



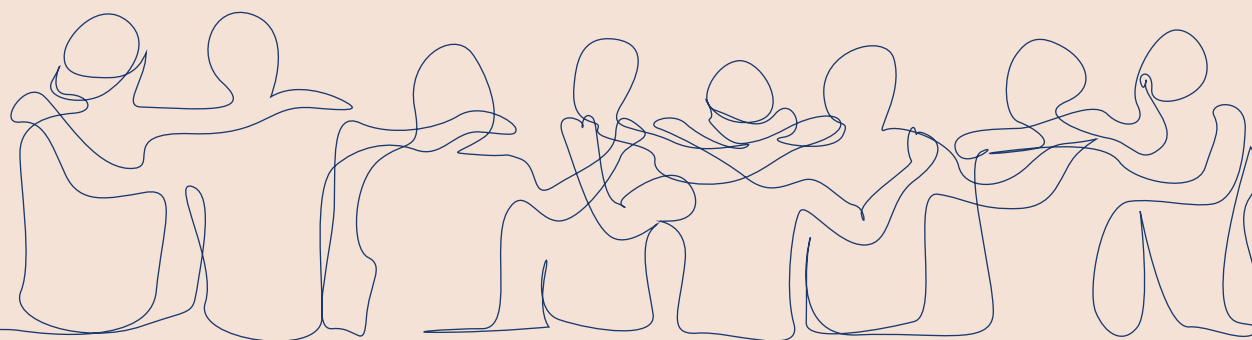
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FocusOnLiverCholestasis.com

**Navigating
Cholestasis**

LIVER CONDITIONS IN NEWBORNS

RARE SIGNS TO WATCH OUT FOR



Navigating Cholestasis

RECOGNIZING LIVER DISEASE IN NEWBORNS

Neonatal cholestasis is a rare, but serious, indicator of liver disease.¹

Early detection of cholestasis is crucial to allow for timely diagnosis and treatment, and optimize outcomes.² If left untreated for more than 60 days, infants may develop irreversible cirrhosis.²

Early detection is vital – know the **2 key signs to look for**:^{1,2}

1

Pale, acholic stools at any time

Healthy poo



Pale or chalky poo



In patients with cholestasis, serum bilirubin is principally conjugated. Lack of bilirubin entering the gut results in pale, “putty-colored” stools.³

2

Jaundice that persists beyond 2 weeks for bottle-fed babies, and 3 weeks for breast-fed babies

Prolonged jaundice can be a sign of severe liver disease, including PFIC, Alagille syndrome, and biliary atresia.^{1,4}

If your patient has pale, acholic stools or is still jaundiced after 2 weeks, request a conjugated bilirubin test.^{1,3}



A conjugated bilirubin test is a simple, reliable test for detecting neonatal cholestasis using a blood sample taken from the baby’s heel.



A conjugated bilirubin level of $>17 \mu\text{mol/L}$ ($>1 \text{ mg/dL}$) is an indicator of neonatal cholestasis. Patients with neonatal cholestasis should be referred to a pediatric gastroenterologist or hepatologist for further investigation.²



Any elevation of conjugated bilirubin should be considered abnormal, and warrants further investigations and a referral to a pediatric hepatologist or gastroenterologist.⁵

PFIC Insight

“Progressive familial intrahepatic cholestasis (PFIC) refers to a group of rare, autosomal recessive liver disorders caused by defects in bile constitution/formation, typically presenting as intrahepatic cholestasis in early childhood. Sleep disturbance, growth retardation, total and conjugated bilirubin levels, and poor quality of life have all been associated with PFIC, and lend themselves to use as markers of disease progression.”⁴

– Patrick McKiernan, *JHEP Reports*, 2023

For further support, refer urgently to your local pediatric hepatologist or gastroenterologist.

References:

1. Fawaz R, et al. *J Pediatr Gastroenterol Nutr* 2017;64:154–168; 2. Feldman AG and Sokol RJ. *Neoreviews* 2021;22:e819–e836; 3. Beckingham IJ and Ryder SD. *BMJ* 2001;322:33–6; 4. McKiernan P, et al. *JHEP Rep* 2023;6:100949; 5. Gilmour SM. *Paediatr Child Health* 2004;9:700–704.

Abbreviations:

PFIC: progressive familial intrahepatic cholestasis.

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