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Non Alcoholic Steatohepatitis (Nash) after Bariatric Surgery: A Rare Case

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Background: Obesity is often associated with non-alcoholic fatty liver disease (NASH). Bariatric surgery plays an important role when conventional therapies fail. The effects of bariatric surgery on liver function are controversial in the literature. We report the case of an obese woman with NASH after gastric bypass.

Case Report: A 56-year-old woman was admitted to our hospital for jaundice and asthenia. She underwent gastric bypass for severe obesity six mounths before. She experienced a rapid weight loss with a reduction in BMI of 40%. Upon admission laborathory tests showed anaemia, liver cytolysis and hyperbilirubinemia), hypoalbuminemia. Serum markers for hepatitis B and C virus and other causes of liver damage were negative. No alcohol abuse was reported. No paracetamol or other drug consumption was detected. Computed tomography scan revealed only hepatomegaly with steatosis. A liver biopsy was performed and showed NASH with mild fibrosis.

Conclusion: Although improvement of metabolic syndrome has been documented after bariatric surgery, decompensation of liver function and NASH should be considered a rare complication. It's important the monitoring of liver function in the management of obese patients before and after bariatric surgery, including adequate supplementation with specific nutrients to prevent rapid weight loss and consequent liver injury.

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