NASKAH LENGKAP
The 11th Liver Update and
The Scientific Meeting of INA ASL/PPHI
In Conjunction with
The 7th China-Indonesia Joint Symposium on
Hepatobiliary Medicine and Surgery (CISHMS)
2018

TROEF SOEMARNO
JL MOJKLANGGRU WETAN 2 NO 12
RT09/05
MOJO
GUBENG
SURABAYA

TIM EDITOR :
Rino Alvani Gani
Irsan Hasan
C. Rinaldi A. Lesmana

PERHIMPUNAN PENELITI HATI INDONESIA
PO-01
Effects of Purslane (*Portulaca oleracea*) Extract on Liver Histopathology Overview in Wistar Strain Male White Rat (*Rattus norvegicus*) Induced by Paracetamol
Eva Pravitasari Nefertiti ............................................................................................................. 207

PO-02
Correlation Neutrophil Lymphocite Ratio (NLR) in HepatoCellular Carcinoma Based on Okuda and Clip Staging System
Grendi Yonarko............................................................................................................................ 215

PO-03
Correlation Between Severity of Liver Fibrosis and Platelet Lymphocyte Ratio in Patients with Chronic Hepatitis B Infection at Sanglah General Hospital Bali, Indonesia
Godfried EY Saragih ..................................................................................................................... 223

PO-04
Occult Hepatitis B Virus Infection Among Health-care Workers with Anti-HBc Reactivity
Teguh Wijayadi ................................................................................................................................ 224

PO-05
Carvedilol vs Esophageal Variceal Ligation (EVL) for Primary and Secondary Prevention of Variceal Bleeding: Systematic Review and Meta-Analysis
Michael Dwinata .......................................................................................................................... 226

PO-06
Administration of Metformin Inhibit The Expression of SREBP-1c in Type 2 Diabetes Mellitus Rats-Induced Liver Carcinogenesis
Wahyuni L. Atmodjo .................................................................................................................... 228
Effects of Purslane (*Portulaca Oleracea*) Extract in White Male Wistar Rat (*Rattus Norvegicus*) Liver Induced By Paracetamol


* Faculty of Medicine, Hang Tuah University, Surabaya, East Java, Indonesia
** Division of Gastroentero-Hepatology, Department on Internal Medicine, Faculty of Medicine, Airlangga University, Soetomo Hospital, Surabaya, East Java, Indonesia

Introduction

Nowadays, many people use drugs freely without prescription, especially anti-inflammatory drugs. One of the herbal plants already known as an inflammatory drug was purslane plant. The purslane plant (*Portulaca oleracea*) has been used as a folk medicine in many countries to treat illness. This plant is used as a medicine for scabies, liver complaints, dysuria, lung disease, and as a tonic (1). Moreover, purslane is known in Chinese as a hypotensive and anti-diabetic (2,3). In vivo and in vitro tests have done to determine purslane extract effect, for example; it has anti-inflammatory, analgesic, and anti-oxidant activity (4), while there are no reports of the effect of purslane on liver damage. This study investigated the hepatoprotective activities of the ethanolic and aqueous extracts of purslane. The present investigation is designed to evaluate the potential hepatoprotective effect of ethanolic and aqueous extracts of air-dried leaves of purslane against paracetamol-induced hepatotoxicity. Although paracetamol is relatively safe to use in therapeutic doses, overdose of paracetamol may lead to Reactive Oxygen Species (ROS) that can cause hepatic damage (5,6).

Paracetamol dose of 140 mg/kg in children and 6 grams in adults potentially induce hepatotoxic. 4g doses in children and 15g in adults can cause every hepatotoxicity resulting in liver central lobular necrosis. Dose greater than 20g are fatal (8). Based on the above description, the purpose of this research is to know the effect of purslane extract (*Portulaca oleracea*) on the histopathology of white male wistar rat (*Rattus norvegicus*) liver induced by paracetamol. The aim of this study was to know and analyze the purslane extract (*Portulaca oleracea*) as hepatoprotective in white male wistar rat.
The Effects of Pineapple Extract (*Ananas comosus*) to Liver Histopathological Overview of White Male Wistar Rat (*Rattus norvegicus*) Induced by Paracetamol

Wulan Medhika Anggraeni, Bambang Suyono, Eva Pravitasari Nefertiti, Troef Soemarno 
*Faculty of Medicine, Hang Tuah University, Surabaya, East Java, Indonesia*

**Background:** Paracetamol is a widely used medicine as an analgesic. When taken in overdose, accumulation of free radicals due to NAPQI metabolites in liver can occur. Alternative ingredients are needed to prevent a liver damage, such as antioxidant which can neutralize the free radicals. Pineapple contains both enzyme and antioxidant agent that can act as hepatoprotector.

**Aims:** This research aimed to evaluate the effects of giving pineapple extract (*Ananas comosus*) towards the portrayal of liver histopathology on male white rat of wistar strain induced with paracetamol.

**Methods:** This research was laboratory experimental with post test only group design. There were 3 groups: Negative control group (K-) was given CMC-Na 1% and 100 mg ethanolic extract of pineapple (*Ananas comosus*), positive control group (K+) was given 2 g paracetamol, and Treatment group (P) was given 100 mg ethanolic extract of pineapple (*Ananas comosus*) and 2 g paracetamol. On the 15th 15th day, the experimental animal was sacrificed and prepared for histopathological examination on damage liver cell. The data was analyzed by Kruskal-Wallis test and Mann Whitney U test.

**Results:** Mann Whitney U test showed a significant result between negative control and positive control, also between positive control and treatment group. While between negative control and treatment group was not significantly different.

**Conclusions:** Giving pineapple extract (*Ananas comosus*) can decrease the level of liver cell damage which noticed by the present of liver cell’s necrosis on a group of experimental animals given paracetamol.
Haematemesis Due to Variceal Bleeding as an Early Manifestation of Myelofibrosis

Randhy Fazralimanda*, Chyntia Olivia Maurine Jasirwan**, Wulyo Rajabto***
*Department of Internal Medicine, Universitas Indonesia, Cipto Mangunkusumo General Hospital, Jakarta, Indonesia
**Hepatobiliary Division, Department of Internal Medicine, Universitas Indonesia, Cipto Mangunkusumo General Hospital, Jakarta, Indonesia
***Haematology and Oncology Division, Department of Internal Medicine, Universitas Indonesia, Cipto Mangunkusumo General Hospital, Jakarta, Indonesia

Introduction. Myeloproliferative neoplasms (MPN) include the Philadelphia chromosome-positive chronic myeloid leukaemia (CML), primary myelofibrosis (PMF), the polycythemia vera (PV) and the essential thrombocytopenia (ET). For PMF, extramedullary hematopoiesis also happens in locations other than bone marrow such as the spleen, liver and lymph nodes. Massive increased splenoportal blood flow, decreased hepatic vascular compliance and hepatic venous thrombosis may develop severe portal hypertension. Increased portal hypertension results in increased risk of ascites, oesophagus and fundus varices.

Case illustration. A 50-years old man was referred to our hepatology clinic from haematology clinic with haematemesis. The patient had never experienced it before. Physical examination found pale conjunctivae and Schuffner 3 splenomegaly. The patient was also presented with anaemia, negative markers for hepatitis, positive bone marrow histology of myeloproliferative neoplasm and positive JAK2 V617F mutation. Endoscopy found a positive grade 3 oesophagalvarices and abdominal CT scan found thrombosis in patient’s portal vein. Respectively, the patient was diagnosed with a ruptured oesophagal varices in the event of increased portal hypertension due to its myelofibrosis process.

Discussion. Portal hypertension resulting from myeloproliferative neoplasm cases are still under-reported. This complication arose in about 7% of patients with myelofibrosis. Our patient came with haematemesis suspected because of its increased portal hypertension. This resulted from its portal vein thrombosis found from his abdominal CT scan. An erythrocytosis and an increment of blood viscosity, thrombocytosis, and platelet