

Non-Alcoholic Fatty Liver Disease Epidemic in Pakistan: Status, Challenges and way forward

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Pakistan is a developing country with limited resources facing a huge quadruple disease burden. Chronic liver disease is on the rise with serious consequences, for the patient, family and health delivery system in the country. Rise in the incidence of non-communicable diseases is related to lifestyle with lack of exercise, and increased use of calorie dense foods. With rise in incidence of metabolic syndrome and obesity, incidence of fatty liver is rapidly increasing in the population. It leads to chronic liver disease including cirrhosis and hepatocellular carcinoma(1, 2). This has far reaching adverse consequences for patients as well as the health care delivery system that has scarce resources to face this huge challenge.

Currently, fatty liver disease is present in the country in epidemic proportion (3,4,5). There is unfortunately, lack of awareness with regards to its high prevalence and serious adverse health related consequences, among patients as well as health care providers. There is a lack of clear cut government policy to face this epidemic. Medical colleges are not giving enough emphasis when educating and training health care providers in realizing the seriousness of this epidemic nor its serious long term adverse consequences. Our health delivery system is geared towards treating diseases when they are advanced, with lack of emphasis on prevention and health maintenance. A strong functional health care delivery system in general and primary health care in particular, are lacking(6). There is limited intervention that is available once liver cirrhosis sets in. With diet control, exercise and weight reduction, fatty liver epidemic can be controlled in the country as part of overall management of metabolic syndrome.

Changes facing us in dealing with fatty liver disease epidemic are several. We will need clear cut government policy and commitment to deal with this epidemic. A strong emphasis in medical colleges in educating and training healthcare providers is the need of the hour. A proactive preventive approach will have to be taken by all stakeholders in controlling metabolic syndrome through diet control, exercise and weight reduction. Screening,

early diagnosis and treatment for diabetes, hypertension, and obesity will be required.

Media can play a very constructive role by educating and raising awareness among the general population as well as healthcare providers. Print and electronic media can play a positive role by publishing information on the subject. Social media including Facebook and WhatsApp can be utilized to raise awareness about fatty liver disease among the general population.

National organizations will have to play a role in controlling fatty liver disease. They can hold scientific events for healthcare providers and health awareness programs for the general public. They can mobilize public opinion to pressurize government and regulatory bodies to develop policy on controlling fatty liver disease and also commit resources for this purpose. A model of public-private partnership is needed to control rising prevalence of fatty liver disease. Government can provide regulatory control while the private sector can invest with appropriate guaranteed returns on investment (7).

Academia has a role to play in identifying issues related to fatty liver disease (8). Research is needed into models that work in local conditions. Barriers to diet control and exercise need to be identified and addressed. Resources will be required to address the rising prevalence of fatty liver disease in the country. In view of limited resources at hand, efficiency will have to be built in with development and implementation of models that offer better returns on investment.

It's high time that focused efforts are made by all stakeholders in combating the growing burden of fatty liver disease and its complications. Unless concerted measures are taken now, we will be faced with an overwhelming disease burden that our health care delivery system with limited resources will be unable to control.

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