





Update on The Global NASH Council

Zobair M Younossi MD, MPH Chair, the Global NASH Council



The Global NASH/MASH Council Background



- The Global NASH and Liver Councils (GNC and GLC) were formed in 2014 to bring together experts from around the world to discuss, collaborate and contribute to the field of NASH/MASH and Other Liver Diseases.
- The GNC/GLC has grown organically and has 150 members from 44 countries.
- Alongside a network of leading researchers and clinical practitioners, the council has developed unique resources including the Global NASH Registry and The Global Liver Registry
- The GNC/GLC have published dozens of scientific articles, including many of the seminal publications in the field
- The GNC/GLC regularly convenes members at AASLD and EASL congresses and may expand to other society meetings (APASL, ALEH and others)

1	Argentina	24	Malaysia
2	Armenia	25	Mexico
3	Australia	26	Moldova
4	Austria	27	Mongolia
5	Belgium	28	Pakistan
6	Brazil	29	Philippines
7	Canada	30	Portugal
8	Chile	31	Qatar
9	China	32	Russia
10	Cuba	33	South Korea
11	Denmark	34	Singapore
12	Egypt	35	South Africa
13	France	36	Spain
14	Germany	37	Sweden
15	Greece	38	Switzerland
16	Hong Kong	39	Taiwan
17	India	40	Thailand
18	Indonesia	41	Turkey
19	Ireland	42	Vietnam
20	Israel	43	UK
21	Italy	44	USA
22	Japan		
23	Saudi Arabia		

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The Global NASH and Liver Councils



Our ambition for the GNC/GLC

 Recognised leader within the liver health and global health communities as the preeminent global think-tank for steatotic liver disease (SLD) and other important LDs

Vision, Mission and Values

- Our Vision: A world where steatotic liver disease (previously known as fatty liver disease) and other common liver diseases are rare and treatment and care for those with the disease is timely
- Our Mission: Support experts in different field (hepatology, gastroenterology, diabetology, primary care and nutrition) to advance knowledge and the uptake of solutions to understand, prevent, manage and treat SLD and other common liver diseases
- **Øur** Values:
 - Leadership we're helping to set the global agenda
 - Collaboration we're building a global community by collaborating with all stakeholders
 - Person-Centred we're addressing questions that matter to patients and affected communities
 - Impact focused we're focused on biggest challenges and opportunities



GNC/GLC Membership



The Global NASH and Liver Councils

Committees leadership and members



Leadership Steering Committee: Zobair Younossi (GNC Chair), Jeff Lazarus, Shira Zelber-Sagi , Lynn Gerber, Saleh Alqahtani, Alina Allen, Ken Cusi, Paula Macedo, Laurent Castera, Leyla DeAvila, Henry L, Pegah Golabi, Fatema Nader (PD) and Henry Mark (PD)

Lifestyle Committee Co-Chairs: Shira Zelber-Sagi and Lynn Gerber (PD: Leyla DeAvila)

Members: Dr's Zobair Younossi, Jillian Price, Dana Ivancovsky, Saleh Alqahtani, Ali Weinstein, Paola Andrenacci, Manisha Verma, Carina Kugelmas, Suzi Gerber, Mohamed El-Kassas, CJ Liu, Manirath Srishord, Hirokazu Takahashi, Fatema Nader, Mani Srishord, Andrei Racila

Clinical & Patient Outcomes Committee Co-Chair:s Zobair Younossi and Saleh Alqahtani (PD: Henry L)

Members: Patrizia Burra, Robert Wong, Janus Ong, Marlen Fernandez, Ashwani Singal, Jorn Schattenberg, Sven Franque, Stepanova M, Patrizia Carrieri, Jeff Lazarus, Manisha Verma

Policy, Public Health & Health Disparity Committee Co-Chairs: Zobair Younossi and Jeffrey Lazarus (PD: Henry Mark) Members: Nadage Gunn, Claudia Pinto Marques Souza Oliveira, Vincent Wong, Saleh Alqahtani, Alexander Krag, Shira Zelber, Sagi and Henry Mark

Hepatoløgy and Non-Hepatology Interface Committee Co-Chairs: Ken Cusi and Paula Macedo (PD: Pegah Golabi) Members: Scott Isaacs, Brian Lam, Giulio Marchesini, Amila Gestadelli, James Kim, Jay Shubrook, Gerald Shulman Paul Brennan, Zobair Younossi (Ad-hoc)

<u>NIT Committee Co-Chairs</u>: Alina Allen and Laurent Castera (PD: Pegah Golabi)

Members: Mazen Noureddine, Marcelo Kugelmas, Naim Alkhoury, Vincent Wong, Jorn Schattenberg, Yusuf Yilmaz and Zobair Younossi (Ad-Hoc)

Viral Hepatitis Committee Co-Chairs: Maria Buti MD and George Papatheodoridis(PD: Henry L)

Members: Wah Kheong Chan, Mohammad El Kassas, Stuart Gordon, Tatyana Kushner, Vasily Isakov, Ira Jacobson, Ming Lung Yu and Zobair Younossi (Ad-Hoc)

Cholestatic Liver Disease Committee Co-Chairs: Co-Chair: Andeas Kremer and Z Younossi (PD: Pegah Golabi)

Mark Swain, Dave Jones, Michael Trauner, Elizabeth Carey, Nikolaos Pyrsopoulos

Alcoholic Liver Disease Committee Co-Chairs: Ashwani Singal, Zobair Younossi PD: Fatema Nader)

Members: Juan Pablo Arab, Javier Crespo, <u>Aleksander Krag</u>, Mario Pessoa, Maja Thiele, <u>Robert Wong, Yusuf Yilmaz</u>

Patient Advisory Committee Co-Chaires: <u>Nikos Dedes</u> and <u>Diane Langenbacher</u>

Danjuma Adda, Michael Betel (FLA), Wayne Eskridge (FLF), Achim Kautz, Dee Lee, Vicky Mooney, Peter Schwarz, Lorena Stoopen, Paulette Trevana, ALF representative, Brian Lam, <u>Zobair Younossi</u> (Ad Hoc)



The Global NASH/MASH Council *Formal Endorsements and Collaborations*



EASL Endorsed





SOCIÉTÉ FRANÇAISE D'HÉPATOLOGIE

Association reconnue d'utilité publique

AEEH Asociación Española para el Estudio del Hígado





Center for Outcomes Research in Liver Disease



The Global Registry



The Global NASH and Liver Registries



Purpose of Global Registries

- Real world data regarding the clinical and PRO outcomes of important liver diseases are not available.
- The Global NASH and Liver Registries were established by COR-LD as a global collaboration effort to obtain clinical and PRO data for important liver diseases
- Historical: HBV, HCV, HDV and NAFLD/MASLD
- Added ALD and PBC as new enrollment criteria
- The Global Registry requires e-data collection after informed consent (IRB approved)
- The Global Liver/NASH Registries currently have 28 active sites
- These sites represent all the continents
- The intention is to compare liver diseases including MASLD, Met-ALD and others from different regions of the world using the Global Registry data



The Global Registries

Types of Liver Disease



Population:

Up to 100,000 subjects will be enrolled into the registries with 10 years of follow up:

- 1. NAFLD/MASLD: NAFLD/MASLD or NASH/MASH subjects with an established diagnosis by historical liver biopsy or accepted imaging technique (ultrasound, CT, MRI, TE)
- 2. Chronic HCV with viremia (regardless of treatment)
- 3. Chronic HBV (who are carriers of HBsAg) (regardless of treatment)
- 4. Chronic HDV (regardless of treatment)
- 5. PBC: 1) ALP > 2 x ULN or GGT > 5 x ULN and 2) AMA > 1:40. Other histologic evidence of PBC according to the guidelines are also accepted.
- 6. ALD: 1) Meet criteria for AUD 2) Evidence of any liver disease (elevated aminotransferases outside the laboratory range, fatty liver SH or cirrhosis) by clinical, laboratory, radiologic or biopsy proven can be considered to have ALD.

Data Collection:

- Clinical and Laboratory data (For GNR: Clinical 153, Lab 30)
- Clinical Outcomes and Patient Reported Outcomes
- Liver stiffness, pathology and radiology (if available)
- Baseline and annual follow ups



The Global Registries

Primary Inclusion/Exclusion Criteria



Inclusion:

1) Subjects must be at least 18 years or older to participate 2) Must be able to read in order to complete questionnaires in their local language 3) Must have diagnosis of HCV, HBV, HDV, NAFLD/MASLD/NASH/MASH, PBC or ALD

Exclusion:

1) All other causes of liver diseases 2) Pregnancy 3) Inability to provide consent

Study Procedures

- IRB approval 1.
- 2. Review inclusion/exclusion and obtain consent
- 3. **4**. Collect and complete basic clinical information for entry into registry database
- **PRO's will be administered** at baseline and repeated annually up to 10 years (optional)
 - HCV: complete 4 questionnaires: CLDQ-HCV, FACIT-F, WPAI, a Short Form Health Disparity questionnaire
 - HBV and HDV: complete 4 questionnaires: CLDQ-HBV, FACIT-F, WPAI, and a Short Form Health Disparity questionnaire
 - **NAFLD/MASLD**: complete 6 questionnaires: CLDQ-NAFLD, FACIT-F, WPAI, Activity Questionnaire, Nutrition Questionnaire and Short Form of Health Insecurity Questionnaire
 - PBC: complete 6 questionnaires: CLDQ-PBC, FACIT-F, WPAI, Short Form of Health Disparity questionnaire, PBC-40 and 5D-itch
 - ALD: complete 5 questionnaires (CLDQ or CLDQ-ALD (being developed), FACIT-F, WPAI, Short Form of Health Disparity questionnaire and AUDIT-C questionnaire.



The Global Registries E-Data Collection



SRP-15-0002 VISIT IDEII	tifiers				
Study	PRO Liver Registry - PBC Patients	Subject ID	GRP-13-0002	Visit Type	Initial
RP-13-0002 Anthropo	metric Data				
Please provide your mo	st recent Weight (lb) :	Unk	My weight in the last 10 years has been		~
Please provide your Hei	ight (inch) :	Unk			
Please provide your mo:	st recent Waist measurement of belt size (inch) :	O Unk	DMI	Not enou	igh data ③
RP-13-0002 Current M	redications and Vaccinations				
ſ	Please list any current medication you are taking :			N	D.
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For Sites without Reliable Internet, Spreadsheet Data Entry

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- The spreadsheet is designed by GNC and will be uploaded periodically
- Each site will receive a DUA to make sure that sites are compliant with European rules for data



The Global Registries Enrollement





Dr. Ming-Lung Yu (Taiwan) N=4486 Brian Lam (USA) N=3616 Dr. Yusuf Yilmaz (Turkey) N=2503 Dr. Marlen I. Fernandez (Cuba) N=825 Dr. Mohamed El Kassas (Egypt) 798 Dr. Gamal Esmat (Egypt) N=600 Dr. Vasily A. Isakov (Russia) N=500 Dr. Vincent Wong (Hong Kong) N=322 Dr. Khalid Alswat (Saudi Arabia) N=278 Dr. Yuichiro Eguchi (Japan) N=240 Dr. Çağlayan Keklikkıran (Turkey) N=226 Dr. Nahum Méndez-Sánchez (Mexico) N=210 Dr. Ajay Duseja (India) N=203 Dr. Manuel Romero-Gómez (Spain) N=201 Dr. Maria Buti Ferret (Spain) N=178 Dr. George V. Papatheodoridis (Greece) N=159 Dr. Saeed Hamid (Pakistan) N=142 Dr. Wah-Kheong Chan (Malaysia) N=124 Dr. Jacob George (Australia) N=88 Dr. Stuart Gordon (USA) N=80



Global Registry in January 2024



Country	N all	%	N НерВ	N НерС	N NAFLD
Australia	106	0.68	11	0	95
China	47	0.30	3	0	44
Cuba	842	5.38	107	339	396
Egypt	1116	7.13	47	1038	31
Greece	159	1.02	66	52	41
Hong Kong	322	2.06	0	0	322
India	176	1.13	18	24	134
Italy	74	0.47	0	0	74
Japan	239	1.53	20	0	219
Malaysia	124	0.79	70	4	50
Mexico	161	1.03	0	29	132
Pakistan	132	0.84	49	26	57
Russia	489	3.13	16	29	444
Saudi Arabia	293	1.87	238	0	55
Spain	378	2.42	125	60	193
Taiwan	4498	28.76	1768	1808	922
Turkey	2760	17.64	856	45	1859
USA	3726	23.82	187	684	2855
Total	15642		3581	4138	7923



Center for Outcomes Research in Liver Disease



Global Surveys and Global Guideline Unification



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The Global NASH/MASH Council

Global Stigma Study

NAFLD <u>patients</u> and history of stigmatization/discrimination

- GNC members created 2 surveys (68-item patient and 41-item provider survey)
- **1976 NAFLD patients [21 countries) and 825 MDs** completed the survey The most common terminology used was fatty liver and least common was MAFLD
- Overall, 25.6% of patients reported stigma related to overweight/obesity and 8.3% reported to NAFLD.
- Among providers, 40% believed "fatty" is stigmatizing, while 35% believed that the term "nonalcoholic" is stigmatizing,



Younossi Z et J of Hepatology 2023

Providers and perception of diagnostic terms

 Overall, FLD was perceived stigmatizing by 32.3% of providers







The Global NASH/MASH Council Global Stigma Study Liver Disease Burden and HRQoL





- Of N=1976 NAFLD patients who completed the Stigma questionnaire, n=637 also completed the CLDQ-NAFLD
- Subjects who reported stigmatization due to NAFLD had substantially lower CLDQ-NAFLD/NASH scores (all p<0.0001).
- In MVA, history of stigmatization due to NAFLD was the strongest independent predictor of lower HRQL (all p<0.01).







(D) I feel like I am partially to blame for my liver disease.



Younossi Z et al on behalf of GNC, AASLD 2023

THE GLOBAL

Recent Registry Presentations and **Publications**

THE GLOBAL

Manuscripts (2018-2022)

- The Impact of COVID-19 Pandemic and Patients with Chronic Liver Disease: Results from the Global Liver Registry. Hepatology Communications 2022
- Global NASH Council. Effects of Alcohol Consumption and Metabolic Syndrome on Mortality in Patients With Nonalcoholic and Alcohol-Related Fatty Liver Disease. Clin Gastroenterol Hepatol. 2019 Jul;17(8):1625-1633.
- Global Nonalcoholic Steatohepatitis Council. Nonalcoholic
 Steatohepatitis Is the Fastest Growing Cause of Hepatocellular
 Carcinoma in Liver Transplant Candidates. Clin Gastroenterol
 Hepatol. 2019 Mar;17(4):748-755.e3.doi: 10.1016/j.cgh.2018.05.057.
 Epub 2018 Jun 14. PubMed PMID: 29908364.

Presentations 2022

- AASLD 2022 Poster Presentation: Depression and Emotional Distress in Patients with Chronic Liver Disease (CLD): Data from the Global Liver Registry™ (GLR™)
- AASLD 2022: Poster Presentation: Clinical and Patient-Reported Outcome (PRO) Profile of Patients with Hepatitis B Viral (HBV) Infection from the Global Liver Registry™ (GLR™)
- EASL 2022 Poster Presentation: Negative Impact of COVID-19 Infection Related to Life Disruption Events and Health Scores on Patients with Chronic Liver Disease.
- EASL 2022 Poster Presentation: Clinical Presentation of Lean Nonalcoholic Fatty Liver Disease Across the World: Data from the Global NASH Registry.

Presentations 2023

- EASL 2023: Prevalence and Predictors of Clinically Significant Pruritus in Patients with Nonalcoholic Fatty Liver Disease (NAFLD): Data from the Global NASH Registry™ (GNR™)
- DDW 2023: CLINICALLY SIGNIFICANT PRURITUS IN PATIENTS WITH CHRONIC LIVER DISEASE (CLD): DATAFROM THE GLOBAL LIVER REGISTRY ™ (GLR™)

Presentations 2021

- DDW 2021 Poster Presentation with Post Distinction: Clinical Presentation and Patient-Reported Outcomes in Patients with Chronic Viral Hepatitis: Data from the Global Liver Registry
- DDW 2021 Oral Presentation: Clinical Presentation of Lean NAFLD Across the World: Data from the Global NASH Registry
- EASL 2021: The Impact of COVID 19 Pandemic on Patients with Chronic Liver Disease (CLD): Data from the Global Liver Registry
- AASLD 2021: COVID-19 PANDEMIC AND CHRONIC LIVER DISEASE (CLD), American Association for the Study of Liver Diseases. Virtual, November 2021
- AASLD 2021: FATIGUE AND NON-ALCOHOLIC FATTY LIVER DISEASE: DATA FROM THE GLOBAL NASH REGISTRY, American Association for the Study of Liver Diseases. Virtual, November 2021.
- Presentations 2020
- AASLD 2020: Clinical and Patient Reported Outcomes Data of NAFLD: Longitudinal Data from the Global NASH Registry.
- AASLD 2020: The Impact of Chrnoic Hepatitis B on PRO's from the Global Liver Registry
- AASLD 2020: Patient Reported Outcomes in Patients with Chronic Hepatitis C: Data from the Global Liver Registry.
- Presentations 2019
- AASLD 2019: Differences in the Clinical Profile of the Most Common Causes of Chronic Liver Disease (CLD) Across the World: Data from the Global Liver Registry.
- AASLD 2019:evere Impairment of PROs in Patients with Chronic Hepatitis C Virus (HCV) Infection Seen in Real-World Practices Across the World: Data from the Global Liver Registry.
- AASLD 2019: Clinical and Patient-Reported Outcomes Data for Patients with NAFLD and NASH Across the World: Data From the Global NASH Registry.
- AASLD 2019:Clinical and PROs in Patients with Chronic Hepatitis B Virus (HBV) Infection Seen in Real-World Practices Across the World: Data From the Global Liver Registry.



Enhancing the Global Implementation of MASLD Guidelines



- Over the past decade numerous guidelines have been published related to MASLD/NAFLD and MASH/NASH
- Guidelines have been created by national and regional liver societies (e.g., AASLD, EASL, ALEH, APASL), GI societies (e.g., AGA) and non-GI-Liver Societies (e.g., AACE, ADA, EASD, AHA).
- There are a few challenges:
 - **1.** Implementation of guidelines are always challenging
 - 2. While these guidelines are based on a similar foundation, there are certain differences in their recommendations that can potentially cause confusion in the field which may negatively impact adherence to guidance and possibly worse outcomes
- These discrepancies are likely contributing to ineffective implementation of existing guidelines and is counter-productive for raising awareness
- There is a pressing need to help simplify the guidelines both across subspecialities as well as across different regions of the world
- Given the global nature of GNC, we are best positioned to address these issues



Focus and scope



- This project will engage a large group of expert from around the world in a consensus process to consider clinically relevant issues in published MASLD/MASH guidelines
- Areas of focus will include any areas of discrepancy in the following
 - Practical approaches to risk stratification based on clinical setting (e.g. primary care, GI, endocrinology), region and resource constraints (e.g., availability and validity of different NITs)
 - **Standard approaches for lifestyle interventions as first line treatment**
 - **Current and future medical treatment options**
 - i. Drugs that target risks associated with MASLD/MASH or NAFLD/NASH ii. Drugs that specifically target the liver
 - How to use NITs to monitor patients on treatment
- Understand regional differences that must be adopted based on the reality of practice
- Develop country/region specific strategies to optimize guideline implementation and increase awareness



Project aims



- The overall aim is to build consensus within the field globally, in part by addressing areas of divergence / disagreement in the existing guidelines
- Our goal is to contribute towards streamlining and simplifying guidelines and making them practically relevant
- Our goal is to understand different realities based on access to care/NIT and cultural differences in life style
- Overtime, we hope the outcomes of this project will **enhance the effective implementation** of guidelines leading to better outcomes for people living with MASLD / MASH

Importantly, this work does not aim to replicate or replace existing guidelines, but to support their uptake and use



Steering Committee Members



Engagement: The entire membership of the Global NASH Council

1. Zobair Younossi (GNC-US Hepatology and Chair)	16. Janus Ong (GNC-Philippines Hepatology)
2. Alina Allen (GNC-US hepatology)	17. Yuichiro Eguchi (GNC-Japan Hepatology)
3. Naim AL Khoury (GNC-US Hepatology)	18. Mário Guimarães Pessoa (GNC-Latin America
4. Ken Cusi (GNC-US Endocrinology)	Hepatology)
5. Michael Roden (GNC-Europe Endocrinology)	19. Claudia Pinto Oliveira (GNC-Latin America Hepatology)
6. Scott Isaacs (GNC-US Endocrinology)	20. Stuart Robert (GNC-Australia Hepatology)
7. Shira Zelber-Sagi (GNC Nutrition Expert)	21. Jian-Gao Fan (GNC- China Hepatology)
8. Lynn Gerber (GNC, Exercise and Activity Expert)	22. Jeffrey Lazarus (GNC-Global and Policy)
9. Laurent Castera (GNC-Europe Hepatology)	23. Achim Kautz (GNC- Patient Advocacy)
10. Jorn Schattenberg (GNC-Europe Hepatology)	24. Manuel Romero Gomez (GNC-EU Hepatology)
11. Vincent Wong (GNC-Hong Kong Hepatology)	25. Wendy Spearman (South Africa Hepatology)
12. Saleh AlQahtani (GNC-MENA- Saudi Arabia	26. Amalia Gastaldelli (GNC-EU Endocrinology)
Hepatology)	27. Patrizia Burra(GNC-EU Hepatology)
13. Yusuf Yilmaz (GNC-MENA-Turkey Hepatology)	28. Marlen Fernandez (GNC-Cuba Hepatology)
14. Mohammed El-Kassas (GNC-MENA-Egypt Hepatology)	29. Frank Tacke (GNC-EU Hepatology)
15. Ajay Duseja (GNC-India Hepatology)	30. Jay H Shubrook (GNC-US Primary Care)

Program Directors

A score team of program directors will provide support to the project: Fatema Nader, Linda Henry, Pegah Golabi, Dana Ivancovsky, Layla de Avila, Henry Mark



High-level project timeline







Center for Outcomes Research in Liver Disease



Quality of Life and PROs



Service Capabilities CORLD, GNC and GLC PRO and HRQL



 COR-LD has developed and validated 6 reliable health related quality of life (HRQL) surveys:

1. CLDQ

- 2. CLDQ-HBV
- 3. CLDQ-HCV
- 4. CLDQ-NAFLD-NASH
- 5. CLDQ-PSC
- 6. CLDQ-PBC



 Industry sponsored clinical trials uses validated instruments to assess PROs in patients with liver disease and CLDQ questionnaires have been extensively used and translated as it is the most reliable tool to detect changes in HRQL



Service Capabilities CORLD, GNC and GLC Statistical Analysis



- Provide statistical expertise and support to clinical, laboratory, and outcomes studies throughout the research lifecycle. Including the preparation of proposals, protocol development, and publications/presentations.
- Provides statistical data analysis for epidemiology and public health research projects.
- Contribute to and co-author peer-reviewed articles independently and/or in coordination with the lead author/physician.
- Prepare and review reports. Contribute to the statistical methods section and verify for completeness and consistency for reports.

CORLD Manuscripts and Presentations Related to PROs in Clinical Trials (N=151)



1: Younossi ZM, Guyatt G. Quality-of-life assessments and chronic liver disease Am J Gastroenterol. 1998 Jul;93(7):1037-41. doi:

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Center for Outcomes Research in Liver Disease



Large Database Analysis



Service Capabilities CORLD, GNC and GLC Large Database Analysis



Medicare

- Demographics, Total Number of Visits, Total Charge, Average Charge, LOS, Mortality, Comorbidity
- NIS
 - Inpatient care database; represents 20% stratified sample of US hospitals and 8 million annual admissions
- SEER
 - Cancer incidence and survival in US; data collected from 17 population based cancer registries covering 28% of the population

NHANES

Health and nutritional status of adults and children in the US; demographic, socioeconomic, dietary, and health related questions

MEPS

- Households and insurance status; use of medical services, charges and sources of payments, access to care, satisfaction with care
- Nationwide Readmissions Database (NRD)
- National Vital Statistics System (NVSS)
- SRTR (Scientific Registry of Transplant Recipients)



National Health and Nutrition Examination Survey (NHANES)

- Conducted by the National Center for Health Statistics, CDC.
- Reported biannually.
- Designed to collect information about the health and diet of people in the United States.
- Includes questionnaires, physical exam, lab work, other tests (hepatic U/S, vision).









National Health and Nutrition Examination Survey, 2005-2006





U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention National Center for Health Statistics



National Health and Nutrition Examination Survey (NHANES)



Are There Differences Between Non-alcoholic Fatty Liver Disease (NAFLD) and Metabolic Associated Fatty Liver Disease (MAFLD)?



NHANES III participants (N=12,878) were 43.1 years old; 49.5% male; 20.3% with FLD, 16.5% with NAFLD, and 18.1% with MAFLD.

NHANES 2017-2018 participants (N=4,328) were 48.0 years old; 49.1% male; 36.8% with FLD; 34.2% with NAFLD and 36.3% with MAFLD.

- Excellent concordance was noted between MAFLD and NAFLD diagnosis in both datasets.
- Except for components of each definition (i.e. alcohol use for MAFLD), no other major differences in clinical characteristics were noted.
- In addition to the stage of fibrosis, insulin resistance was a predictor of liver mortality in NAFLD and alcoholic liver disease was a predictor of mortality in MAFLD.

Conclusion: MAFLD and NAFLD have similar clinical profiles and long-term outcomes. The increased liver-related mortality among MAFLD is primarily driven by alcoholic liver disease.

Younossi, et al. Hepatology.

Poor Awareness of Liver Disease Among Adults with Nonalcoholic Fatty Liver Disease in the United States



Alqahtani, et al. Hepatol Commun, 2021.



Sarcopenia, Healthy Living and Mortality in Patients with Chronic Liver Diseases



Van Dongen, et al. Hepatol Commun, 2022.



Contribution of Sarcopenia and Physical Inactivity to Mortality in People with Non-Alcoholic Fatty Liver Disease



Physical inactivity is associated with sarcopenia and sarcopenia is associated with increased mortality among people with NAFLD

Golabi, et al.

Hazard Ratios (HR) with adjustments of age, sex, race, sociodemographic, health behaviors and comorbidities



National Health and Nutrition Examination Survey (NHANES)



- Food Insecurity, Household Income, and Education Level Substantially Increase the Risk of Having NAFLD and Advanced Fibrosis Among Adolescent Children in the United States (submitted to Journal of Hepatology)
 - Nonalcoholic fatty liver disease (NAFLD) and associated mortality in individuals with type 2 diabetes, pre-diabetes, metabolically unhealthy, and metabolically healthy individuals in the United States. (2023) Metabolism.
 - Vigorous physical activity provides protection against all-cause deaths among adults patients with nonalcoholic fatty liver disease (NAFLD). (2023) Alimentary Pharmacology & Therapeutics.
- Sarcopenia Among Patients with Nonalcoholic Fatty Liver Disease (NAFLD) Is Associated With Advanced Fibrosis. (2023) Clinical Gastroenterology and Hepatology.
- The impact of fatigue on mortality of patients with non-alcoholic fatty liver disease: Data from National Health and nutrition examination survey 2005–2010

- Prevalence of high and moderate risk nonalcoholic fatty liver disease among adults in the United States, 1999–2016. (2022) Clinical Gastroenterology and Hepatology
- Are there outcome differences between NAFLD and metabolic-associated fatty liver disease? (2022). Hepatology.
- Contribution of sarcopenia and physical inactivity to mortality in people with non-alcoholic fatty liver disease. (2020) JHEP Reports.
- Mortality risk detected by atherosclerotic cardiovascular disease score in patients with nonalcoholic fatty liver disease. (2019) Hepatology communications.
- The impact of modifiable risk factors on the long-term outcomes of non-alcoholic fatty liver disease. (2020) Alimentary pharmacology & therapeutics.
- Patients with lean nonalcoholic fatty liver disease are metabolically abnormal and have a higher risk for mortality. (2019) Clinical Diabetes.

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THE GLOBAL

from 1990 to 2019.

Global Burden of Diseases, Injuries, and Risk Factors Study (GBD)



Institute for Health Metrics and **Evaluation (IHME)** annually update GBD study to serve as a global public good. https://www.healthdata.org/g bd/2019 **GBD** provides an assessment of cause-specific, incidence, morbidity (DALYs) and mortality for 369 causes in 204 countries and territories (21 GBD regions)

21 GBD Regions



The world is divided, for administrative and data analysis purposes, into 21 GBD Regions according to epidemiological similarities and geographical proximity

Global Burden of Diseases, Injuries, and Risk Factors Study (GBD)



The Burden of Non-alcoholic Fatty Liver Disease (NAFLD) is Rapidly Growing in Every Region of the World from 1990 to 2019



Paik, et al. Hepatol Commun.

HEPATOLOGY COMMUNICATIONS The Burden of Nonalcoholic Fatty Liver Disease (NAFLD) in Asia, Middle East and North Africa (MENA): Data from Global Burden of Disease 2009-2019

Changes in Incidence Rate of Liver Complications due to NAFLD (LC-NAFLD) between 2009 and 2019: Data From Global Burden of Disease



Pegah Golabi, James M. Paik, Saleh AlQahtani, Youssef Younossi, Gabriela Tuncer, Zobair M. Younossi

- Globally in 2019, there were 0.17 million incident cases and 168,959 deaths of LC-NAFLD.
- · Of the global incidence and death for LC-NAFLD in 2019, 48.3% and 46.2% occurred in Asia, while 8.9% and 8.6% in MENA
- Between 2009 and 2019, the pattern of change for incidence rate of LC-NAFLD shows a worsening trend (Annual percent change >0%) in most Asia (31 out of 34 countries) and MENA countries (18 out of 21 countries)

Growing Burden of Disability Related to Chronic Liver Diseases (CLD) in the United States: Data from Global Burden of Disease 2007-2017



The CLD-related burden is increasing in the majority of US states with an unprecedented rate.

Paik, et al. Hepatol Commun.

(+9.2%) in age-standardized DALY rates.

 California, Texas and Florida had the highest DALYs; however, the highest CLD-DALY rates per 100,000 population were seen in New Mexico, District of Columbia





Global Burden of Diseases, Injuries, and Risk Factors Study (GBD)



- The burden of nonalcoholic fatty liver disease (NAFLD) is rapidly growing in every region of the world from 1990 to 2019. (2023) Hepatology Communications.
- Nonalcoholic fatty liver disease mortality may not be decreasing: A need for careful interpretation of GBD 2019 estimates of liver deaths. (2023) Cell Metabolism.
- Global burden of NAFLD and chronic liver disease among adolescents and young adults. (2022)
 Hepatology.
- Dietary risks for liver mortality in NAFLD: global burden of disease data. (2022) Hepatology Communications.
- Burden of non-alcoholic fatty liver disease in Asia, the Middle East and North Africa: Data from Global Burden of Disease 2009-2019. (2021) Journal of Hepatology.
- Recent trends in the global burden of hepatitis B virus: 2007–2017. (2021) Gastroenterology.
- The growing burden of disability related to nonalcoholic fatty liver disease: data from the global burden of disease 2007-2017. (2020) Hepatology communications.
- Changes in the global burden of chronic liver diseases from 2012 to 2017: the growing impact of NAFLD.
 (2020) Hepatology. (2021 Impact Factor: Top Cited Articles)
 A complete list of publications (+5) is available on request.



National Vital Statistics System (NVSS)



- NVSS by the National Center for Health Statistics (NCHS) of the Centers for Disease Control (CDC) provide multiple cause-of-death data <u>https://www.cdc.gov/nchs/nvss/mortality_methods.htm</u>
- Information from death certificates filed in all 50 states and the District of Columbia.
- More than 99% of deaths in the U.S. are captured.



National Vital Statistics System (NVSS)



Mortality Related to Non-Alcoholic Fatty Liver Disease is Increasing in the United States: 2007-2016



Non-alcoholic Fatty Liver Disease and Alcoholic Liver Disease are Major Drivers of Liver Mortality in the United States



Paik, J.M., Golabi, P., Biswas, R., Alqahtani, S., Venkatesan, C. and Younossi, Z.M., 2020. Nonalcoholic Fatty Liver Disease and Alcoholic Liver Disease are Maior Drivers of Liver Mortality in the United States. *Hepatology Communications*.



- Changes in Mortality Due to Chronic Liver Diseases (CLD) During the COVID-19 Pandemic: Data from the United States' National Vital Statistics System, (2023) PLOS ONE
- Adolescents' Suicide Rates by Ethnicity-Data from the National Vital Statistics System 2015-2020. (2022) Annals of Emergency Medicine.
- Extrahepatic manifestations and healthcare expenditures of non-alcoholic fatty liver disease in the Medicare population. (2022) Hepatology International.
- Nonalcoholic fatty liver disease and alcoholic liver disease are major drivers of liver mortality in the United States. (2020) Hepatology communications.
- Mortality related to nonalcoholic fatty liver disease is increasing in the United States. (2019) Hepatology Communications. (2021 Impact Factor: Top Cited Articles)



National Vital Statistics System (NVSS)



- Changes in Mortality Due to Chronic Liver Diseases (CLD) During the COVID-19 Pandemic: Data from the United States' National Vital Statistics System, (2023) PLOS ONE
- Adolescents' Suicide Rates by Ethnicity-Data from the National Vital Statistics System 2015-2020. (2022) Annals of Emergency Medicine.
- Extrahepatic manifestations and healthcare expenditures of non-alcoholic fatty liver disease in the Medicare population. (2022) Hepatology International.
- Nonalcoholic fatty liver disease and alcoholic liver disease are major drivers of liver mortality in the United States. (2020) Hepatology communications.
- Mortality related to nonalcoholic fatty liver disease is increasing in the United States. (2019) Hepatology Communications. (2021 Impact Factor: Top Cited Articles)



Other Large Data Base



- Nationwide Readmissions Database (NRD)
 - Non-alcoholic fatty liver disease is associated with greater risk of 30-day hospital readmission in the United States (U.S.). (2023) Ann Hepatol.
- Surveillance, Epidemiology, and End Results (SEER)
 - The impact of hepatocellular carcinoma diagnosis on patients' health-related quality of life. (2021) Cancer Med.
- Medicare
 - Hospice care utilization among elderly patients who died with hepatocellular carcinoma in the United States. (2021) JHEP Reports.
 - Among Medicare patients with hepatocellular carcinoma, non-alcoholic fatty liver disease is the most common etiology and cause of mortality. (2020) Journal of clinical gastroenterology.
 - Presumed nonalcoholic fatty liver disease among Medicare beneficiaries with HIV, 2006– 2016. (2020) Open Forum Infectious Diseases.
 - Extrahepatic manifestations and healthcare expenditures of non-alcoholic fatty liver disease in the Medicare population. (2020) Hepatology International.
 - Resource Utilization and Outcomes of Medicare Recipients with Chronic Hepatitis B in the United States. (2019) Journal of Clinical Gastroenterology.



Service Capabilities CORLD, GNC and GLC Meta-Analysis



- Global Epidemiology of NASH. Hepatology 2016
- The global epidemiology of NAFLD and NASH in patients with type 2 diabetes: a systematic review and meta-analysis 2019
- The global epidemiology of nonalcoholic fatty liver disease (NAFLD) and nonalcoholic steatohepatitis (NASH): a systematic review. (2023) Hepatology
- The Global Epidemiology of Metabolic Dysfunction Associated Steatotic Liver Disease and Metabolic Dysfunction Associated Steatohepatitis Among Type 2 Diabetes.



SRTR (Scientific Registry of Transplant Recipients)



	Lung	Heart	Liver	Kidney
N in 2006-2021	31,503	38,044	106,639	286,506

Consistently collected parameters:

- Age, gender, race
- State of residence
- Transplant center
- Education
- Insurance
- BMI
- Type 2 diabetes
- Viral hepatitis serology (not viral load)
- History of any cancer
- History of prior transplants

- Functional status (0-100)
- Listing diagnoses (two)
- Select donor's parameters
- Select details of surgery
- Outcomes (long-term mortality and graft loss, annually)

Publications for SRTR (Scientific Registry of Transplant Recipients)

1: Alqahtani SA, Stepanova M, Al Shabeeb R, Eberly KL, Ong J, Younossi ZM. The impact of hepatitis B and C positive serologies on the outcomes of non-hepatic solid organ transplantation in the United States. J Viral Hepat. 2023 Dec 29. doi: 10.1111/jvh.13916. Epub ahead of print. PMID: 38158773.

2: Younossi ZM, Stepanova M, Al Shabeeb R, Eberly KE, Shah D, Nguyen V, Ong J, Henry L, Alqahtani SA. The changing epidemiology of adult liver transplantation in the United States in 2013-2022: The dominance of metabolic dysfunctionassociated steatotic liver disease and alcohol-associated liver disease. Hepatol Commun. 2023 Dec 22;8(1):e0352. doi: 10.1097/HC9.00000000000352. PMID: 38126928; PMCID: PMC10749707.

3: Stepanova M, Kumar A, Brandt P, Gundurao N, Cusi K, Al Qahtani S, Younossi ZM. Impact of Type 2 Diabetes on the Outcomes of Solid Organ Transplantations in the U.S.: Data From a National Registry. Diabetes Care. 2023 Dec 1;46(12):2162-2170. doi: 10.2337/dc23-1085. PMID: 37748128.

4: Stepanova M, Kabbara K, Mohess D, Verma M, Roche-Green A, AlQahtani S, Ong Burra P, Younossi ZM. Nonalcoholic steatohepatitis is the most common indication for liver transplantation among the elderly: Data from the United States Scientific Registry of Transplant Recipients. Hepatol Commun. 2022 Jul;6(7):1506-1515. doi: 10.1002/hep4.1915. Epub 2022 Feb 28. PMID: 35224886; PMCID: PMC9234626.

5: Younossi ZM, Harring M, Younossi Y, Ong JP, Alqahtani SA, Stepanova M. The Impact of NASH to Liver Transplantations With Hepatocellular Carcinoma in the United States, Clin Gastroenterol Hepatol. 2022 Dec;20(12):2915-2917.e1. doi: 10.1016/j.cgn.2021.10.018. Epub 2021 Oct 16. PMID: 34666156.

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8 Stepanova M, Al Qahtani S, Mishra A, Younossi I, Venkatesan C, Younossi ZM. Outcomes of liver transplantation by insurance types in the United States. Am J Manag Care. 2020 Apr 1;26(4):e121-e126. doi: 10.37765/ajmc.2020.42839. PMID: 32270989.

9: Sayiner M, Stepanova M, De Avila L, Golabi P, Racila A, Younossi ZM. Outcomes of Liver Transplant Candidates with Primary Biliary Cholangitis: The Data from the Scientific Registry of Transplant Recipients. Dig Dis Sci. 2020 Feb;65(2):416-422. doi: 10.1007/s10620-019-05786-1. Epub 2019 Aug 27. PMID: 10: Golabi P, Bush H, Stepanova M, Locklear CT, Jacobson IM, Mishra A, Trimble G, Erario M, Venkatesan C, Younossi I, Goodman Z, Younossi ZM. Liver Transplantation (LT) for Cryptogenic Cirrhosis (CC) and Nonalcoholic Steatohepatitis (NASH) Cirrhosis: Data from the Scientific Registry of Transplant Recipients (SRTR): 1994 to 2016. Medicine (Baltimore). 2018 Aug;97(31):e11518. doi: 10.1097/MD.00000000011518. PMID: 30075518; PMCID: PMC6081090.

11: Younossi Z, Stepanova M, Ong JP, Jacobson IM, Bugianesi E, Duseja A, Eguchi Y, Wong VW, Negro F, Yilmaz Y, Romero-Gomez M, George J, Ahmed A, Wong R, Younossi I, Ziayee M, Afendy A; Global Nonalcoholic Steatohepatitis Council. Nonalcoholic Steatohepatitis Is the Fastest Growing Cause of Hepatocellular Carcinoma in Liver Transplant Candidates. Clin Gastroenterol Hepatol. 2019 Mar;17(4):748-755.e3. doi: 10.1016/j.cgh.2018.05.057. Epub 2018 Jun 14. PMID: 12: Stepanova M, Sayiner M, de Avila L, Younoszai Z, Racila A, Younossi ZM. Long-term outcomes of liver transplantation in patients with hepatitis C infection are not affected by HCV positivity of a donor. BMC Gastroenterol. 2016 Nov 15;16(1):137. doi: 10.1186/s12876-016-0551-z. PMID: 27846801; PMCID: PMC5111255.

13: Stepanova M, Locklear T, Rafig N, Mishra A, Venkatesan C, Younossi ZM. Longterm outcomes of heart transplant recipients with hepatitis C positivity: the data from the U.S. transplant registry. Clin Transplant. 2016 Dec;30(12):1570-1577. doi: 10.1111/ctr.12859. Epub 2016 Nov 8. PMID: 27739127. 14: Koenig A, Stepanova M, Saab S, Ahmed A, Wong R, Younossi ZM. Long-term outcomes of lung transplant recipients with hepatitis C infection: a retrospective study of the U.S. transplant registry. Aliment Pharmacol Ther. 2016 Aug;44(3):271-8. doi: 10.1111/apt.13693. Epub 2016 Jun 9. PMID: 27279496. 15: Stepanova M, Henry L, Garg R, Kalwaney S, Saab S, Younossi Z. Risk of de novo post-transplant type 2 diabetes in patients undergoing liver transplant for non-alcoholic steatohepatitis. BMC Gastroenterol. 2015 Dec 15;15:175. doi: 10.1186/s12876-015-0407-y. PMID: 26666336; PMCID: PMC4678589. 16: Younossi ZM, Stepanova M, Saab S, Ahmed A, Lam B, Srishord M, Venkatesan C, Wai H, Henry L. The impact of viral hepatitis-related hepatocellular carcinoma to post-transplant outcomes. J Viral Hepat. 2016 Jan;23(1):53-61. doi: 10.1111/jvh.12449. Epub 2015 Aug 20. PMID: 26289820. 17: Stepanova M, Wai H, Saab S, Mishra A, Venkatesan C, Younossi ZM. The outcomes of adult liver transplants in the United States from 1987 to 2013. Liver Int. 2015 Aug;35(8):2036-41. doi: 10.1111/liv.12779. Epub 2015 Jan 21. PMID: 25559873.

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19: Younossi ZM, Stepanova M, Saab S, Kalwaney S, Clement S, Henry L, Frost S, Hunt S. The impact of type 2 diabetes and obesity on the long-term outcomes of more than 85 000 liver transplant recipients in the US. Aliment Pharmacol Ther.

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The Global NASH/MASH Council Projects



Periodic analysis of Global Registry (Ongoing)

- HDV and HRQoL (Complete)
- The Impact of Stigma on HRQoL (Complete)
- Cuban Data Analyses (Complete)
- Turkish Data Analyses (Complete)
- **HCV** Physicians Survey (Complete)
- NAFLD/MASLD Knowledge Survey of Hepatologists, Gastroenterologists, Endocrinologists and Primary Care Physicians in Saudi Arabia, Turkey, and Egypt (Complete)
- Clinical and PROs in Patients with Chronic Liver Diseases in Saudi Arabia, Turkey, and Egypt (Complete)
- The Burden of NAFLD/MASLD in Saudi Arabia: Data from the Global Burden of Disease 2019 (Complete)
- Prevalence of MASLD in the Middle East and North Africa (MENA): A Systematic Review and Meta-analysis (Complete)

<u>Global Surveys</u>

- NAFLD Global Physicians Survey (Complete)
- The Global Stigma Survey (Main analysis complete, Sub-analysis)
- Stigma in SLD: A Survey of Patients from Saudi Arabia (Complete)
- Real-world Evidence on Non-Invasive Tests and Associated Cut-offs Used to Assess Fibrosis in Routine Clinical Practice Around the World (Ongoing)
- NAFLD/MASLD Investment Farmwork US and Germany (Ongoing)
- Global Unification Around SLD- GNC (Ongoing)



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- 4. Younossi ZM, et al. Pnpla3-rs738409 CG/GG Genotype is strongly associated with advanced histologic fibrosis and high risk enhanced liver fibrosis score, aasld2023
- 5. Younossi ZM, et al. Stigma Is A Predictor Of Impairment Of Health Related Quality Of Life Among Patients With Nafld, Aasld2023
- 6. Paik J, Dipam Shah, Katherine Elizabeth Eberly, Pegah Golabi, Younossi ZM. Alcoholic Liver Disease And Non-alcoholic Fatty Liver Disease Were The Main Drivers Of Cirrhosis Related Deaths Before And During The Covid-19 Pandemic In The United States, Aasld2023
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- 11. Younossi ZM, et al. Non-alcoholic Steatohepatitis (Nash) Has Become The Most Common Indication For Liver Transplantation Among Candidates With Hepatocellular Carcinoma In The United States, Aasld2023.
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- 14. Younossi ZM, et alLiver Transplantation Profile Among Teenagers In The United States, Aasld2023.
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- Younossi ZM, et al Socio-economic Disparities Drive The Prevalence Of Non-alcoholic Fatty Liver Disease (NAFLD) Among Teenagers In The United States, EASL-ILC. Vienna, Austria. 2023
 - Younossi ZM, et al. Health Economics Of The Enhanced Liver Fibrosis Test In The Detection Of Advanced Liver Fibrosis In Patients With Non-alcoholic Fatty Liver Disease In The UK, EASL-ILC. Vienna, Austria. 2023



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- 20. Younossi ZM, et al. Prevalence And Predictors Of Clinically Significant Pruritus In Patients With Non-alcoholic Fatty Liver Disease (NAFLD): Data From The Global NASH Registry™ (GNR™), EASL 2023
- 21. Stepanova M,, Younossi ZM. The Impact Of Type 2 Diabetes On The Outcomes Of Solid Organ Transplants In The U.S., ADA 2023
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- 21. Yourossi ZM, et al. A Practical Use of Non-invasive Tests in Clinical Practice to Identify High-Risk Patients with Non-alcoholic Steatohepatitis, APT



Center for Outcomes Research in Liver Disease



Economic Analysis



Service Capabilities CORLD, GNC and GLC Economic Analysis



Economic burden, Cost-effectiveness analysis of treatment or screening, budget impact

Completed Projects

- Cost Effectiveness of Screening for HCV
- Economic Burden of NAFLD in the US and 5 EU countries
- Economic Burden of NAFLD in Hong Kong (Complete)
- Economic burden of NASH and NASH Fibrosis in the US
- Economic Burden of NASH in T2D
- Hypothetical Treatment of NASH
- Screening for High-Risk Non-alcoholic Fatty Liver Disease (NAFLD) is Cost Effective in the United States and UK
- The Growing Economic and Clinical Burden of Nonalcoholic Steatohepatitis (NASH) in the United States. (2023)

Ongoing Projects

- 1. Cost of Inaction in the US, Germany, Spain, Italy, Brazil, Japan, Saudi Arabia
 - Estimate the present and future economic burden of chronic diseases
- 2. Analyze the clinical data, cost data and quality of life inputs to determine the cost-effectiveness of latest therapies.



6.

7.

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Center for Outcomes Research in Liver Disease





THE GLOBAL Global NASH Council Regional, National THE GLOBAL NASH COUNCIL **International Meetings**

Search



Year	Title	Location	Sponsor
2023	The Global NASH Council Meeting at AASLD - Hot Topics in MASLD (NIT Risk Stratification, Life Style Intervention and Educational programs to Increase awareness	Cambridge, MA, USA	Siemens Healthineers
2023	The Global NASH Council Meeting at EASL - Role of ELF in Clinical Practice	Vienna, Austria	Siemens Healthineers
2023	The Global NASH Council Meeting at EASL - Identifying Patients at Risk and Raising Awareness in NAFLD	Vienna, Austria	Intercept Pharmaceutical
2023	The Global NASH Council Meeting at EASL - Fatigue and Patient Reported Outcomes in Patients with Primary Biliary Cholangitis	Vienna, Austria	CymaBay
2022	The Global NASH Council Meeting at AASLD - Update on NITs and Treatment for NASH	Washington, DC, USA	Intercept Pharmaceutical
2022	The Global NASH Council Meeting at AASLD - Risk Stratification in Primary Care setting for NASH	Washington, DC, USA	Siemens Healthineers
2019	The Global NASH Council Meeting at AASLD - Global Burden of NASH: 1) Diet and Food Literacy in NAFLD, 2) Economic Burden of NASH in Hong Kong, 3) -NASH and PRO Presentation, 4) Global Burden of Liver Disease	Boston, MA, USA	Intercept Pharmaceutical
2019	Updates on Global NASH Council Collaborations and Clinical Trial Regiments with Treatment Priorities	Vienna, Austria	Intercept Pharmaceutical
2018	Summary of PRO and HEOR Global Advisory Board Meeting	San Francisco, CA, USA	Gilead Sciences
2018	Updates on Global NASH Council Collaborations and Clinical Trial Regiments with Treatment Priorities	San Francisco, CA, USA	Intercept Pharmaceutical
2018	Updates on Global NASH Council Collaborations and Clinical Trial Regiments with Treatment Priorities	Paris, France	Intercept Pharmaceutical
2017	Knowledge Gaps in NAFLD/NASH including Economic Burden & Latest in Diagnostics/Biomarkers	Washington, DC, USA	Intercept Pharmaceutical
2017	PRO Advisory Board at AASLD with Review of PRO and HEOR Collaborations in Liver Disease	Washington, DC, USA	Gilead Sciences
2016	PRO Advisory Board at AASLD with purpose of establishing a global expert council on PRO's and HEOR in Liver Disease	Boston, MA, USA	Gilead Sciences

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Year	Title	Location	Sponsor
2022	Expert Panel	Washington, DC, USA	Siemens Healthineers
2020	NIT Meeting	Falls Church, VA, USA	Intercept Pharmaceutical



The Global NASH council Meeting During AASLD 2023 in Boston, MA, USA





Upcoming meetings for 2024:

- GNC Asian Meeting During Asian Pacific Association for the Study of Liver in Kyoto Japan (March 30th, 2024)
- GNC Meeting During National Hepatology Congress and the Turkish Association for the Study of the Liver Meeting in Rize, Turkey (May 7-9th, 2024)
- GNC Meeting for Saudi Arabia and the Gulf Region during SASLT in Riyadh, Saudi Arabia (October 17-19, 2024)



GNC Recognition 2023



Presentations at AASLD 2023 November 2023, Boston MA, USA

1	Abstract #40938 Development Of A Primary Biliary Cholangitis-Specific Version Of Chronic Liver Disease Questionnaire: CLDQ-PBC	Zobair Younossi, Maria Stepanova, Issah Younossi, Andrei Racila
2	Abstract #42850 Non-Alcoholic Steatohepatitis (Nash) Has Become The Most Common Indication For Liver Transplantation Among Candidates With Hepatocellular Carcinoma In The United States	Zobair M. Younossi, Reem Al Shabeeb, Katherine Eberly, Dipam Shah, Veronici Nguyen , Janus Ong, Saleh A Alqahtani, Linda Henry, Maria Stepanova
3	Abstract #43328 A Rapid Rise In The Global Prevalence Of Nonalcoholic Fatty Liver Disease) And Non-Alcoholic Steatohepatitis Among Patients With Type 2 Diabetes	Zobair M. Younossi, Pegah Golabi, Jillian Price, Soroor Owrangi, Nagashree Gi Rao, Romona Satchi, James M. Palk
5	Abstract #43839 PNPLA3-8x738409 CG/GG Genotype Is Strongly Associated With Advanced Histologic Fibrosis And High Risk Enhanced Liver Fibrosis Score	Zobair M Younossi, James M. Estep, Sean Felix, Brian P Lam, Elena Younossi Nagashree Gundu-Rao, Leyla De Avila, Huong Pham, Becky Cable, Jillian Price Andrei Racila, Maria Stepanova
7	Abstract #44101 Cost-Effectiveness Of Identifying High-Risk Non-Alcoholic Fatty Liver Disease Patients In The United States	Zobair M. Younossi, James M. Paik, Linda Henry, Richard F. Pollock, Maria Stepanova, Fatema Nader
8	Abstract #45122 Individuals With Advanced Fibrosis Have Worse Fine Motor Performance	All A. Weinstein, Leyla De Avila, Jillian K. Price, Carey Escheik, Pegah Golabi, I Gerber, Zobair M. Younossi
10	Abstract #42842 Liver Transplantation Profile Among Teenagers In The United States	Maria Stepanova, Dipam Shah, Reem Al Shabeeb, Katherine Eberly, Veronica Nguyen, Janus Ong, Saleh A Alqahtani, Zobair M. Younossi
1	Abstract #42859 Liver Transplantation For Primary Biliary Cholangitis In The U.S. In 2008- 2022	Maria Stepanova, Katherine Eberly , Dipam Shah, Reem Al Shabeeb, Veronica Nguyen, Janus Ong, Saleh A Alqahtani, Linda Henry, Zobair Younossi
13	Abstract #44005 Quantitation Of Plasma Cells, Cytotoxic T Cells, And Kupffer Cells/Macrophages With Hepatic Fibrosis Stage In Non-Alcoholic Steatohepatitis	James M. Estep, Anne Masters, Lakshmi Alaparthi, Gary Brathauer, Aybike Birerdinc, Fanny Monge, Cassandra Sharp, Daisong Tan, Hala Abdelaal, Zachar Goodman, Zobair M Younossi
13	Abstract #44071 Food Insecurity And Household Income Substantially Increase The Risk Of NAFLD Among Adolescent Children In The U.S.	James M. Paik, Sandy Duong, Shira Zelber-Sagi, Jeffrey V. Lazarus, Linda Hen Zobair M. Younossi
14	Abstract #44990 Alcoholic Liver Disease And Non-Alcoholic Fatty Liver Disease Were The Main Drivers Of Cirrhosis Related Deaths Before And During The Covid-19 Pandemic In The United States	James M. Paik, Dipam Shah, Katherine Eberly, Peagh Golabi, Linda Henry, Zob Younossi
10	Abstract #46884 Assessment Of Hospital Readmission Rates, Risk Factors, Causes And Cost After Discharge With Chronic Liver Disease: Analysis Of The Us Nationwide	James M. Paik, Becky Cable, Linda Henry, Leyla De Avila, Huong Pham, Zobair Younossi

Together for Better Liver Health: EASL Event During WHA76 May 22, 2023, Geneva Switzerland

The Global NASH Council participated in a meeting organized by EASL on the sidelines of the 76th World Health Assembly (May 2023) in Geneva, Switzerland. The event, held in a partnership between EASL, AASLD, ALEH, APASL, INASL, EASD, EASO, SOLDA, SAASL, WHF and ESPGHAN as well as a large number of other stakeholders including policymakers, representatives to the UN, WHO staff as well as thought leaders and people affected by NAFLD/MASLD disease.

https://easl.eu/event/easl_76thwha/speak ers/

GPS Scholar-2022 The Global NASH Council and the Global Liver Council Members

The Global NASH Council (GNC) and Global Liver Council members have consistently demonstrated exceptional academic productivity, producing a substantial body of high-impact evidence in liver disease and NAFLD/MASLD. Our influential work has not only garnered widespread recognition but has also inspired and influenced the research directions. In the latest data from ScholarGPS (2022), our members have been ranked at the top of the field of liver disease, NAFLD, fatty liver disease and hepatology. Highly Ranked Scholars ™-Lifetime are eminent authors whose Top Percentage Ranks places them above 0.05% of all scholars due to highly significant impact and quality of their scholarly contributions based on lifetime contributions.

https://scholargps.com/highly-rankedscholars?year=2022&ranking_duration=LIFETIME&base_fi eld=&base_specialty=Liver+disease