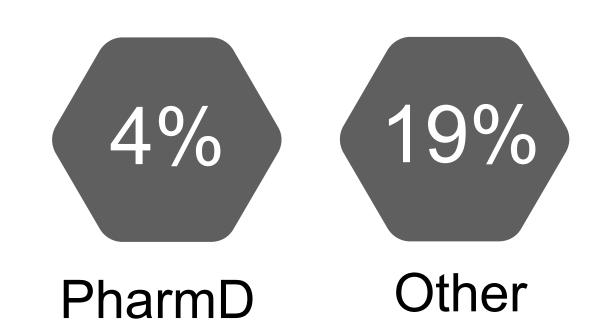
## Clinical Update on the Management of Patients with Cirrhosis



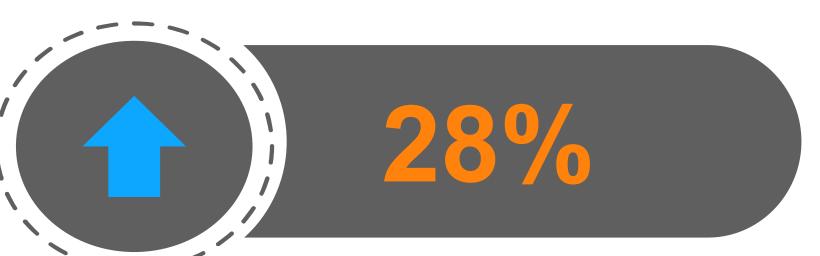


# 2% 60% 15% MD/DO NP/PA RN



- 30% Gastroenterology
- 25% Hepatology
- 8% Primary Care
- 3% Hospitalist
- 34% Other Specialty

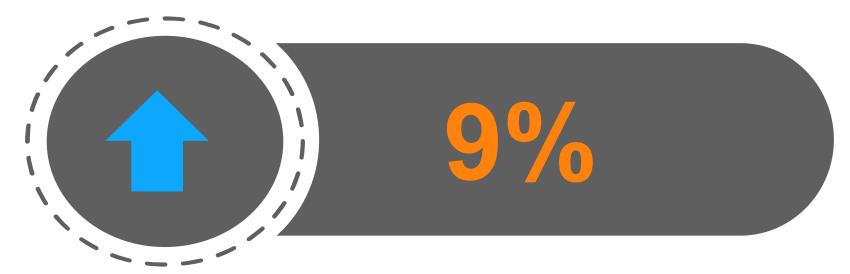
### Pre & Post Program Assessment



According to the International Club of Ascites, part of the definition of HRS-1 is an absolute increase in sCr ≥0.3 mg/dL within 48 hours

Agreed that reducing the ACE inhibitor dosage is a false statement regarding the prevention of AKI-HRS in patients with cirrhosis



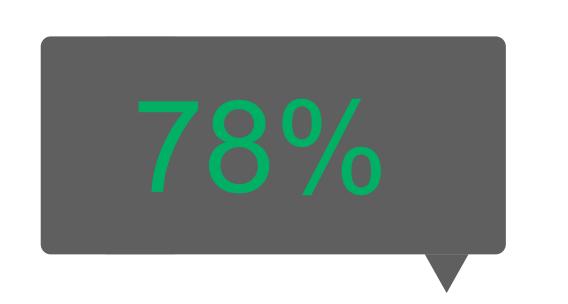


Recognize that the majority of OHE patients do not receive proper management therapy after discharge

Correctly stated that Terilpressin demonstrated significantly better verified HRS reversal compared to placebo in the phase III CONIFRM study.

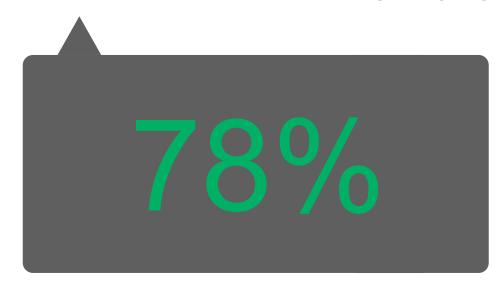


Pre-test N = 38 Post-test N = 48



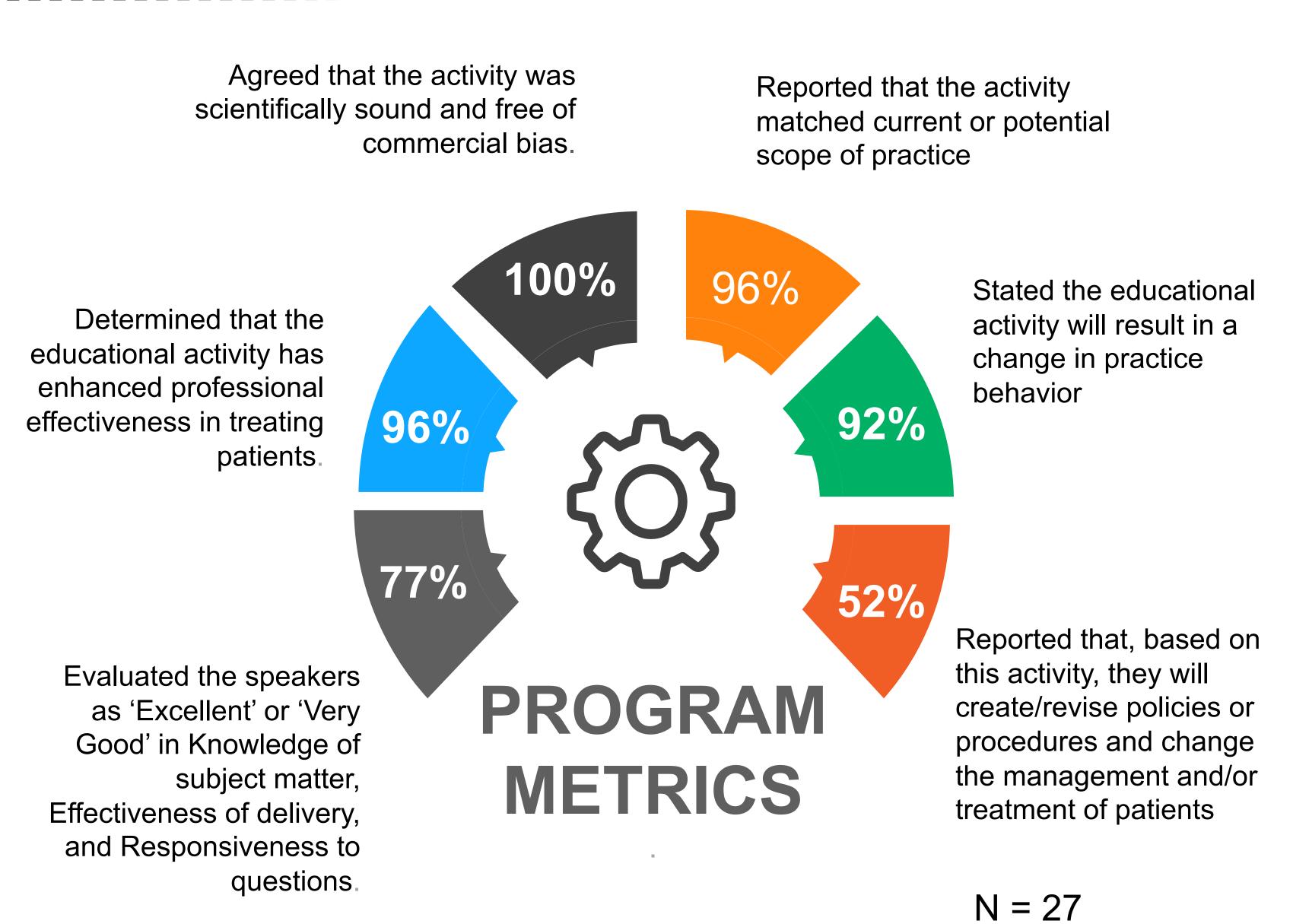
Stated the physical environment was conducive to learning

Agreed that there was sufficient time for questions and answers



N = 27

- Recognize the signs of complications caused by cirrhosis and the impact of current therapeutic interventions
- Describe evolving patient management strategies for patients with hepatorenal syndrome (HRS), hepatic encephalopathy (HE) and thrombocytopenia
- Apply the latest evidence-based treatment strategies to optimize outcomes for patients with HE, HRS, thrombocytopenia and other complications of cirrhosis



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