## A GUIDE FOR THE DIAGNOSIS AND MANAGEMENT OF PBC

Adapted from AASLD 2018 International Consensus Pathway for the diagnosis and management of primary biliary cholangitis (PBC)

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## THE RECOMMENDED DIAGNOSTIC PROCESS

## Patient with suspected primary biliary cholangitis (PBC) Persistent cholestatic abnormalities in serum biochemistry Elevated liver enzymes including ALP, GGT, AST, ALT And/or Elevated conjugated bilirubin Symptoms of PBC, including: Pruritus Sicca Arthralgias Fatigue Initial assessment Personal/family history, physical examination, abdominal ultrasound Serum (blood) biochemistry test for ALP Serum antibody (serology) test for AMA and/or PBC-specific ANA AMA is present in 90% of PBC cases ANA is present in 30% of PBC cases **Establish a secure diagnosis of PBC** ☐ Elevated ALP AMA-positive (>1/140) or anti-gp210/anti-sp100-positive **Confirmed PBC**

Canadian PBC Society. Care Pathways. Accessed November 2019 at http://pbc-society.ca/blog/aasld-meeting-november-9-13-2018/.



## RECOMMENDATIONS FOR MANAGING PBC

