

Efforts for Early Detection & Screening of NAFLD

2nd Global Liver Health Forum
Science to Advance Liver Health

October 22, 2021

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Discussion Roadmap

- 1 Introduction: patient leadership in the field
- 2 The problem: global burden of NAFLD
- 3 The GLI response: essential elements of early detection and screening
- 4 Creating national models for action
- 5 **Panel discussion**

Introduction: patient leadership in the field

- 27-year liver transplant recipient (Johns Hopkins)
- Founded Global Liver Institute 2014
- Established GLI NASH Council in 2017
- ABIM Gastroenterology Specialty Board
- The Forum for Collaborative Research Liver Forum Steering Committee
- NIMBLE Consortium Community Representative
- AASLD NASH Task Force Member
- Boards
 - Clinical Trial Transformation Initiative
 - Sibley Memorial Hospital/Johns Hopkins Medicine
 - Innovative Value Initiative



The problem: global burden of NAFLD is substantial, with a worldwide prevalence of 25%¹



NAFLD, non-alcoholic fatty liver disease; NASH, non-alcoholic steatohepatitis
1. Younossi ZM, et al. Hepatology 2016;64:73–84

The GLI response: essential elements of early detection and screening - awareness



SAVE THE DATE **JUNE 10**

INTERNATIONAL NASH DAY

Join Global Liver Institute and its international partners in a global effort to raise awareness about nonalcoholic steatohepatitis (NASH), the most severe form of nonalcoholic fatty liver disease (NAFLD), and the actions that people can take to address this life-threatening disease worldwide.

VIRTUAL PANELS

- NASH as a Global Public Health Challenge
- NASH and Liver Cancer
- NASH and Obesity
- Pediatric NASH
- NASH and Diabetes
- Beyond the Biopsy: Innovations in Diagnostics
- NASH in Lean Individuals
- NASH: A Conversation in the Black Community

#NASHDAY
www.International-NASH-Day.com

GLI GLOBAL LIVER INSTITUTE

NASH AROUND THE WORLD

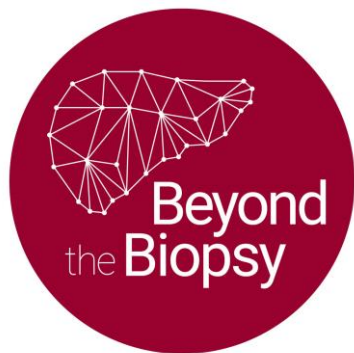


**World Health
Organization**

AASLD, American Association for the Study of Liver Diseases; EASL, European Association for the Study of the Liver; GLI, Global Liver Institute; NAFLD, non-alcoholic fatty liver disease; NASH, non-alcoholic steatohepatitis



The GLI response: essential elements of early detection and screening – non-invasive diagnostics



- **Shift share of voice and positive mentions** of NIDs vs biopsy
- **Highlight innovation and value** of NIDs (to patients, providers, and payers)
- **Identify and address barriers** to NIDs adoption
- Support integration of NID in **best practices and guidelines**



Key Numbers



1 National Radio Media Tour
1k Radio and Online Airings, 11.8M Cumulative Audience



2 Statements from Members of Congress



3 U.S. States targeted
Colorado, Massachusetts, New York



4 Beyond the Biopsy Educational Panels



988.8k #BeyondtheBiopsy impressions



246.7M Unique Visitors
From 2.5K Placements of a MAT article



The GLI response: essential elements of early detection and screening – physician education and engagement

NASH NEWS

GLI GLOBAL LIVER INSTITUTE

The Language of NASH

A narrative to guide communication on NASH

INTERNATIONAL NASH DAY

NASH IN LEAN INDIVIDUALS: WHAT SHOULD PATIENTS KNOW?

While obesity is strongly associated with NAFLD/NASH, people who are not overweight can also have NAFLD/NASH. Read more below about how you can prevent, manage, and treat NAFLD/NASH if you are lean.

People who are not overweight can also have NAFLD/NASH.

What is NAFLD/NASH?
Nonalcoholic fatty liver disease (NAFLD)
 Nonalcoholic fatty liver disease (NAFLD) is a condition in which too much fat builds up in the liver. If left untreated, NAFLD can lead to serious liver problems.

Nonalcoholic Steatohepatitis (NASH)
 Nonalcoholic steatohepatitis (NASH) is caused when that extra fat turns into inflammation (swelling in the liver) and fibrosis (scarring) of the liver. If severe enough, NASH can lead to cirrhosis or liver cancer, potentially requiring a liver transplant, which presents a difficult situation. Livers for transplants usually come from deceased donors, or people who have recently passed away,¹ and the waiting period for these livers can be long, ranging from less than 30 days to five years in the United States alone.²

INTERNATIONAL NASH DAY

NAFLD/NASH AND DIABETES: WHAT SHOULD PATIENTS KNOW?

It is common for patients to have both NAFLD/NASH and diabetes and, unfortunately, patients with both conditions have a higher risk of liver-related and non-liver related illness and premature death than those without liver disease. Read more below about how you can prevent, manage, and treat NAFLD/NASH and diabetes.

An estimated 2-3 out of every 10 people in the world currently have NAFLD.

An estimated 1 out of every 10 people in the world have diabetes.

7 out of 10 people living with type 2 diabetes in the United States have NAFLD.

What is "lean NAFLD/NASH" or "non-obese NAFLD/NASH"?

The terms "lean NAFLD/NASH" or "non-obese NAFLD/NASH" are colloquial ways of referring to NAFLD/NASH that occurs in a patient who is not obese. These terms are not distinct diagnoses; rather, patients who are lean and have NAFLD/NASH are a subset of the larger NAFLD/NASH patient population. In general, physicians and researchers define patients with NAFLD/NASH who are "lean" as those who have a body mass index (BMI) of <25 kg/m².¹ An exception to this definition is that Asian patients with a BMI of <23 kg/m² are considered "lean."²

A note: The determination for who is "lean" is different for patients with type 2 diabetes (T2D) than patients with NAFLD/NASH. Patients with T2D are considered "lean" if they have a BMI of <19 kg/m².

"Lean" is not a diagnosis, but a subgroup of patients with NAFLD/NASH.

www.international-nash.com

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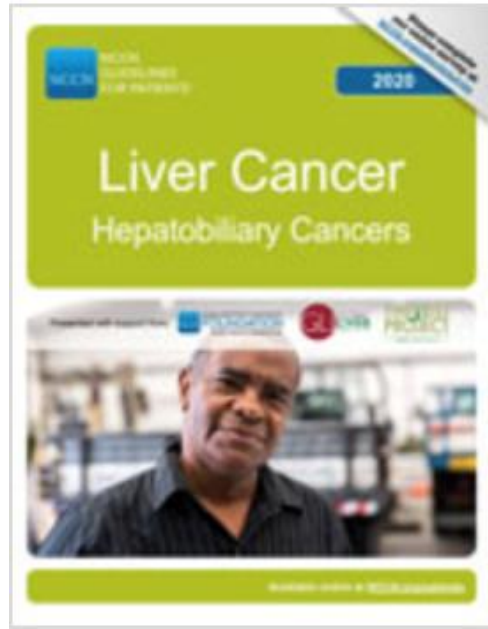
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What is Diabetes?

The pancreas secretes insulin which helps glucose from food get into your cells for energy. Without insulin, the glucose stays in the blood and does not reach inside the cells.⁴

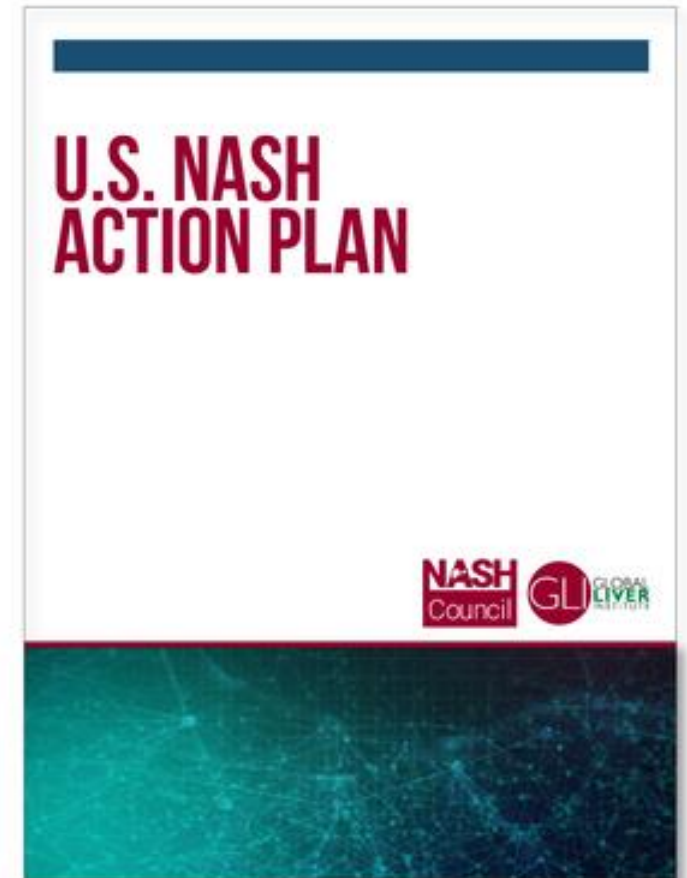
Diabetes, a chronic disease, occurs when a person's blood glucose (blood sugar) is elevated. In type 1 diabetes (T1D), the most common form appearing in children and adolescents,^{4,5} a person's pancreas produces little to no insulin by itself. Evidence suggests that T1D is an autoimmune disease.⁶ In type 2 diabetes (T2D), the most common form usually occurring in adults, a person's body becomes less responsive (resistant) to insulin and the body cannot compensate and produce enough insulin to normalize glucose levels.⁴

www.international-nash-day.com



Creating national models for action

- The U.S. Action Plan is first national plan to address NAFLD/NASH
- It provides steps for all key stakeholders in the NASH community:
 - Patients/caregivers
 - Clinicians
 - Medical societies
 - Patient advocacy organizations
 - Industry
 - Health Systems
 - Payors
 - Regulators
 - Policymakers
- Highlights the impact of NASH on:
 - Public health
 - Quality of life
 - Economy



Panel discussion



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