

Review

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Review

Laboratory Methods for Ill Liver Diagnosis

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Abstract: The study aimed to manage and to analyse the results of the laboratory methods, using liver samples, preparing and analyzing in pathology service. This mentioned, are known as routinely practice for hepatitis C diagnosis, which conduct to hepatic cirrhosis. In this study direction, chronic liver diseases stimulate a degree of hepatocyte injury. So previously mentioned modifications, alters that affect the liver architecture and finally ends in cirrhosis are well analyse on microscopic preparates.

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Introduction

Nowadays, HCV infection could be consider as one of bad results after percutaneous blood administration to ill patients. Also good to mention that HCV infection it is known as one of the most commonly through injection drug use [1]. The first and most important step in the care cascade is testing for HCV. Actually, is an enlarge number of expansion of populations eligible for testing for HCV prevention [1–3].

It is know about *care cascade*, including multiple key points in diagnosis HCV infection. An HCV *care cascade* is consider as a model for identifying opportunities and barriers in order to improve laboratory tests, linkage to care, and proper treatment access [4,5].

Relatively recently, there have been increases in HCV detection among women of childbearing age [6,7]. Reinfection with HCV after curative therapy in illness status in different patients, is an important key point for medical team [8–10]. The proper laboratory techniques include immunoglobulin (Ig) G antibody enzyme immunoassays (anti-HCV) and nucleic acid tests (NAT), as modern methods, in conection with blood tests [11]. In case that need to distinguish between two directions such as true or false positivity of the anti-HCV antibody result, previously mentined tests, may be done with a second FDA-approved HCV antibody assay that is different from previously used for testing [11,12]. Morphologically, HCV is an enveloped, positive-sense, single-stranded RNA virus of the *Flaviviridae* family [13–15]. The great key point knowing as a start of the direct-acting antiviral (DAA) era was in 2011. The important role in this direction was the introduction of two NS3/4A protease inhibitors. Both previously mentioned were used in combination with interferon-based regimens for chronic HCV treatment to ill patients diagnosed [16]. Results of studies show that the HCV replication process is error prone. Finally results practically could be observe in variant viruses knowing as quasispecies [17,18]. Nowadays there are 7 genotypes of HCV. So there are known 6 major genotypes and the recent addition of genotype 7. This last 7 genotip has been found only in a few cases diagnosed to HCV positive patients [19]. Hepatitis C virus (HCV) infection is a great cause of various liver diseases as cirrhosis and hepatocellular carcinoma. Following promising news, significant scientific discovering things remain in attention for reducing morbidity and mortality, associated to HCV [20,21]. Understanding the properties of hepatitis C virus (HCV) viral RNA and proteins facilitates the development of diagnosis methods and also a proper treatment, including antivirals [22–24]. In addition we can mention that HCV genotyping assays approved for *in vitro* diagnostic use are commercially available [25,26]. Cirrhosis, as a nowadays disease, is characterized by fibrosis and nodule formation of the liver. In the secondary plan, it is known as a chronic injury, which leads to alteration of the normal lobular organization of the liver. A complex of

factors, such as life style, or environmentals, can injure the liver, and beside also including viral infections, toxins, hereditary. With each injury, the liver suffer alterations as fibrosis. Finally but after a long-standing injury, liver functionalalteration, develop in time cirrhosis as a complex diseases. Ethiology of the chronic liver diseases usually progress unfortunately in cirrhosis, following pathological mechanisms [27].

Material and Methods

In order to assist medical staff in understanding the concerns outlined, a series of digital images have been prepared. The operative pieces are intended to bring in the pathological anatomy service for macroscopic examination for diagnostic purposes. This are examined by performing the optical microscopic analysis.

Normal liver structure, using an optical microscope analyse and a special staining namely Masson. We can observe hepatocytes and interlobular spaces and septa [Figure 1].

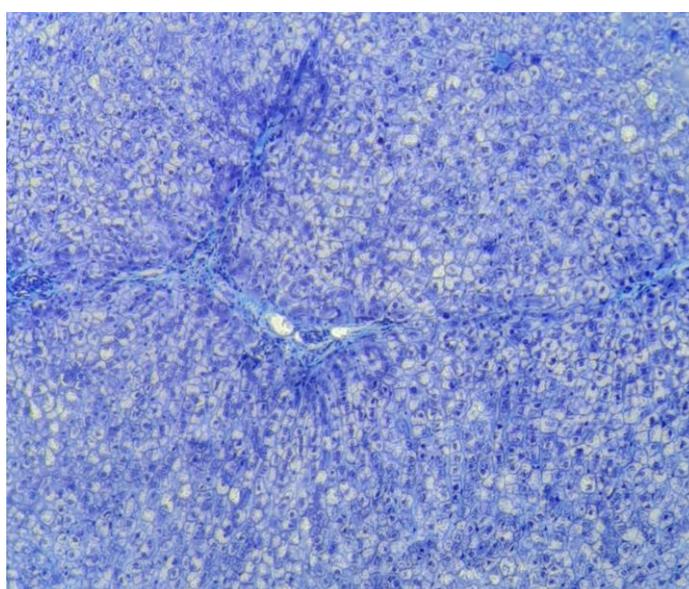


Figure 1. Normal Liver x10 Masson staining.

A similar observation on a normal liver structure but using another specific staining known as Argentica impregnation Gomori. Also is possible to observe the Kiernan space with portal vein in section and with hepatic arter in section together with biliar canaliculum insection [Figure 2].



Figure 2. Normal Liver x10. *Argentica impregnation.*

In liver cirrhosis, on samples could be observe tissue fibrosis and alterations in the normal liver architecture in abnormal structural nodules [Figure 3].

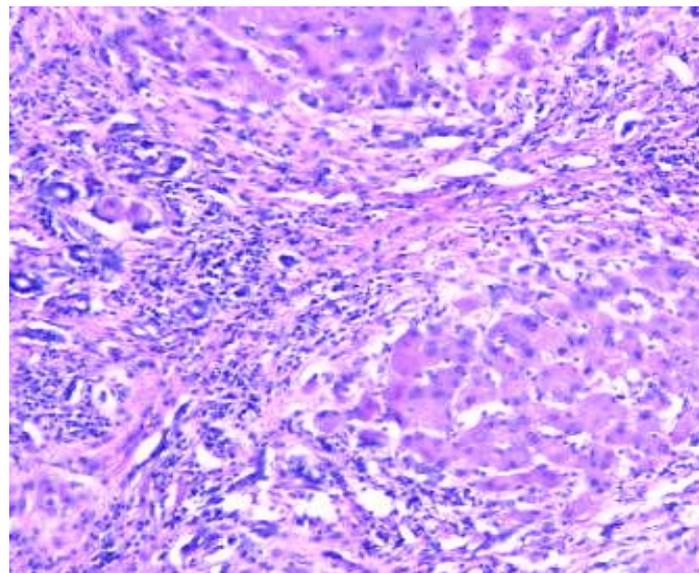


Figure 3. Cirrhosis liver x10 HE.

A similar coming image with specific structural changes in liver structure and with vascularized fibrotic septa in cirrhosis More than, we can mention in this disease, about portal hypertension [Figure 4].

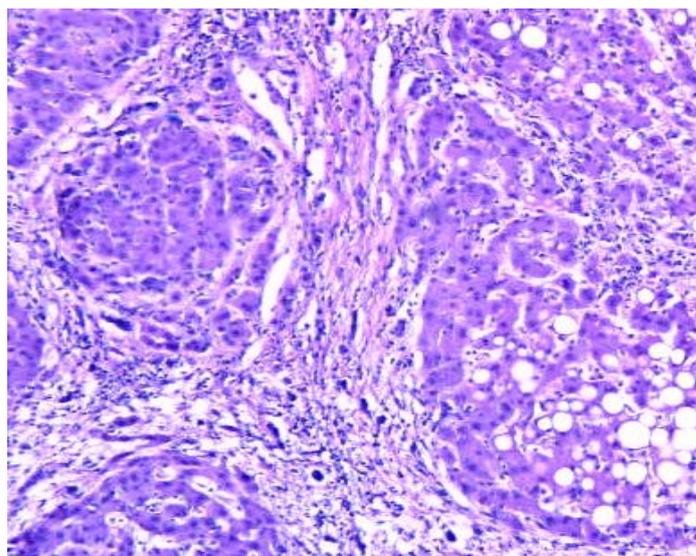


Figure 4. Cirrhosis liver x10 HE.

Conclusions

Research studies predict about not so a good prognosis of patients diagnosed with cirrhosis, knowing laboratory results and clinical points. Comorbidities are bad for a good prognostic to ill person diagnosed with cirrhosis. So a proper medical abordation could be a little to hard to establish after the rules from personalized medicine. The future trends are in attention for the coming time, knowing possible unclearities in cirrhosis management.

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