
Aspirin May Protect Against Liver Fibrosis



According to new research, aspirin is effective against liver fibrosis, especially in people who are at risk for chronic liver disease. The drug is already well-known for its cardiovascular and anti-inflammatory benefits. Gordon Jiang, MD, a gastroenterology fellow at the Beth Israel Deaconess Medical Center in Boston, revealed this latest development along with his colleagues in a scientific poster session at The Liver Meeting 2014.

Dr. Jiang and his colleagues conducted a population-based cross-sectional study of more than 14,000 adults. They found a consistent association between aspirin use and less frequent liver fibrosis. "Clinical equipoise is emerging that may justify prospective randomised trials of aspirin and, potentially, other antiplatelet drugs such as antifibrotic agents," the researchers proposed.

Jiang and his team drew on the National Health and Nutrition Examination Survey (NHANES) III to evaluate the association between aspirin, ibuprofen and liver fibrosis. Additional analysis was done in patients with viral hepatitis, heavy drinkers and patients with fatty liver disease to determine if the association between aspirin and fibrosis protection is stronger in high-risk patients.

The results showed that the use of aspirin was consistently associated with lower stages of liver fibrosis. However, no such link was found between ibuprofen and liver fibrosis.

In patients with and without chronic liver disease (hepatitis B or C infection, more than five alcoholic drinks per day or suspected non-alcoholic steatohepatitis), aspirin was found to be associated with lower stages of fibrosis. The same was not found for ibuprofen.

In patients with or at risk for liver disease, there was nearly a five-fold increase in the negative coefficient for the interaction between aspirin use and liver fibrosis. Yury Popov, MD, PhD, Assistant Professor of Medicine at Beth Israel Deaconess Medical Center, says that the findings suggest a protective effect of aspirin in patients with chronic liver disease.

The researchers speculate that the antiplatelet activity of aspirin may be accountable for its positive effects on fibrosis. However, the study was limited by its observational design and the data were limited to results after one month of drug use whereas protection against liver fibrosis would require long-term use.

Another study which was presented at the same meeting found that aspirin, in the long term, at the antiplatelet dose could reduce and prevent fibrosis in the mouse model.

Athan Kuliopulos, MD, PhD, Professor of Medicine at the Tufts University Sackler School of Biomedical Sciences in Boston, suggests that antiplatelet agents such as clopidogrel (Plavix), prasugrel (Effient) and others in the pipeline could have even stronger effect against liver fibrosis.

Source: Medscape

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