

Benign liver conditions: understanding unseen abnormalities

They range from harmless to mildly harmful, and are generally little known. But it is useful to know about them, as a preventive measure and to promote awareness of how to manage them.

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A healthy liver carries out indispensable functions in our bodies: it clears toxins and waste from our bloodstream and helps digest the food we eat.

While we have all heard of complications like acute liver inflammation and liver cancer, we know less about benign, or non-cancerous, liver conditions. Here are some of the more common ones.

Benign Liver Diseases

Unconjugated Hyperbilirubinemia, or **Gilbert's Syndrome**, isn't a disease but a hereditary condition caused by a mutated gene inherited at birth. It is caused by the liver's inability to break down a yellow substance called bilirubin, which passes into the bloodstream. The symptoms of this harmless condition don't usually appear until puberty or later.

People with Gilbert's Syndrome may experience yellowness on their skin and in the whites of their eyes, dark urine, fatigue, nausea, abdominal pain, or irritable bowel syndrome following strenuous exercise, high levels of stress, dehydration or an illness. The most common symptom is jaundice or the yellowing effect, although some people present no symptoms at all.

Although there isn't any treatment for Gilbert's Syndrome, symptoms can be minimised by adopting a healthy diet without skipping meals, carefully managing stress, and keeping doctors informed about the condition to avoid complications later on.

Another condition – **Acute Fatty Liver of Pregnancy (AFLP)** – sometimes occurs in women in the last trimester of pregnancy. Its symptoms closely resemble those of Gilbert's Syndrome or other liver conditions, which makes early diagnosis a challenge. It happens when a baby inherits an enzyme deficiency gene which inhibits its ability to break down fatty acids. The resulting fatty acid build-up in the womb passes into the mother's bloodstream via the placenta.

If not treated, this condition can lead to liver and kidney failure, threatening both the mother's and child's lives. Women with this condition have to be hospitalised and be closely monitored during and after childbirth.

A different type of fatty liver disease occurs in some people who frequently consume heavy amounts of alcohol. Liver cells become lumbered with extra alcohol-induced fat. This condition usually goes away when the alcohol intake decreases or stops.



Alcoholic hepatitis occurs when the liver swells because of an overload of the toxic chemical byproducts of alcohol breakdown. The resulting symptoms include nausea, abdominal pain and swelling, fever, jaundice, and loss of appetite. Liver damage may be reversible for mild alcoholic hepatitis, though liver failure and death may follow severe cases.

Benign Liver Tumours

Benign liver tumours generally do not present any symptoms and can go undetected for a long time, unless revealed through an ultrasound, a CT scan or an MRI. For instance, a **hemangioma** is a mass of abnormal blood vessels. Depending on its size and proximity to other organs, it is relatively harmless and does not require treatment.

A **focal nodular hyperplasia (FNH)** is a liver tumour that occurs mostly in women, much like a hemangioma. Like hemangiomas, an FNH can be removed surgically if it causes pain or other problems.

Hepatocellular adenomas, often found in women of childbearing age, have been linked to the consumption of birth control or hormone pills. Occasionally, an adenoma grows and ruptures, causing abdominal pain. It is advisable that large adenomas be removed surgically to prevent any such risk.



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