
OGD:- Zoom Chromoendoscopy  
Cardiac Echography( Diagnosis Portal Hypertension)  
Upper Gastrointestinal Endoscopy(UGIE)  
large Esophageal Varices  
Endoscopic variceal ligation

Other Methods:- SGPT & SGOT Test  
Serum Creatinine  
URIC ACID  
Bleeding & Clotting Time  
Occult Blood

## Charts and Figures



## Analysis

\***Real Time PCR Test for Hepatitis C:-** RNA Viral load done on Real Time PCR BY Using the Higher Sensitive and Specific TAQMAN Assay Method and Linear Range of the Assay is 250IU/ml-9.9 x 10<sup>9</sup> IU/ml.  
Conversion Factor is Taken from WHO Value Below 250 IU/ml does not exclude the Possibility of an Infection & HCV RNA Detected( my mother SMT USHA SINGH Case Report). Graphs Tables etc.  
\***OGD (Oesophago- Gastro- Duodenoscopy):-** ZOOM CHROMOENDOSCOPY REPORT ( Smt Usha Singh Report) & Procedure Was Done Under Local Anaesthesia ( 10% lidocaine), Pharynx is Normal, Mucosa Shows Varices 1 Column Grade-3-2, Column Grade-2 RCS +nt EVL Done.GE Junction is at 35 cm & No Evidence of Lax LES OR Hiatus. Stomach Fundus & Mucosa is Normal. Duodenum Mucosa is Normal, NO Evidence of Ulcer or Deformity.

## Results

BLEEDING TIME AND CLOTTING TIME VALVE HAVE NORMAL DURING MY MOTHER LIVER CIRRHOSIS CONDITION.  
A:G Ratio have increased due to Fatty Liver Condition and TLC Value normal  
Fluid Analysis blood occult test is Normal.  
Widal test Positive (Salmonella Typhi O & H ).

## Conclusion

Semi Solid Low Salt Diet.  
large high Risk Esophageal Varices- Endoscopic variceal ligation Done  
EVL is Widely Used to Prevent Esophageal Variceal Bleeding in Patients With Advanced Cirrhosis.

## Next Steps

Generally, liver damage from cirrhosis cannot be reversed, but treatment can stop or delay further progression and reduce complications.

A recommended diet consists of high-protein, high-fiber diet plus supplementation with branched-chain amino acids. Close follow-up is often necessary.

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