# At-home care for chronic liver disease patients is associated with improvement in quality of life

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## INTRODUCTION

- Chronic liver disease (CLD) can have a profound impact on both physical and psychosocial aspects of a patient's daily life.
- The Liver at Home (LAH) program provides 12 weeks of clinical nurse consultant review (1-3 times per week), after an acute hospital admission for CLD.
- At home reviews enable clinical assessment, patient and carers education, nutrition advice (with dietician input) as well as the management of hepatic encephalopathy and ascites.
- This study aimed to evaluate the effect of LAH on patient-reported quality of life (QoL).

## METHODS

- Participants completed the validated 29-item Chronic Liver Disease Questionnaire (CLDQ) at baseline, week 4, and week 12 from March 2023 to April 2025.
- Scores ≥5 were considered to represent a high health related QoL with those <5 representing a lower QoL.
- Patient demographic data was also collected, and changes over time assessed using Wilcoxon signed-rank tests.

## RESULTS

- Baseline assessments were completed by 68 participants with 22 and 26 completing follow-up surveys at week 4 and 12, respectively.

| | |
|---|---|
| **Age** | 62 (IQR 52-71) Y |
| **Sex** | 47 (69%) female, 21 (31%) male |
| **Aetiology of CLD** | Alcohol 48 (70%), MASLD 12 (18%), Other 8 (12%) |
| **Child Pugh Score** | A (8,12%), B (40, 59%), C (20, 29%) |

- At baseline, the most impacted areas were 'fatigue' and 'strength'.
- QoL improved from baseline (median 100 [IQR 86-137]) to week 4 (144 [IQR 118–166]), p=<0.05).

| CLDQ domains | Baseline (median, IQR) | Week 4 (median, IQR) | Baseline vs Week 4 (p value) | Week 12 (median, IQR) | Baseline vs Week 12 (p value) |
|---|---|---|---|---|---|
| **Fatigue** | 2 (1-4) | 4 (2-6) | *0.38* | 4 (2.25-5) | *0.053* |
| **Strength** | 2.5 (2-5) | 5 (4-6) | ***< 0.05*** | 5 (2.5-7) | ***< 0.05*** |
| **Energy levels** | 3 (2-4) | 5 (4-6) | *0.06* | 5 (4-7) | ***< 0.05*** |
| **Eating ability** | 4 (2-5) | 6 (4-7) | *0.12* | 6 (4-7) | ***< 0.05*** |
| **Abdominal discomfort** | 4 (2-6) | 6 (3-7) | *0.92* | 6 (4-7) | ***< 0.05*** |
| **Muscle cramps** | 5 (4-7) | 5.5 (4-7) | *0.49* | 5.5 (4.25-7) | *0.093* |
| **Pruritus** | 5 (4-7) | 5 (4-7) | *0.16* | 7 (6-7) | *0.37* |
| **Concerns about future health** | 4 (3-4.75) | 5.5 (3-7) | *0.59* | 6 (3.5-7) | *0.20* |
| **Total scores** | 100, (86–137) | 144, (118–166) | *< 0.05* | 144, (119-173) | ***< 0.05*** |

- The largest improvement at week 4 was in 'strength' this was maintained at week 12.
- At week 12 significant improvements were noted in 'energy levels', 'eating ability' and 'abdominal discomfort'.
- Muscle cramps', 'pruritus' and 'concerns about future health' remained unchanged throughout the program
- At week 12 an improvement in overall QoL score was maintained (median 144, [IQR 119-173], p= <0.05).

## CONCLUSIONS

**A structured at-home care program for patients with chronic liver disease can lead to significant improvements in quality of life, noted at four weeks with improvement maintained at 12 weeks.**