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**A STUDY OF PREVALENCE OF MINIMAL SYSTEMIC ENCEPHALOPATHY IN
CIRRHOTICS WITHOUT OVERT ENCEPHALOPATHY IN A TERTIARY
HOSPITAL**

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OBJECTIVES

1. A study of prevalence of minimal systemic encephalopathy in cirrhotics without overt encephalopathy in a tertiary hospital.
2. To establish the diagnosis of minimal systemic encephalopathy
3. To find out the prevalence of minimal hepatic encephalopathy in cirrhotic patients
4. To assess the response to therapy in patients of minimal hepatic encephalopathy (MHE) using critical flicker frequency (CFF).

METHODOLOGY

112 patients of cirrhosis were evaluated. 36 patients were excluded. Remaining 76 asymptomatic patients meeting the eligibility criteria were enrolled in the study and screened for the presence of MHE using CFF. CFF were considered abnormal when the value was < 39 Hz and patients having the score < 39 Hz were diagnosed as having MHE.

RESULTS

59.2% patients had MHE. There was statistically significant difference in mean CFF values of 31 patients without MHE compared to 45 patients with MHE ($p < 0.0001$). Among the 40 patients with MHE who received therapy, mean CFF score before therapy was 37 ± 0.90 Hz and same after therapy was 38.4 ± 1.44 Hz. There was a statistically significant difference in CFF score post therapy ($p < 0.0001$)

CONCLUSION

The prevalence of MHE was 59% in cirrhotic patients using CFF cut off value of 39 Hz. After lactulose therapy 55% patients had improvement in MHE. It is recommended that all cirrhotics without overt hepatic encephalopathy should be screened for MHE. CFF estimate is a useful tool in diagnosis of MHE and for monitoring the response to therapy.