

XVIII. Diseases of Liver, G. Bladder, Pancreas & Peritoneum Liver

Cirrhosis and Fibrosis of Liver-2

	<i>Bilharzial</i>	<i>Syphilitic</i>	<i>Pigmentary</i>	<i>Cardiac (congestive)</i>
<i>External surface</i>	Flat-topped elevations; shallow depressions	Congenital → smooth or granular. Acquired → lobed liver or coarse lobules	Early → smooth Late → diffusely and finely nodular Later → some pale nodules	Smooth → finely granular
<i>Colour</i>	Clay-coloured or (bilharzial pigment coloration)	Normal colour or mottled	Chocolate-brown (chest-nut)	Nutmeg appearance
<i>Size</i>	Enlarged (usually) Later on → may be diminished	Slightly enlarged (or is diminished)	Early → increased Later → shrunken	Enlarged (slightly) Later on → slightly diminished
<i>Regeneration nodules</i>	Absent	Absent	If active → present (non-pigmented nodules of regeneration) → pigmented thereafter	Usually absent *Very advanced & Late → some fine nodules
<i>Fibrosis (distribution)</i>	Periportal (coarse) or fine (diffuse)	Congenital → peri-cellular Acquired → irregular	Coarse fibrosis may be multilobular	Monolobular (usually)
<i>Cellular reaction</i>	Bilharzial cellular granulation tissue	Congenital → Syphilitic cellular granulation tissue. Acquired → gum mata	No reaction	No reaction
<i>Clinical and other findings</i>	Ascites Portal hypertension History of bilharzial infection	Congenital → syphilitic manifestations Acquired → history of primary and secondary stage-manifestations.	Associated 1. bronze skin, 2. diabetes mellitus 3. Haemosiderosis	1. Evidences of chronic venous congestion, 2. right-sided heart failure, 3. oedema and 4. ascites
<i>Primary fatty change</i> • <i>Necrosis</i> • <i>Atrophy</i> • <i>Regeneration</i> • <i>Fibrosis</i>	• Absent • Absent • Absent (early) • Absent • Present	• Absent • Absent • Present (late) • Absent • Present	• Absent • Present • Present • Present • Present	• May be present • Present • Present • Only slight and very late • Present
<i>Nature</i>	Fibrosis	Fibrosis	Cirrhosis	Cirrhosis (when advanced)