

## PP15

### Compliance with BSG/BASL decompensated cirrhosis care bundle

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#### *Abstract*

**Background:** This audit focuses on Compliance with the British Society of Gastroenterology (BSG) and British Association for the Study of the Liver (BASL) Decompensated Cirrhosis Care Bundle as decompensated liver cirrhosis is becoming a burden on the current NHS.

**Objectives:** The study aims to ensure that future admissions with decompensated cirrhosis adhere to the care bundle, identify areas of poor compliance, and pinpoint areas for improvement.

**Methodology:** Over the course of 6 months, a sample of 29 patients, ranging in age from 29 to 77, were evaluated at Hinchingbrooke Hospital. Presentations and compliance were examined using manual medical take clerking searches.

**Findings:** Common presentations included jaundice, ascites, and variceal bleeding. In-hospital mortality stood at 31%. While basic investigations were generally compliant, there were significant non-compliance rates for septic screen (38%), ascitic tap (37%), and USS abdomen (24%). Partial compliance was noted in recording alcohol intake (87%) and prescribing IV Pabrinex (89%), with non-compliance for CIWA (74%). Variceal bleeding management showed non-compliance in prophylactic antibiotics (60%), terlipressin (70%), and vitamin K (43%), while adequate lactulose dosing in encephalopathy was non-compliant in 71% of cases. VTE prophylaxis prescribing showed high compliance at 92% in appropriate cases.

**Conclusion:** The audit highlights the need to adhere to the use of decompensated cirrhosis care bundle. It shows gaps in compliance which can be areas for improvement and education.

Keywords: *liver cirrhosis; audit; education; compliance*