

Hepatology referral pathways for GPs

1 Scope

For use within hepatology

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Common reasons for referral

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Hepatology

Division C

2 Liver blood tests and what they mean

Test	Normal range	What does it mean?	Actions if abnormal
ALT	7-40	Hepatocellular injury	Raised ALT
Bilirubin isolated raised	<21	Gilberts Haemolysis	Isolated asymptomatic raised bilirubin
Bilirubin with abnormal LFT		Liver or biliary pathology	Refer (routine vs urgent acc to values)
Alkaline Phosphatase (ALP)	30-130	Biliary disease (if raised GGT) Bone disease Pregnancy (placenta) Acute phase response	Raised ALP and normal ALT
Gamma glutamyl transferase (GGT)	Male 0-73 Female 0-38	Non-specific – can reflect alcohol intake, non-alcoholic fatty liver or biliary disease if associated with raised ALP	Follow relevant pathway
Prothrombin time (PT)		Elevated with impaired synthetic function or biliary obstruction	Refer if could be liver related
Albumin	35-50	Non-specific, but may represent impaired synthetic function if low	Refer if could be liver related
Ferritin		Not necessarily iron overload	Raised ferritin
Reduced platelets		Can be a feature of cirrhosis with portal hypertension	Refer if could be liver related

<p>Chronic liver screen U/E, LFT, FBC, PT, FIB-4 if suspected NAFLD Hepatitis B & C serology Liver autoantibodies Serum immunoglobulins Iron studies Alpha-1 antitrypsin level Random glucose, HBA1c, lipids if ?NAFLD If under 50 caeruloplasmin</p>	<p>Acute liver screen LFT, FBC, PT Hepatitis A, hepatitis B and hepatitis E serology (IgM & IgG), EBV and CMV Liver autoantibodies Serum immunoglobulins If under 50 caeruloplasmin</p>
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<p>Hepatitis B screen Chronic liver screen plus: HBV DNA Hepatitis A IgG HIV screen</p>	<p>Hepatitis C screen Chronic liver screen plus: HCV RNA and genotype Hepatitis A IgG HIV screen</p>
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Hepatology

Division C

3 Isolated raised ALT (+/- GGT)

THINK about and address Risk Factors

- Metabolic syndrome
- Diabetes
- Alcohol
- Risks for viral hepatitis (ethnicity, IV drug use)
- Medication
- Vigorous exercise (check CK)

ALT > 300 at any stage → [Acute liver screen](#) , urgent CUH USS → [Urgent referral](#)

Features of significant liver disease at any stage
(eg possible cirrhotic appearance, splenomegaly, raised bilirubin/PT, low platelets) → [Routine referral](#)

ALT >150 Repeat 2/52
ALT <150 Repeat 4/52

ALT remains >150 → USS and [Chronic liver screen](#) → [Routine referral](#)

ALT <150 → USS and [Chronic liver screen](#)

ALT normal → Reinforce lifestyle advice/monitor

Do all the features below apply?
NO hepatomegaly/splenomegaly
NO cirrhosis/portal hypertension
Normal chronic liver screen

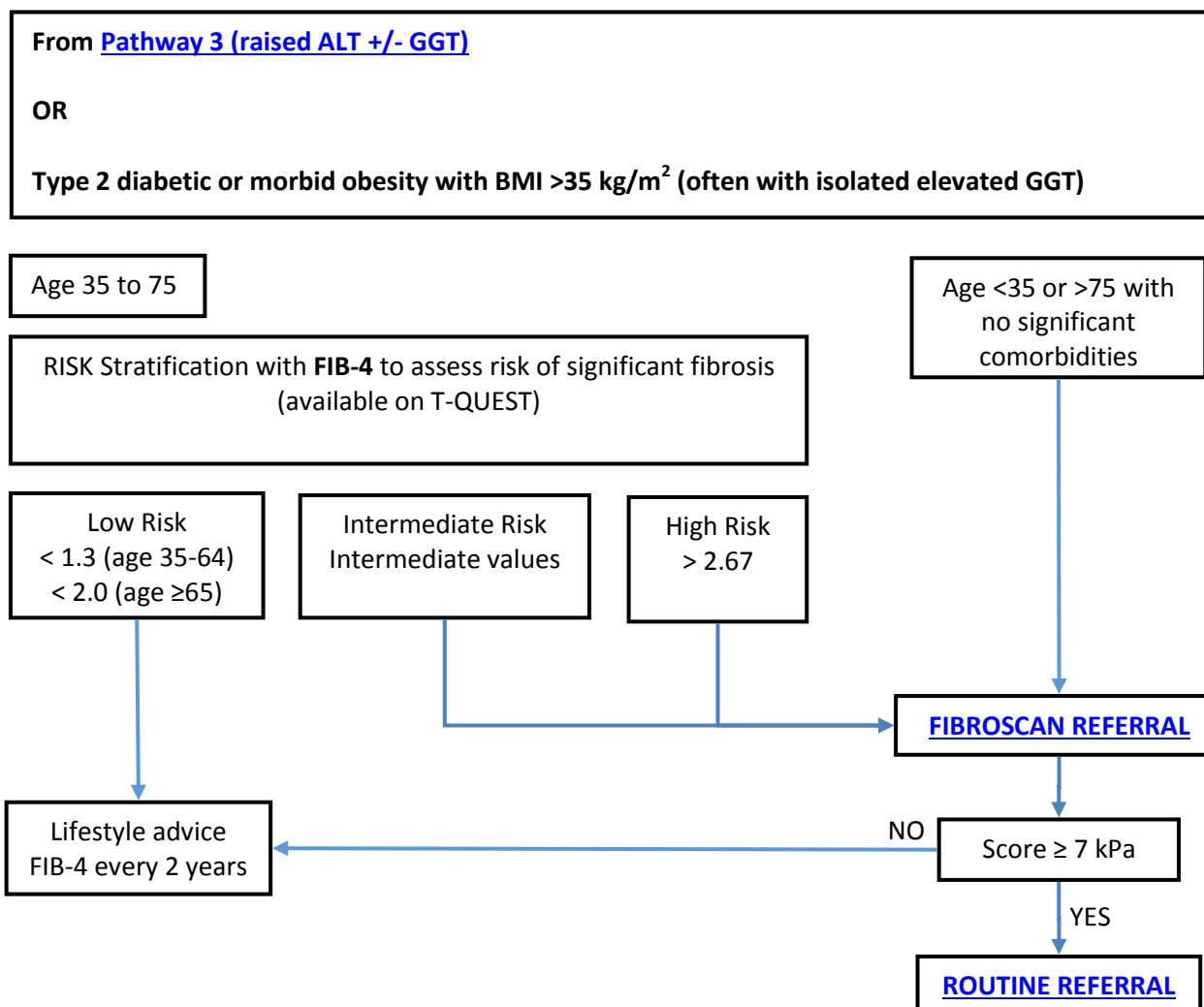
NO → [Routine referral](#)

YES → > 14 units alcohol per week

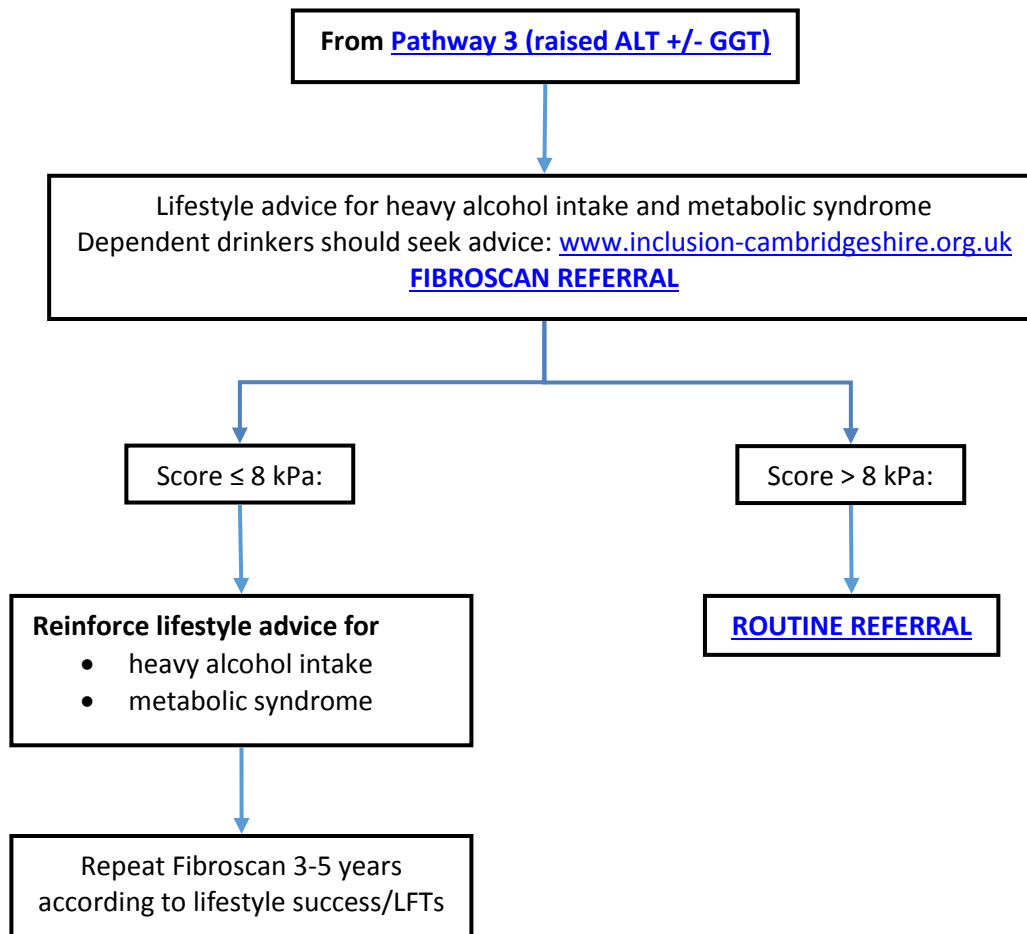
NO → [NAFLD pathway](#)

YES → [Alcohol related liver disease pathway](#)

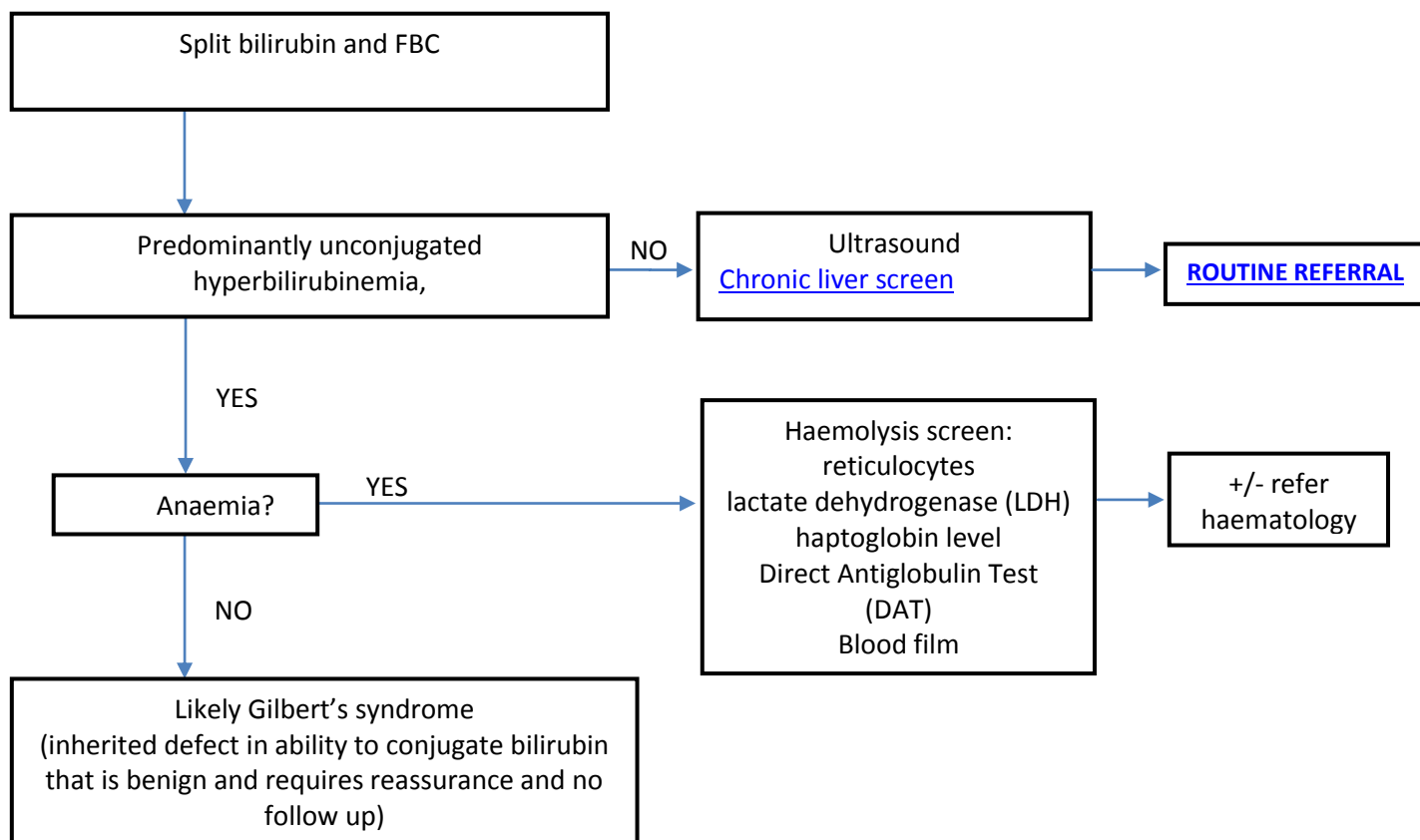
4 Non Alcoholic Fatty liver Disease (NAFLD) pathway



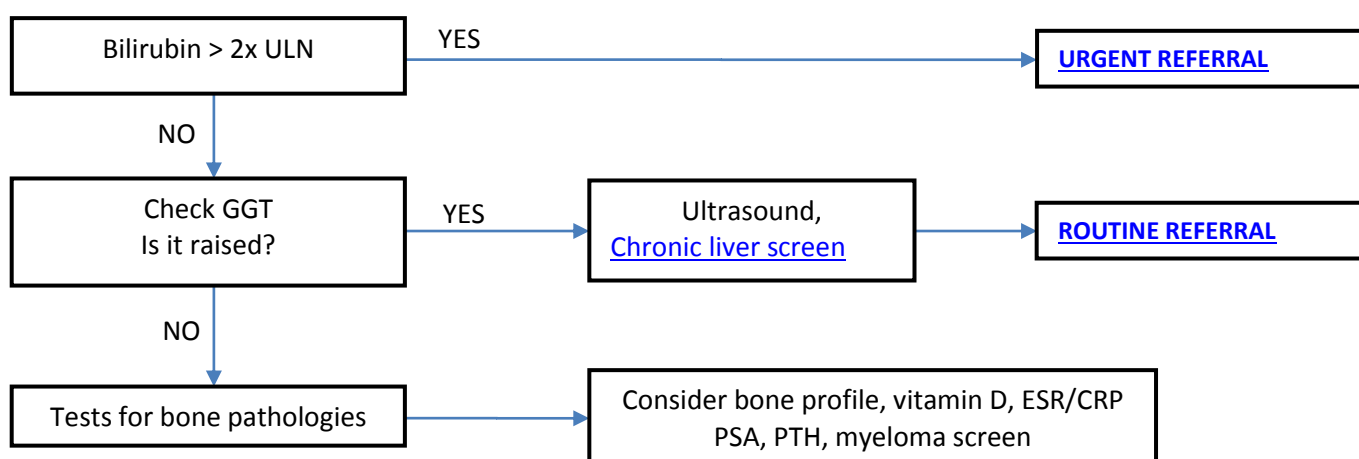
5 Alcohol-related Liver Disease (ArLD) pathway



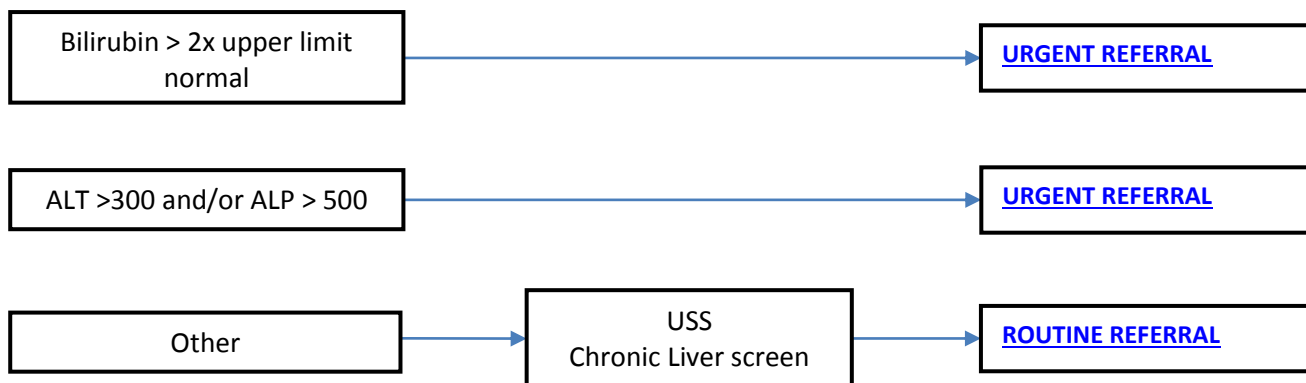
6 Isolated asymptomatic raised bilirubin



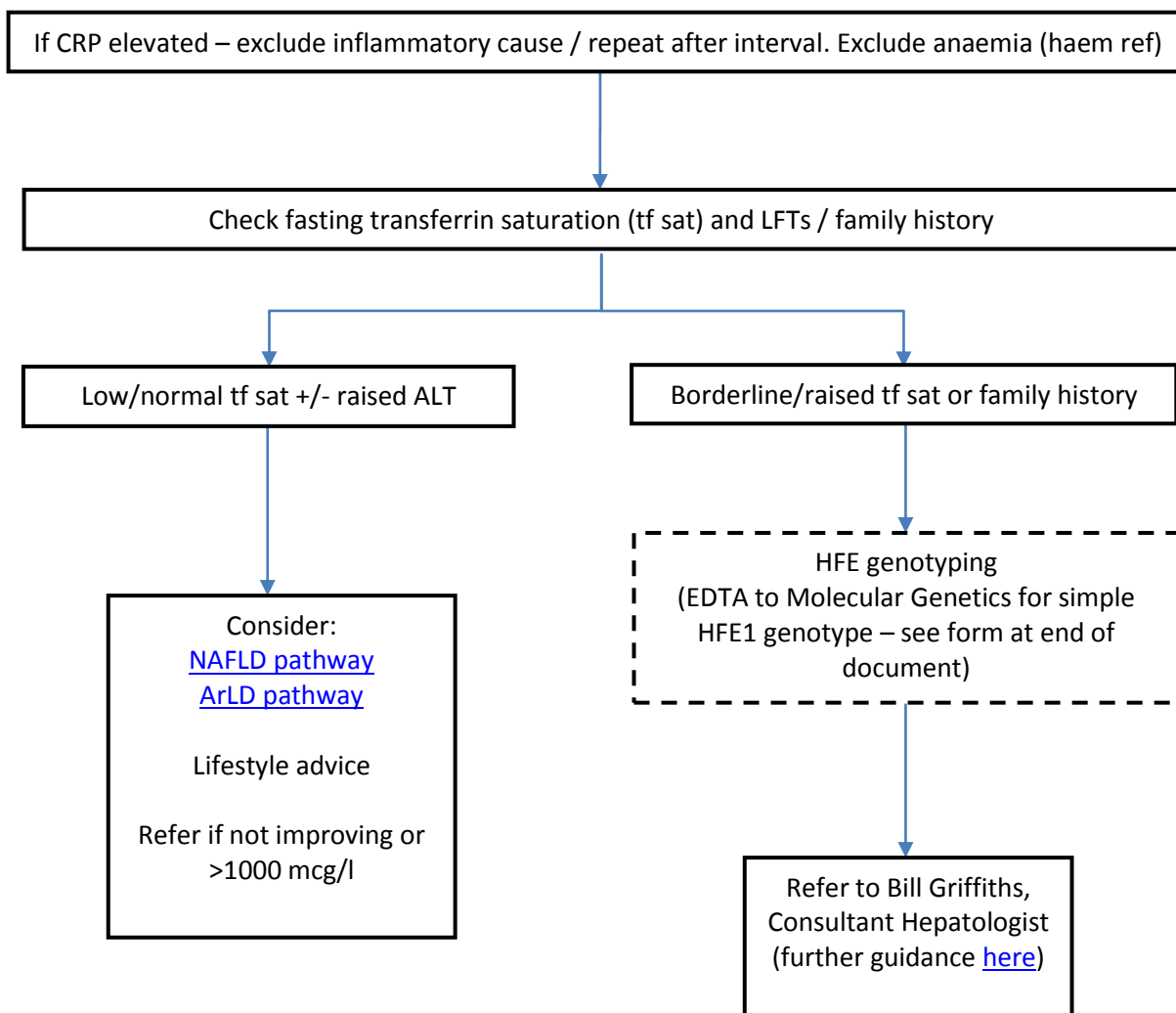
7 Raised ALP and normal ALT



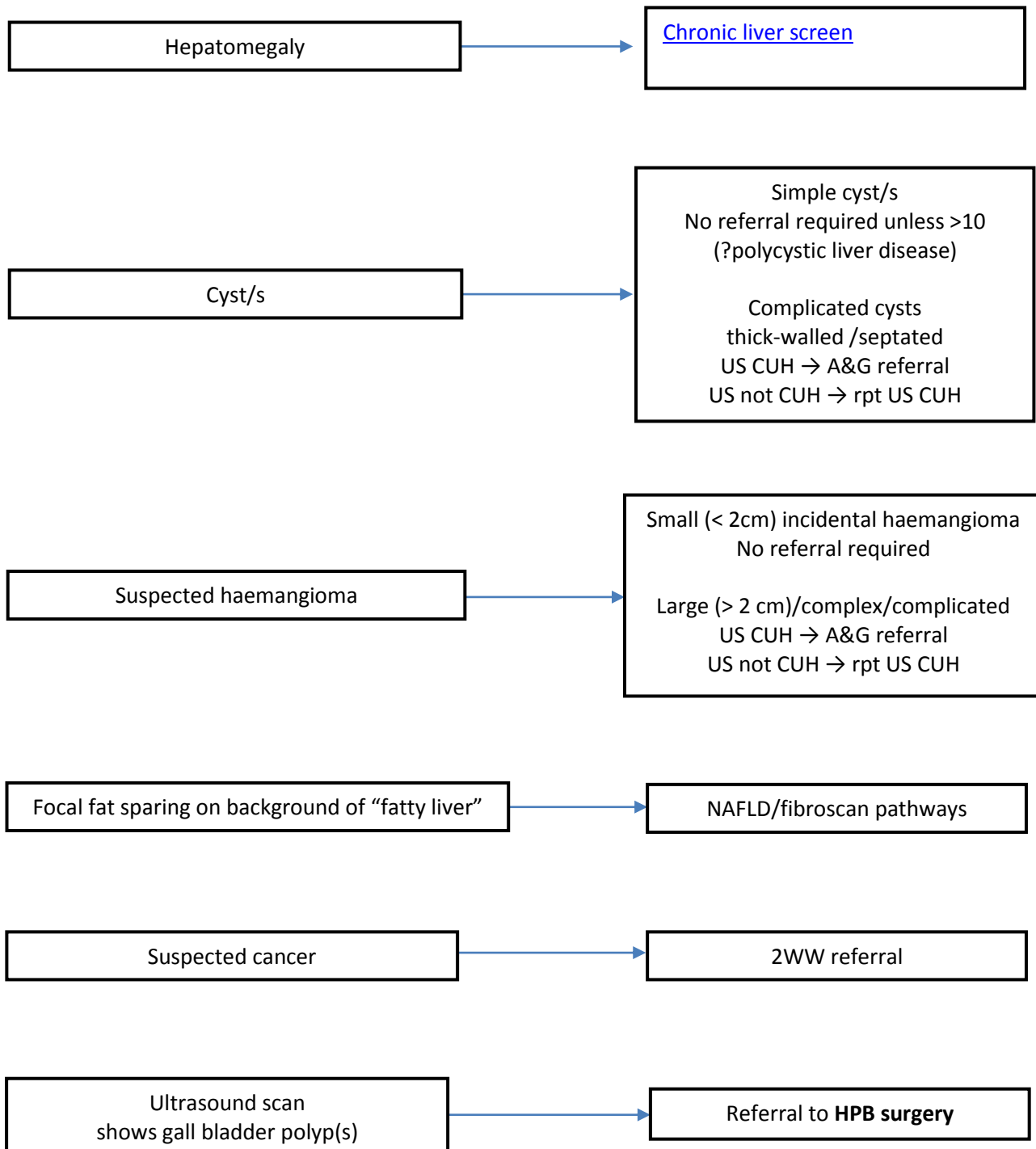
8 Combination of LFT abnormalities



9 Raised ferritin



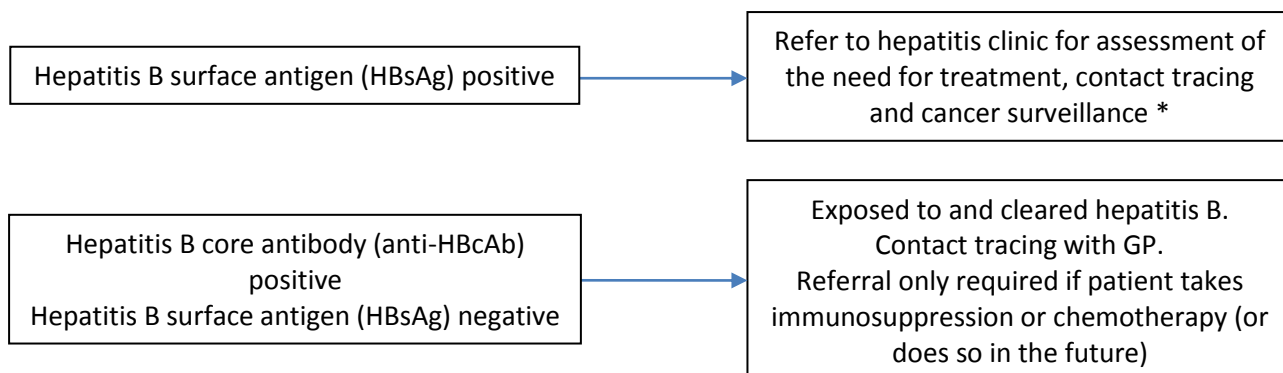
10 Abnormal liver imaging



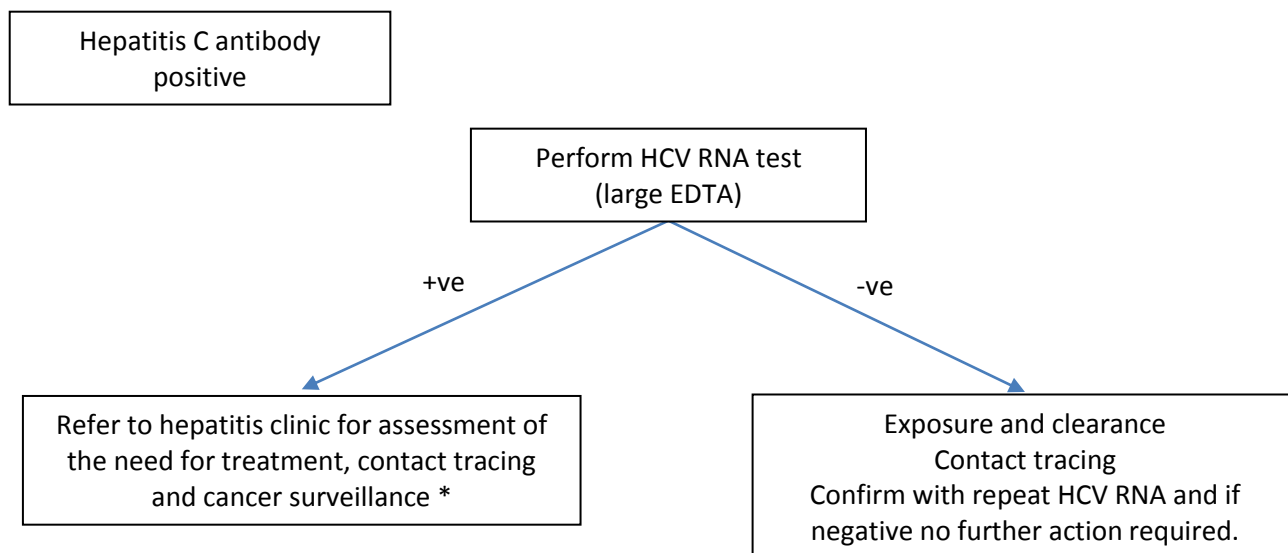
Hepatology

Division C

11 Hepatitis B



12 Hepatitis C



* **Pre-clinic workup:** (see T-Quest Groups)

For HBV and HCV: Chronic liver screen plus HIV and hepatitis A immunity serology

For HCV: HCV RNA and genotype (large EDTA tube)

For HBV: HBV DNA (large EDTA tube)

13 Referral pathways

URGENT REFERRAL	
Jaundice <40 yrs, tense ascites, ALT > 300 and/or ALP > 500, Suspected cirrhotic decompensation Jaundice >40 yrs, suspected liver cancer	E-referral to general hepatology clinic (non-viral) and mark URGENT 2WW pathway

ROUTINE REFERRAL – please review guidance	
Abnormal LFTs Suspected chronic liver disease Raised ferritin	E-referral to general hepatology clinic (non-viral)
Hep B or C new diagnosis	E-referral to viral hepatitis clinic
Benign abnormal liver imaging	Referral according to guidance
Fibroscan	E-referral via specific proforma

- [Addenbrookes Hepatology Webpage](#)
- Further information: <https://easternliver.net>

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Owning department:	Hepatology		
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