

Gastroenterology & Hepatology Advanced Practice Providers

#### 2020 Third Annual National Conference

November 19-21, 2020

Red Rock Hotel - Las Vegas, NV







# Obesity: Impact on Gastroenterology and Hepatology

April G. Morris, FNP

Hunter Holmes McGuire VA Medical Center

### **Disclosures**

All faculty and staff involved in the planning or presentation of continuing education activities provided by the Annenberg Center for Health Sciences at Eisenhower (ACHS) are required to disclose to the audience any real or apparent commercial financial affiliations related to the content of the presentation or enduring material. Full disclosure of all commercial relationships must be made in writing to the audience prior to the activity. Staff at the Annenberg Center for Health Sciences at Eisenhower and Gastroenterology and Hepatology Advanced Practice Providers have no relationships to disclose.

### **Disclosures**

### **April G. Morris, FNP**

**Speakers Bureau:** AbbVie, Clinical Area – HCV

Speakers Bureau: Gilead Sciences, Clinical Area – HCV

Speakers Bureau: Intercept Pharmaceuticals, Clinical Area – NASH

Consultant: AbbVie, Clinical Area – HCV

Consultant: Intercept, Clinical Area - NASH

## Obesity: Impact of GI/Hepatology

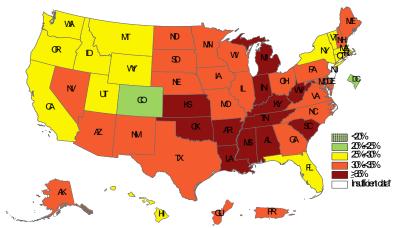
### Objectives:

- Prevalence and epidemiology of obesity
- Identifying GI disorders associated with obesity
- GI/Hepatology role in patients with obesity

### Prevalence of Obesity in the US



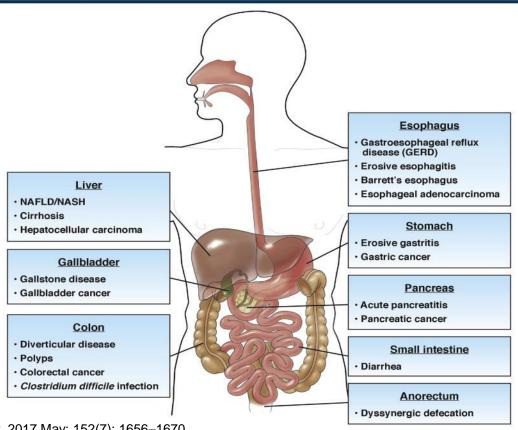
Prevalence of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2019



## Obesity (BMI ≥ 30) in the US

- Obesity has almost doubled over the past 30 years
- NAFLD is 4 times more prevalent in obese patients
- GERD-increased significantly in the past 20 years in parallel with increased prevalence of obesity
- Gallstone diseases-strong association with obesity
- Higher waist circumference = ↑ risk of colorectal cancer
- Obesity is associated with more severe acute pancreatitis

## GI/Hepatic Morbidity Associated with Obesity



Camilleri, M. et al. Gastroenterology. 2017 May; 152(7): 1656–1670.

### NAFLD in the US



**~24%** of Americans have NAFLD¹

**~6.5%** of Americans develop NASH⁴

Among the most common indications for liver transplantation in the US<sup>2</sup>

#2

most common cause of HCC in the US<sup>3</sup>

**\$103 billion**estimated annual direct costs of NAFLD<sup>2</sup>

- 1. Puri, P and Fuchs, M. Federal Practitioner, 2019.
- 2. Kwong, A, et al. OPTN/SRTR 2018 Annual Data Report: Liver
- 3. Younossi, et al. *Clin Gastroenterol and Hepatol* 2019;17:748–755
- 4. Younossi, ZM. Liver Transplantation, 2017.

Abbreviation:

HCC, hepatocellular carcinoma

### **GERD** and Obesity

- Leads to increased risk and management of
  - Erosive esophagitis
  - Barrett's esophagus
  - Esophageal adenocarcinoma

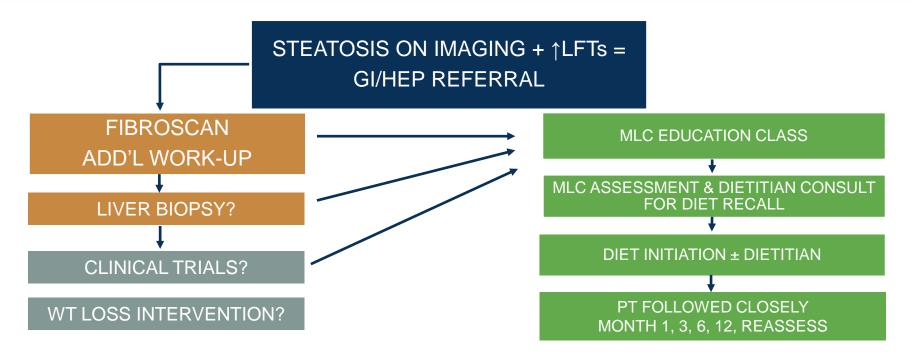
## Obesity: Impact on GI/Hepatology

#### GI/Hepatology Providers Have Taken Center Stage



Abbreviation: OSA = obstructive sleep apnea

## Obesity: Impact of GI/Hepatology (Example)



## Obesity: Impact of GI/Hepatology

- GI/Hepatology providers have the burden of:
  - Evaluating patients with obesity and abnormal LFTs to determine NAFL vs. NASH vs. something else?
  - Discussing lifestyle modifications in order to achieve wt. loss (with or without a dietitian) in obese patients can be time consuming
  - Staying up to date with current medications for DM, hyperlipidemia, hypertension, etc.
    - Which promote weight loss vs. wt gain?

## Obesity: Impact of GI/Hepatology

- Knowing when to send patients for wt loss procedures/surgeries
- Being aware that obesity increases the risk of several gastrointestinal disorders and cancers
  - Importance of screening and monitoring all patients



### Thank You!