

Managing and Monitoring NAFLD: Comparison of Fibroscan Changes in GLP-1RA Users vs Nonusers

Akhverdyan, Nazar BA¹, Sullivan, Shelby MD², Wieland, Amanda MD², Lindsay, Mark NP¹, Swartwood, Sheila NP², Grau, Laura MPH³, Jensen, Thomas MD¹

1. Department of Endocrinology, Diabetes and Metabolism, University of Colorado School of Medicine, Aurora CO
 2. Department of Gastroenterology, University of Colorado School of Medicine, Aurora, CO
 3. Department of Biostatistics and Informatics, Colorado School of Public Health, Aurora CO

BACKGROUND

- Non-alcoholic fatty liver disease (NAFLD) is defined as the presence of macrovesicular steatosis in $\geq 5\%$ of hepatocytes in the absence of secondary causes such as alcohol abuse or steatogenic drugs.
- NAFLD has increased in global prevalence to 20-30% and is projected to become the leading cause of liver transplantation in the United States.
- Management focuses on lifestyle modifications, bariatric surgery, and pharmacologic management of co-morbidities.
- Recent guidelines published by the American Association of Clinical Endocrinology have recommended the use of Glucagon-Like Peptide 1 Receptor Agonists (GLP-1RAs) in the treatment of NAFLD, especially in diabetics.
- This study retrospectively compared changes in Fibroscan™ in GLP-1RA users vs nonusers in a real-world clinical scenario.

METHODS

- A retrospective analysis was performed of patients with NAFLD from the UCHealth Endocrinology or Hepatology Clinic who completed two Fibroscans™ separated by 6 months
- Males ≥ 21 drinks/week or females ≥ 14 drinks/week were excluded from the study.
- Changes in Controlled Attenuation Parameter (CAP), Liver Stiffness Measurement (LSM), and metabolic parameters (weight, BMI, blood pressure, liver enzymes, A1c, lipid values) were compared between GLP-1RA Users (N=48) and Non-Users (N=42).
- Changes in these parameters were also compared between Responders (N=51) and Non-Responders (N=39) (based on CAP change of > 38 dB/m).
- Laboratory studies and anthropomorphic data were collected within 3 months of the initial and follow up Fibroscan™.
- Fibroscan™ M or XL probes were used based upon manufacturer's recommendations.
- Statistical analysis was conducted using two sample t-tests, Wilcoxon rank sum tests, and simple linear regression models.
- This study was approved by the Colorado Multiple Institutional Review Board (COMIRB).

RESULTS

Table 1. GLP-1 Users vs. Non-Users

Measure	GLP1 Users Pre	GLP1 Users Post	GLP1 Users Change	GLP1 Non-Users Pre	GLP1 Non-Users Post	GLP1 Non-Users Change	p-value
Weight (kg)	93.9 (18.0)	86.3 (16.1)	-7.5 (9.1)	93.0 (16.9)	89.8 (17.8)	-3.1 (6.9)	0.011
BMI (kg/m ²)	33.0 (5.4)	30.3 (4.7)	-2.7 (3.2)	32.3 (5.0)	31.2 (5.1)	-1.1 (2.5)	0.013
Systolic Blood Pressure	126.2 (15.4)	121.4 (14.5)	-4.8 (18.1)	135.4 (18.8)	124.2 (18.3)	-11.1 (19.7)	0.132
Diastolic Blood Pressure	74.5 (8.8)	71.8 (10.4)	-2.6 (12.7)	76.7 (8.5)	72.5 (9.4)	-4.4 (9.4)	0.461
ALT	40.0 (26.0, 68.0)	22.0 (17.0, 31.0)	-15.0 (-33.0, 2.0)	45.0 (25.5, 64.0)	32.0 (24.0, 55.0)	-3.0 (-18.0, 4.0)	0.019*
AST	28.0 (21.0, 40.0)	21.0 (18.0, 25.0)	-4.0 (-17.0, 1.0)	33.5 (22.0, 40.5)	29.0 (21.0, 37.0)	1.0 (-10.0, 6.0)	0.025*
Total Cholesterol	170.5 (43.1)	147.8 (39.0)	-22.6 (39.5)	175.2 (48.6)	147.3 (40.7)	-27.9 (43.0)	0.696
LDL Cholesterol	91.0 (59.0, 120.5)	79.0 (49.5, 102.5)	-3.0 (-42.0, 14.0)	92.0 (58.0, 134.0)	75.0 (53.0, 108.0)	-17.0 (-48.0, 11.0)	0.555*
Triglycerides	192.1 (98.2)	147.6 (84.2)	-48.1 (107.5)	217.3 (149.7)	175.0 (57.9)	-35.0 (145.5)	0.762
HDL Cholesterol	41.4 (8.9)	44.5 (10.5)	3.1 (8.3)	38.1 (12.4)	41.0 (12.0)	2.9 (6.7)	0.919
Non-HDL	128.5 (40.3)	103.3 (38.6)	-25.2 (36.5)	137.1 (48.7)	106.3 (36.1)	-30.8 (41.7)	0.664
Hemoglobin A1c	7.0 (5.9, 8.8)	6.0 (5.6, 7.0)	-0.7 (-1.3, 0.2)	6.7 (6.3, 7.9)	6.9 (6.2, 7.3)	0.0 (-1.0, 0.6)	0.026*
LSM	6.9 (4.8, 9.3)	5.8 (4.4, 7.4)	-0.6 (-3.8, 0.7)	7.7 (5.5, 10.4)	6.7 (5.2, 8.5)	-0.5 (-2.2, 1.5)	0.493*
CAP	336.0 (37.8)	274.1 (63.0)	-61.6 (57.9)	333.0 (39.8)	303.9 (56.3)	-28.8 (62.7)	0.012

Figure 1. Percent Weight Change in GLP-1RA Users vs Non-Users

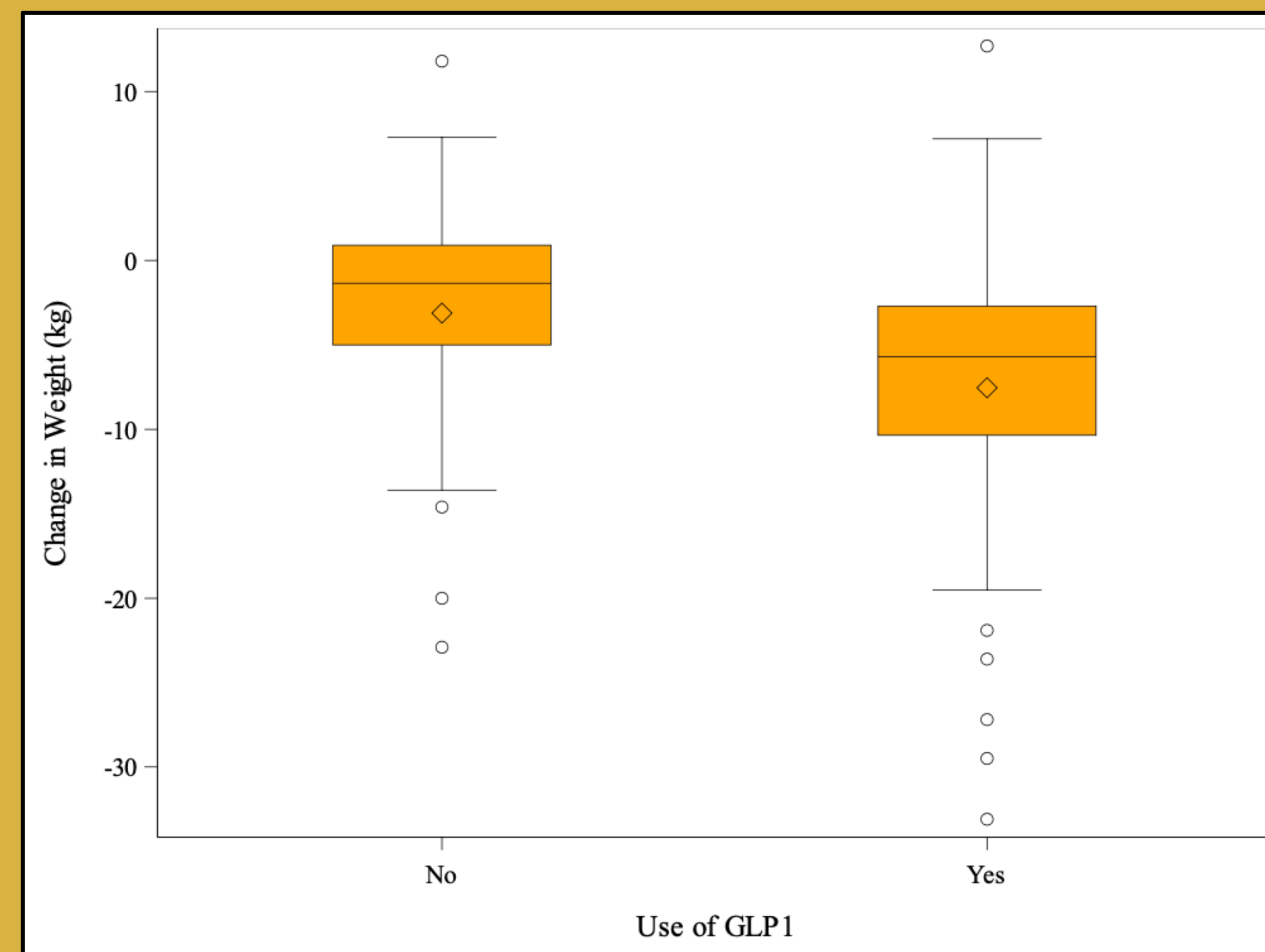


Figure 3. Association between Percent Weight Change and GLP-1RA Use with CAP Score Change

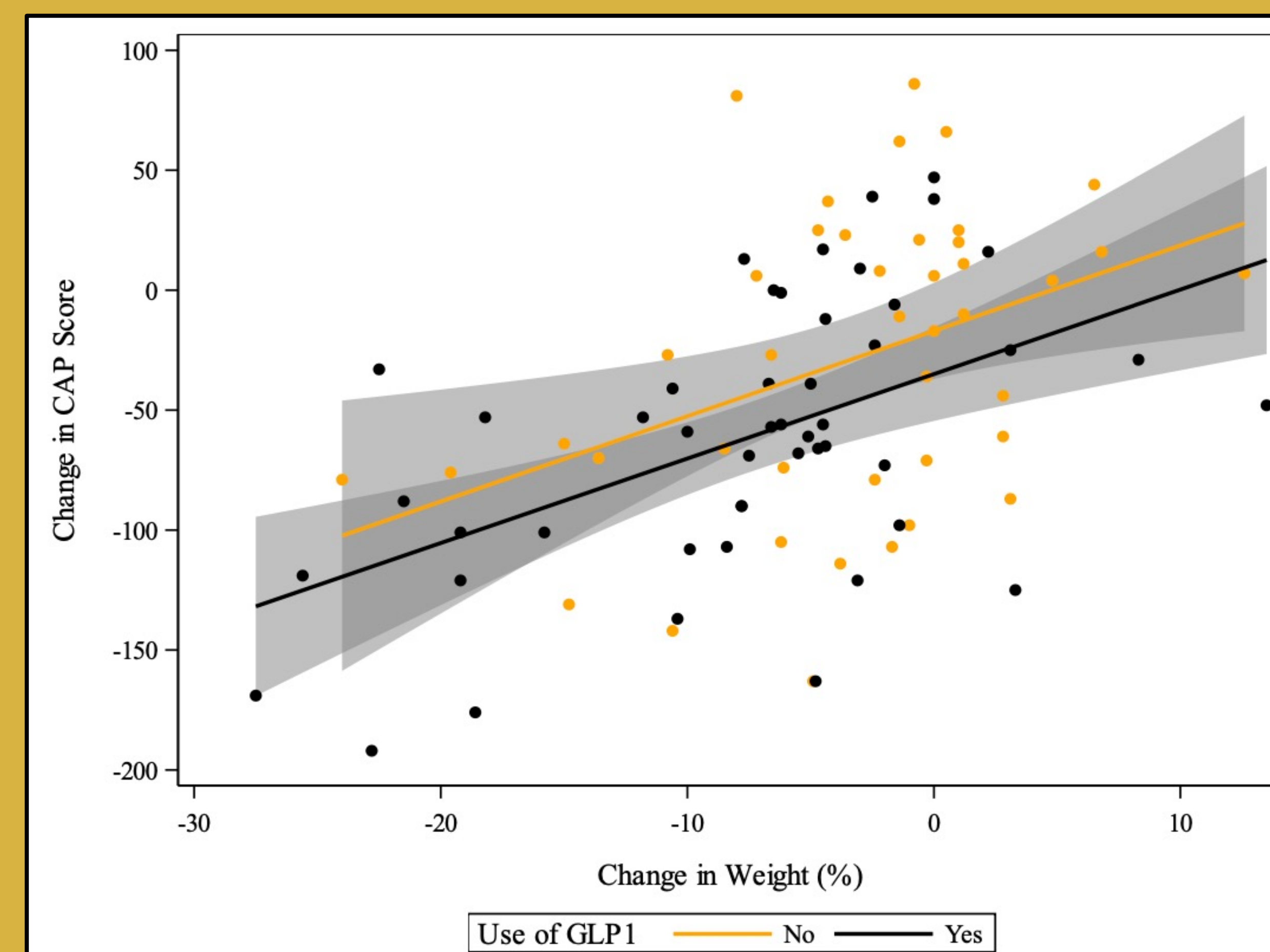


Table 2. Responders vs. Non-Responders

Measure	Responders Pre	Responders Post	Responders Change	Non-Responders Pre	Non-Responders Post	Non-Responders Change	p-value
Weight (kg)	92.2 (17.0)	83.9 (15.4)	-8.4 (8.6)	95.1 (18.0)	93.4 (17.5)	-1.7 (6.5)	<.001
BMI (kg/m ²)	32.4 (4.9)	29.5 (4.0)	-3.0 (3.0)	33.0 (5.7)	32.4 (5.5)	-0.6 (2.3)	<.001
Systolic Blood Pressure	129.5 (18.6)	119.5 (17.0)	-10.0 (19.3)	131.9 (16.3)	127.3 (14.5)	-4.6 (18.4)	0.196
Diastolic Blood Pressure	75.1 (8.4)	69.9 (11.2)	-5.2 (11.8)	76.2 (9.1)	75.3 (6.7)	-0.9 (10.0)	0.075
ALT	39.5 (25.0, 65.0)	24.0 (17.0, 32.0)	-9.0 (-38.0, 1.0)	45.0 (26.0, 68.0)	44.0 (24.0, 61.0)	-2.0 (-20.0, 1.0)	0.078*
AST	27.0 (21.0, 40.0)	21.0 (18.0, 25.0)	-4.0 (-15.0, 2.0)	35.0 (23.0, 45.0)	29.0 (20.0, 40.0)	-2.0 (-16.0, 4.0)	0.316*
Total Cholesterol	171.6 (44.6)	140.7 (41.7)	-30.9 (36.7)	173.1 (45.8)	159.4 (32.1)	-13.7 (44.9)	0.206
LDL Cholesterol	92.0 (58.0, 130.0)	68.0 (46.0, 93.0)	-16.0 (-48.0, 1.0)	85.5 (63.0, 118.5)	94.5 (78.0, 108.5)	11.0 (-31.0, 26.0)	0.042*
Triglycerides	188.0 (81.6)	139.1 (70.2)	-48.8 (90.5)	222.8 (162.3)	187.6 (79.0)	-34.6 (162.3)	0.750
HDL Cholesterol	41.9 (9.7)	44.6 (11.2)	2.7 (8.0)	37.6 (10.9)	41.1 (10.8)	3.6 (7.3)	0.722
Non-HDL	129.1 (39.8)	96.1 (39.8)	-33.0 (32.1)	135.5 (49.2)	118.3 (28.7)	-17.3 (45.7)	0.237
Hemoglobin A1c	7.0 (6.2, 8.7)	6.0 (5.6, 7.1)	-0.8 (-1.3, 0.3)	6.7 (6.2, 8.0)	6.9 (6.2, 7.3)	0.3 (-0.9, 0.6)	0.001*
LSM	7.6 (5.0, 9.4)	5.4 (4.1, 7.2)	-1.3 (-4.2, 0.1)	6.8 (5.2, 9.5)	7.2 (5.7, 9.3)	0.3 (-0.6, 2.4)	<.001*
CAP	341.7 (35.7)	250.5 (44.5)	-91.0 (38.1)	325.3 (40.7)	337.1 (43.4)	12.0 (30.6)	<.001

Figure 2. Percent Weight Change in Responders vs Non-Responders

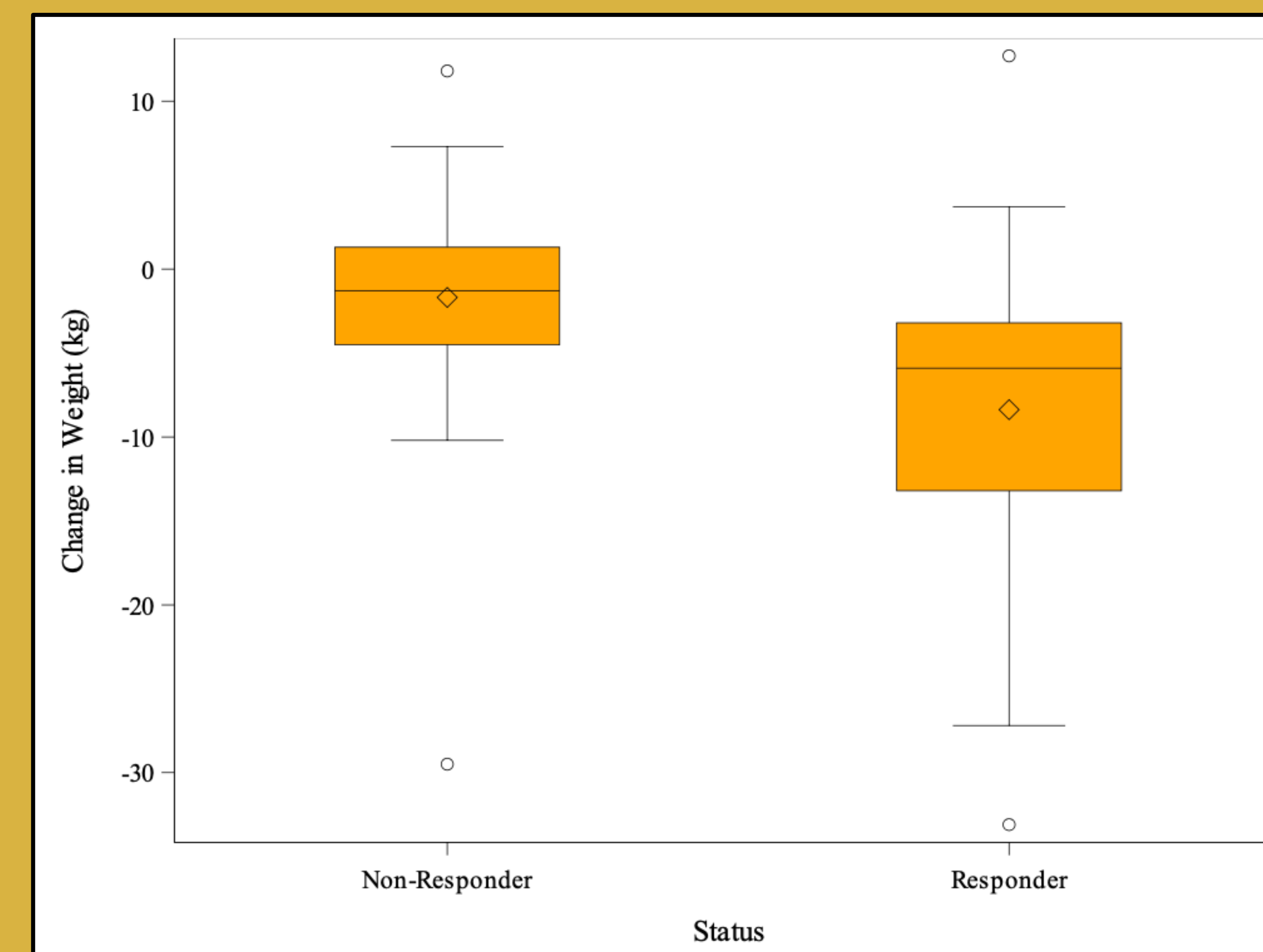
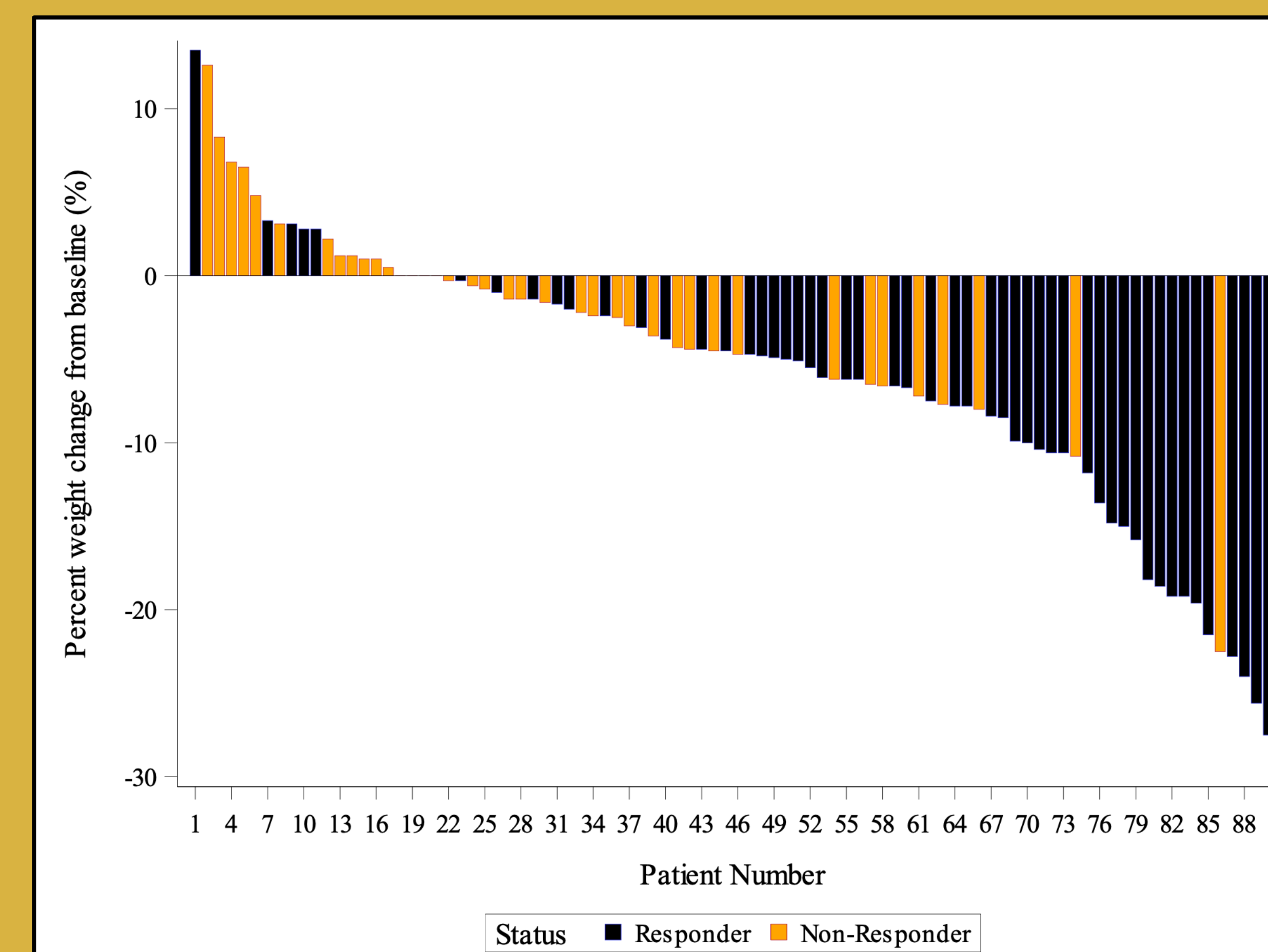


Figure 4. Percent Weight Change of Patients Based on Responder Status



- There was a significant improvement in CAP (-61.6% vs -28.8% p=0.012) in GLP-1RA users vs nonusers, although LSM was not significantly different (-0.6 kPa vs -0.5 kPa p=0.493).
- Weight (-7.5% vs -3.1% p=0.011), BMI (-2.7% vs -1.1% p=0.013), ALT (-15 U/L vs -3.0 U/L p=0.019), AST (-4.0 U/L vs 1.0 U/L p=0.025), and A1c (-0.7 vs 0.0 p=0.026) were significantly better in GLP-1RA users than nonusers.
- Weight (-8.4% vs -1.7% p<0.001), BMI (-3.0% vs -0.6% p<0.001), LDL (-16.0 vs 11.0 p=0.042), and A1c (-0.8 vs 0.3 p=0.001) were significantly better in responders than non-responders.
- % weight change and GLP-1RA use were significantly associated with changes in CAP score. In the single variable models, CAP score increased by 3.82 units (95% CI: 2.42, 5.22) for every 1% increase in percent weight change. Additionally, GLP-1RA users averaged a 32.81 unit (95% CI: -58.01, -7.55) decrease in CAP score compared to nonusers.
- However, in the full model that included % weight change and GLP-1RA use, GLP-1RA use was no longer significantly associated with changes in CAP score (p=0.132).

CONCLUSIONS

- GLP-1RA use is associated with improvements in CAP score, weight, liver enzymes, and A1c.
- Weight loss with GLP-1RA use appears to be the likely mechanism for liver improvement.
- The CAP change cutoff of >38 dB/m is linked to weight loss as well as improvements in LSM and metabolic parameters, suggesting the utility of Fibroscan in the surveillance of fatty liver disease.

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