

## Diagnostic Algorithm

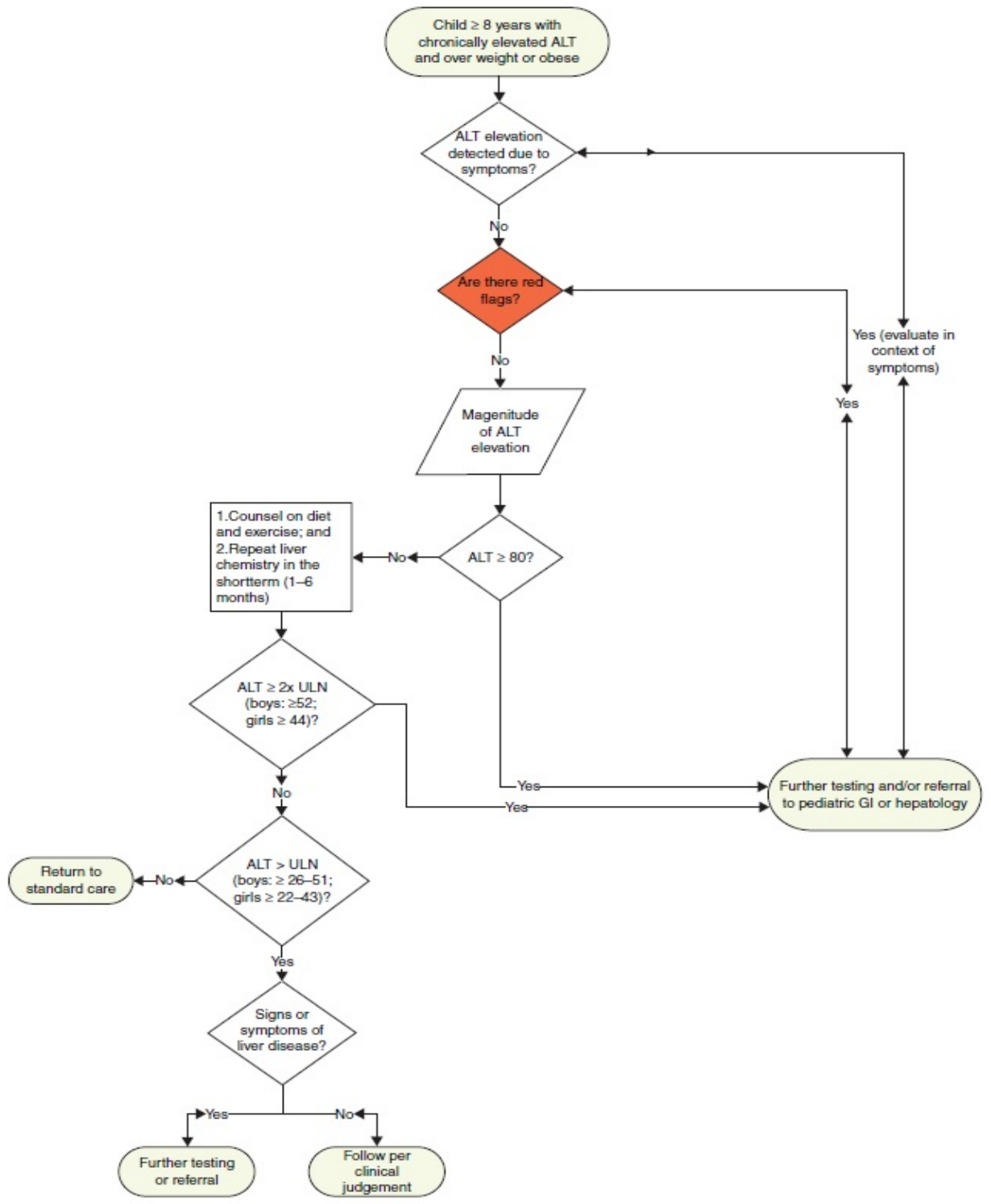
Pediatric GI

Non-Alcoholic Fatty Liver Disease

Suggested courses of action **that should be interpreted within the clinical scenario of individual patients.**

ALT: alanine aminotransferase;  
GI: gastrointestinal;  
NAFLD: nonalcoholic fatty liver disease; ULN: upper limit of normal.

An algorithm proposed by the expert committee on NAFLD (ECON) group.



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<p><b>Red Flags</b></p>	<ol style="list-style-type: none"> <li>1) Chronic fatigue.</li> <li>2) Gastrointestinal (GI) bleeding.</li> <li>3) Jaundice.</li> <li>4) Splenomegaly.</li> <li>5) Firm liver on examination.</li> <li>6) Enlarged left lobe of the liver.</li> <li>7) Low platelets.</li> <li>8) Low white blood cell count.</li> <li>9) Elevated direct (or conjugated) bilirubin.</li> <li>10) Elevated international normalized ratio (INR).</li> <li>11) Long history of elevated liver enzymes (&gt; 6 months).</li> </ol>
<p>Further testing to consider:</p>	<p><b>Screening labs:</b> Complete blood count (CBC) with differential, Comprehensive metabolic panel (CMP), conjugated bilirubin, GGT, international normalized ratio (INR), Lipid panel.</p> <p><b>Exclude infections:</b> (eg, Viral Hepatitis panel, EBV Titers, CMV Titers, HIV antibody)</p> <p><b>Exclude endocrine disorders:</b> (thyroid-stimulating hormone [TSH], free thyroxine [T4])</p> <p><b>Exclude autoimmune causes of ALT elevation:</b> (total IgA, total IgG and tissue transglutaminase antibody, antinuclear antibody, antismooth muscle antibody, anti-liver-kidney microsomal antibody)</p> <p><b>Exclude genetic causes of ALT:</b> (ceruloplasmin, alpha-1 antitrypsin phenotype)</p> <p><b>Imaging:</b> Abdominal ultrasound to rule out anatomical abnormalities or assess features of portal hypertension</p>