

Evidence Discussion (AB 26.1)

Ascites

According to AASLD guidance for ascites management, Doppler ultrasound is the preferred initial radiologic test. Ultrasound is highly sensitive for diagnosing ascites and does not expose patients to radiation.

Depending on the analysis of the ascitic fluid, further imaging such as CT (to evaluate for malignancy or cirrhosis) or an echocardiogram (for heart failure) may be warranted.

For patients with refractory ascites and a LaVeen Shunt, a nuclear peritoneal-venous shunt study is the recommended imaging choice.

References

1. Conangla-Planes M- et al Imaging diagnosis of portal hypertension. Radiologia (Engl Ed). 2018 Jul-Aug;60(4):290-300
2. Biggins SW et al-Diagnosis, Evaluation and Management of Ascites, Spontaneous Bacterial Peritonitis and Hepatorenal Syndrome: 2021 Practice Guidance by AASLD. Hepatology 2021;74:1014-1048
3. Rosenthal L et al: Observations on the radionuclide assessment of peritoneovenous shunt patency. Clin Nucl Med 9:227- 235, 1984