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TO ASSESS METABOLIC SYNDROME SEVERITY SCORE IN METABOLIC DYSFUNCTION ASSOCIATED FATTY LIVER DISEASE IN INDIAN POPULATION

Society: AASLD**Track:** Liver Diseases and Transplantation**Author(s) and Affiliation(s):**Preethi Reddy^{1, 2}, Dr Akash Thomas Oommen¹, Dr Shine Sadasivan¹, Dr M Gopalakrishna Pillai¹

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MASLD has emerged as one of the leading causes of cirrhosis in India. While liver biopsy remains the gold standard for diagnosis, non-invasive methods such as FibroScan Controlled Attenuation Parameter (CAP) & KiloPascal (KPA) measurements have gained prominence for assessing hepatic steatosis and fibrosis. MASLD has been integrated into the National Program on Prevention and Control of Cancer, Diabetes, Cardiovascular disease and Stroke by the Ministry of Health and Family Welfare of India to encourage early detection. Infact India has become the first country to include MASLD in one of its national programs as the prevalence rate in Indians is 9-30%. By using Metabolic syndrome definition alone, one ignores the severity of the disease and also misses patients with pre-metabolic status. Metabolic Syndrome severity score is an age-sex specific, continuous score in adult population, quantitative measure of MetS enabling clinicians to screen and monitor individuals at risk & assess their metabolic trends. It assess the severity of disease and does not miss pre-metabolic state. This study investigates the correlations of MASLD Severity by Fibroscan (CAP & KPA) with the MetS-score and correlates clinical significance. A secondary objective evaluates how MASLD severity correlate with individual components of metabolic syndrome, including TG, HDL, FBS, SBP & WC. A prospective study was conducted on 399 patients aged 20-60 years diagnosed with MASLD at Amrita Institute of Medical Sciences, Kochi. MetS components were recorded through clinical and laboratory evaluation and formulated the first age and sex specific MetS score for Indians using CFA analysis. MetS score was correlated with MASLD severity and Results of CAP vs MetS-Score CAP showed significant positive correlation with MetS score (p 0.009). This suggests that higher liver fat steatotic content, as indicated by CAP, is moderately associated with greater MetS severity. KPA vs MetS-Score KPA demonstrated stronger positive correlation with MetS-score (p-0.002) indicating that liver stiffness, marker of fibrosis, aligns more closely with metabolic syndrome severity. Correlations with Metabolic Parameters were showed in a line diagram below. This score is beneficial in outpatient and resource constrained settings where advanced diagnostic tools USG/Fibroscan may not be readily available. The score can help identify patients at risk of MASLD based on metabolic syndrome severity. The MetS severity score can inform decisions about screening for fatty liver disease. Patients with higher scores may be prioritized for liver-specific evaluations, ensuring efficient resource allocation. In a resourceful setting also MetS Score can be assessed and correlating the score with CAP and KPA, it enables clinicians to infer the likelihood of liver steatosis or fibrosis. Its integration into clinical practice enables early detection, risk stratification & for followup

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