

## **Risk factors associated with the severity of acute hepatitis A by phase**

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### **Abstract**

**Introduction:** Acute hepatitis A (AH-A) is one of the most common forms of viral hepatitis, and distinct clinical features are associated with the prodromal, icteric and recovery phases. This study was designed to investigate the correlations of various clinical parameters with severity in AH-A patients in each of these three phases.

**Methods:** The medical records of 455 patients diagnosed with AH-A were retrospectively reviewed. The prodromal, icteric and recovery phases were defined by the patterns of changes observed after admission in aspartate aminotransferase (AST), alanine aminotransferase (ALT) and bilirubin levels. Clinical parameters, including phosphate levels, were analyzed to identify their associations with the peak levels of AST, ALT and bilirubin.

**Results:** Of the patients, 129 (28.4%) were admitted in the prodromal phase, 187 (41.1%) in the icteric phase and 139 (30.5%) in the recovery phase. Phosphate levels showed an inverse relationship with the peak AST and ALT levels in the prodromal phase ( $P=0.011$  and  $P=0.005$ , respectively). Prothrombin time (PT, %) showed a negative relationship with peak AST levels throughout the prodromal, icteric and recovery phases ( $P=0.039$ ,  $P=0.028$  and  $P=0.001$ , respectively), the peak ALT level in the prodromal phases ( $P=0.038$ ) and the peak bilirubin level in the icteric phase ( $P=0.029$ ).

**Conclusion:** In conclusion, the baseline phosphate, AST, and ALT levels, as well as PT and the platelet count, were correlated with the peak levels of AST, ALT and bilirubin in patients with AH-A.

### **Biography**

Sangheun Lee has completed his MD and PhD from Catholic Kwandong University. He is a Doctor in St. International Mary's Hospital, Catholic Kwnadong University in Korea. He has published more than 20 papers in reputed journals and has been serving as an Editorial Board Member of repute.

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