

# MÁSTER EN HEPATOLOGÍA

**UAM**  
Universidad Autónoma  
de Madrid

 Universidad  
de Alcalá

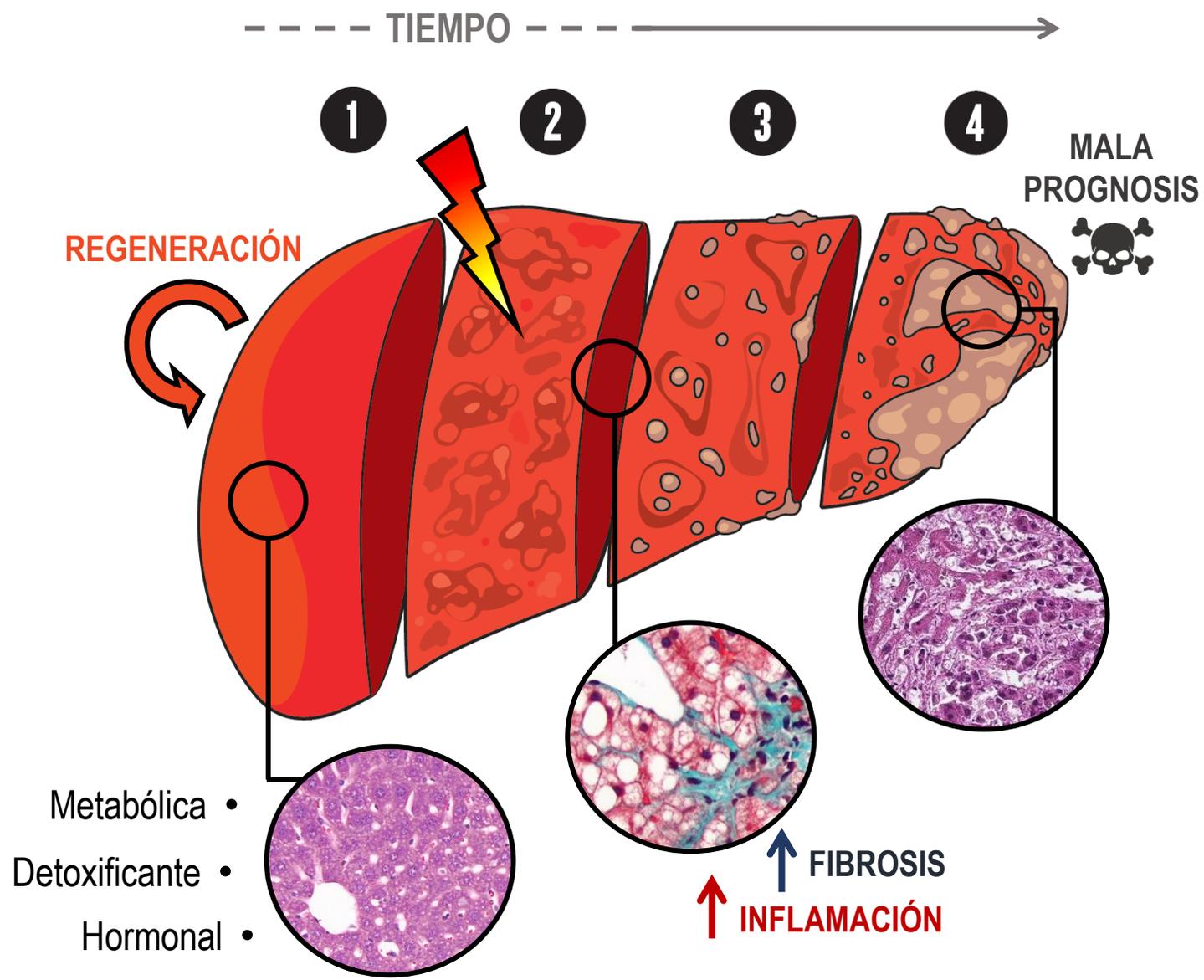
Asignatura: Cirrosis III

## “Daño de la barrera intestinal en la cirrosis: contribución a la inflamación sistémica y progresión”

Rubén Francés

Universidad Miguel Hernández, IIS ISABIAL, Hospital General Alicante, CIBERehd

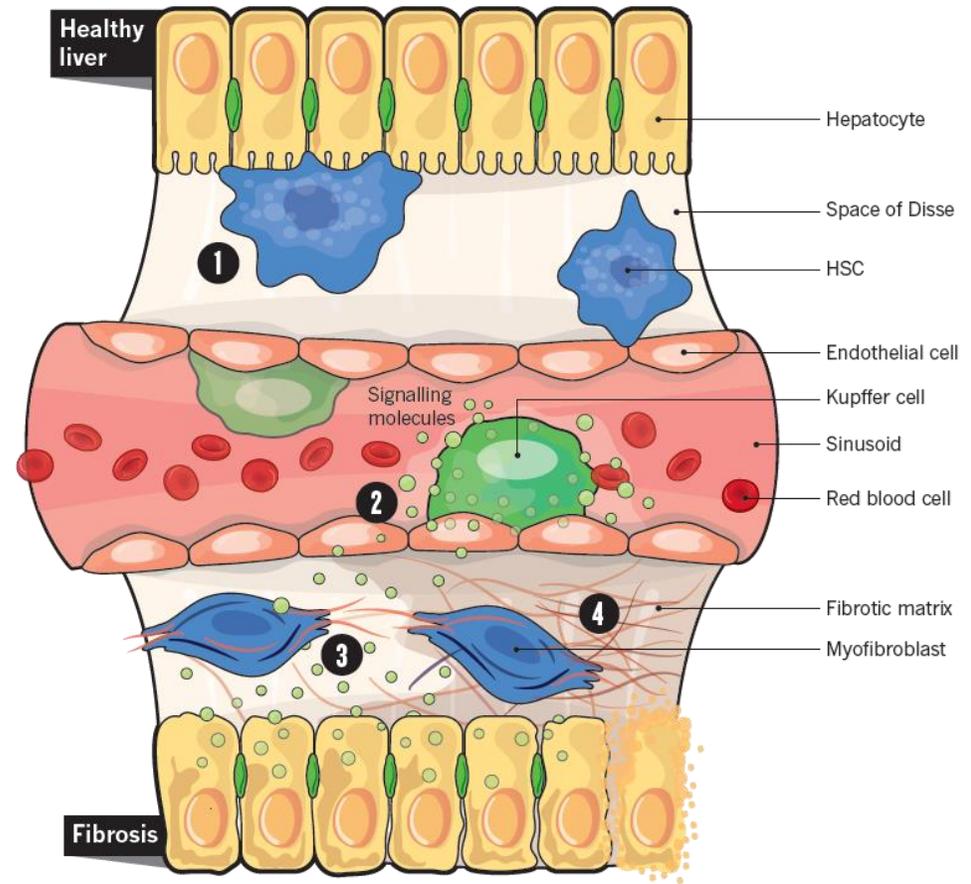
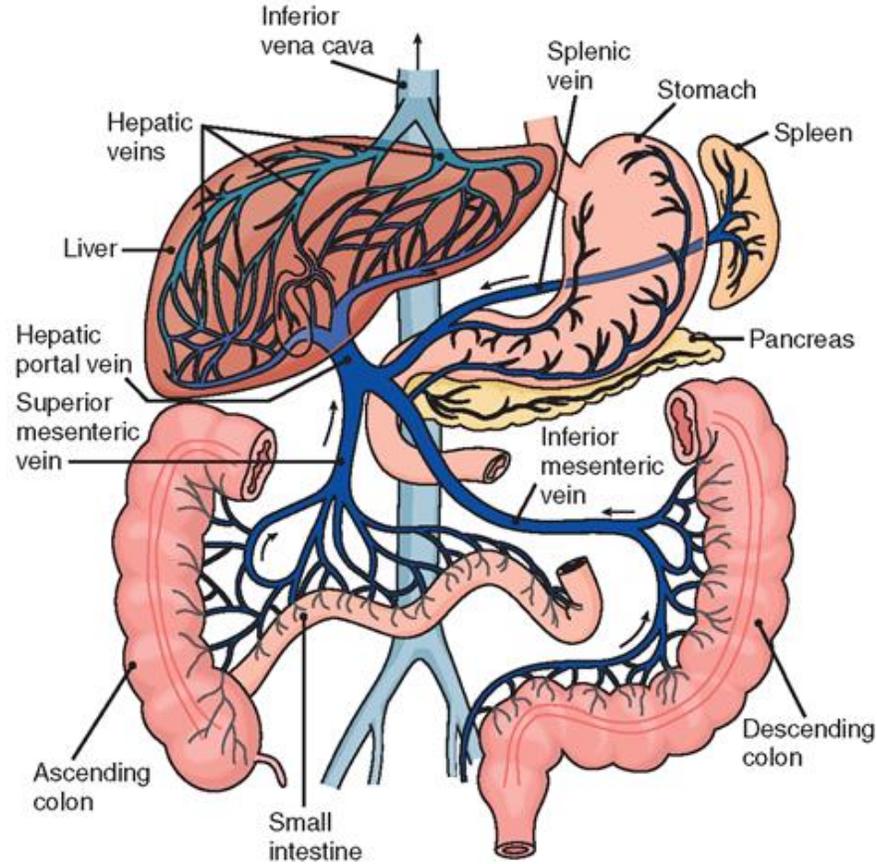
[@get\\_ruben](https://twitter.com/get_ruben)



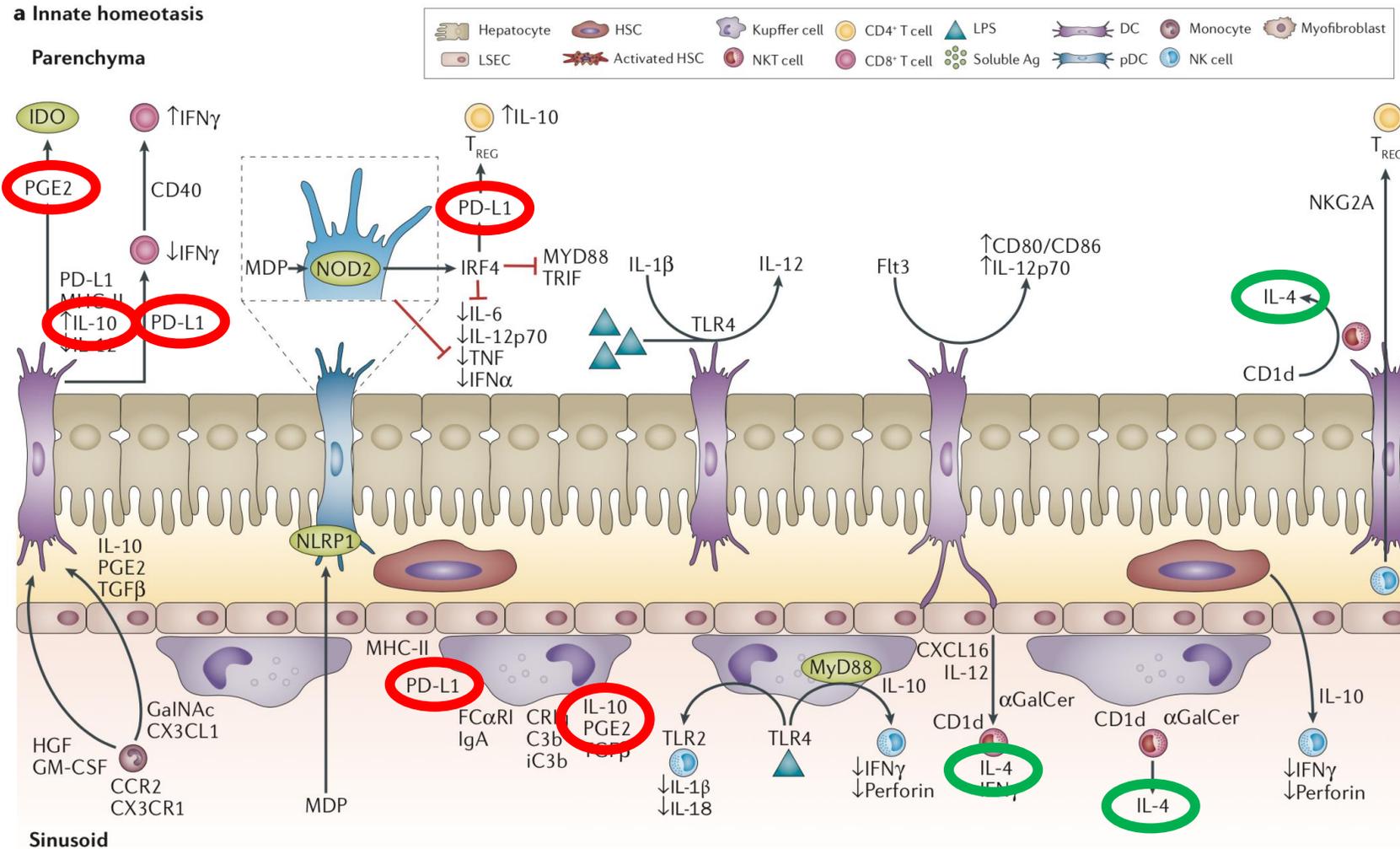
# Índice

1. Función del hígado en el scouting de la sangre portal
2. Eje hígado – intestino
3. Composición de la barrera intestinal
4. Disbiosis intestinal en la cirrosis
5. Sistema Inmunitario y respuesta inflamatoria
6. Recuperación de la integridad de la barrera intestinal

# 1. Función de scouting de la sangre portal



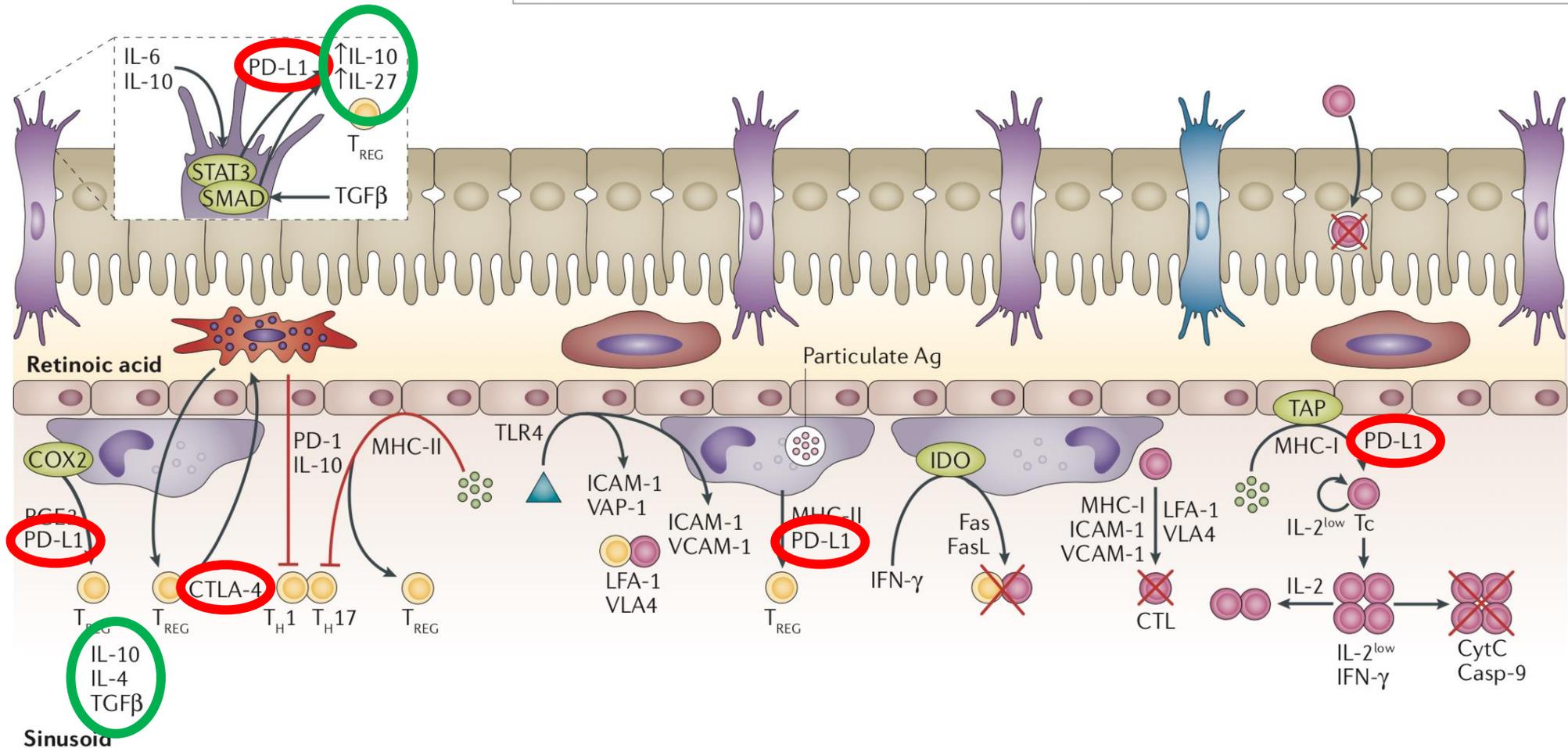
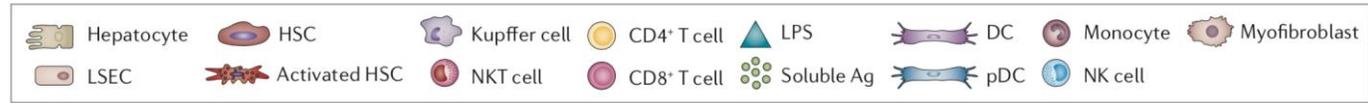
# Equilibrio → Tolerancia



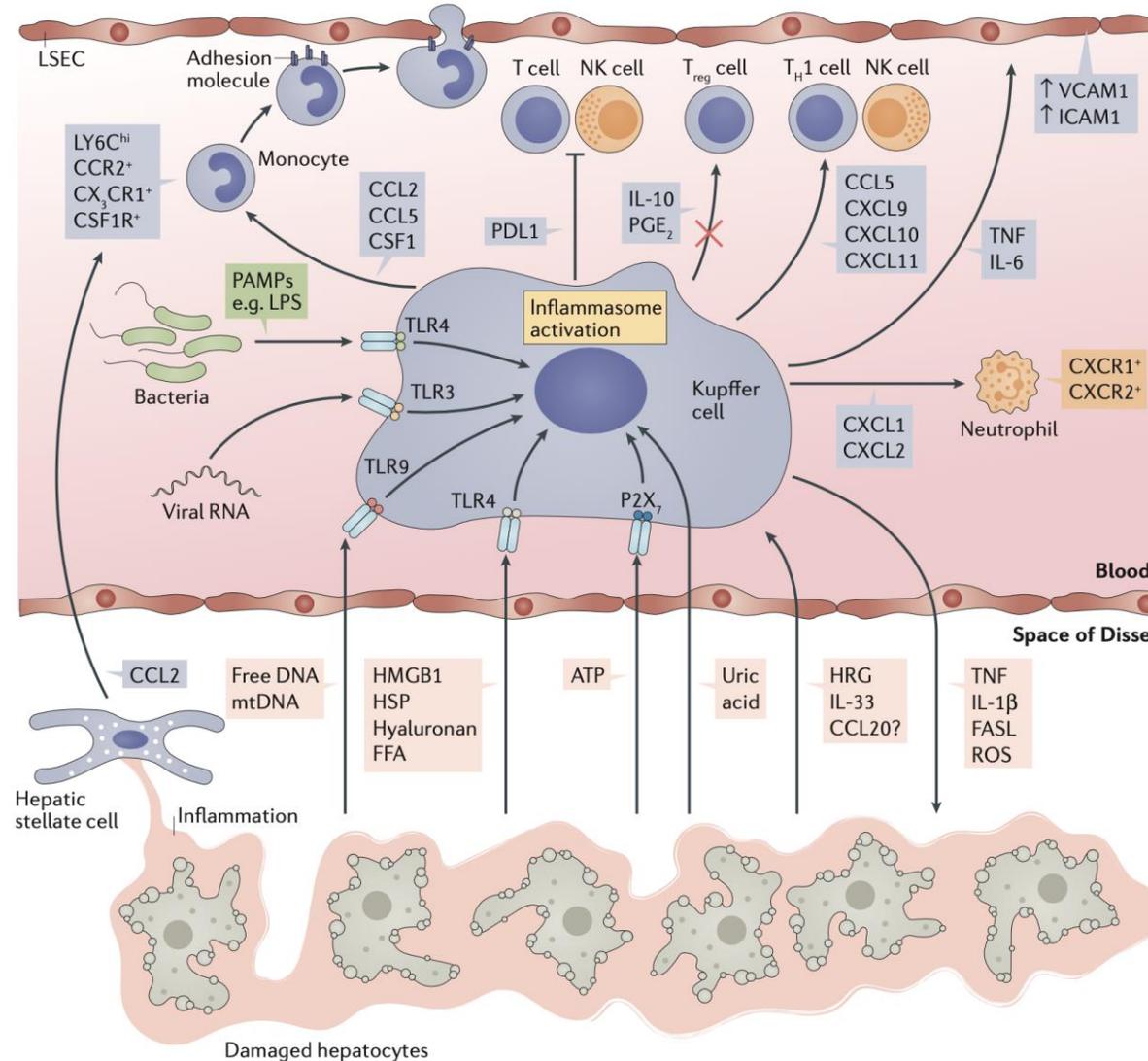
# Equilibrio → Tolerancia

## b Adaptive homeostasis

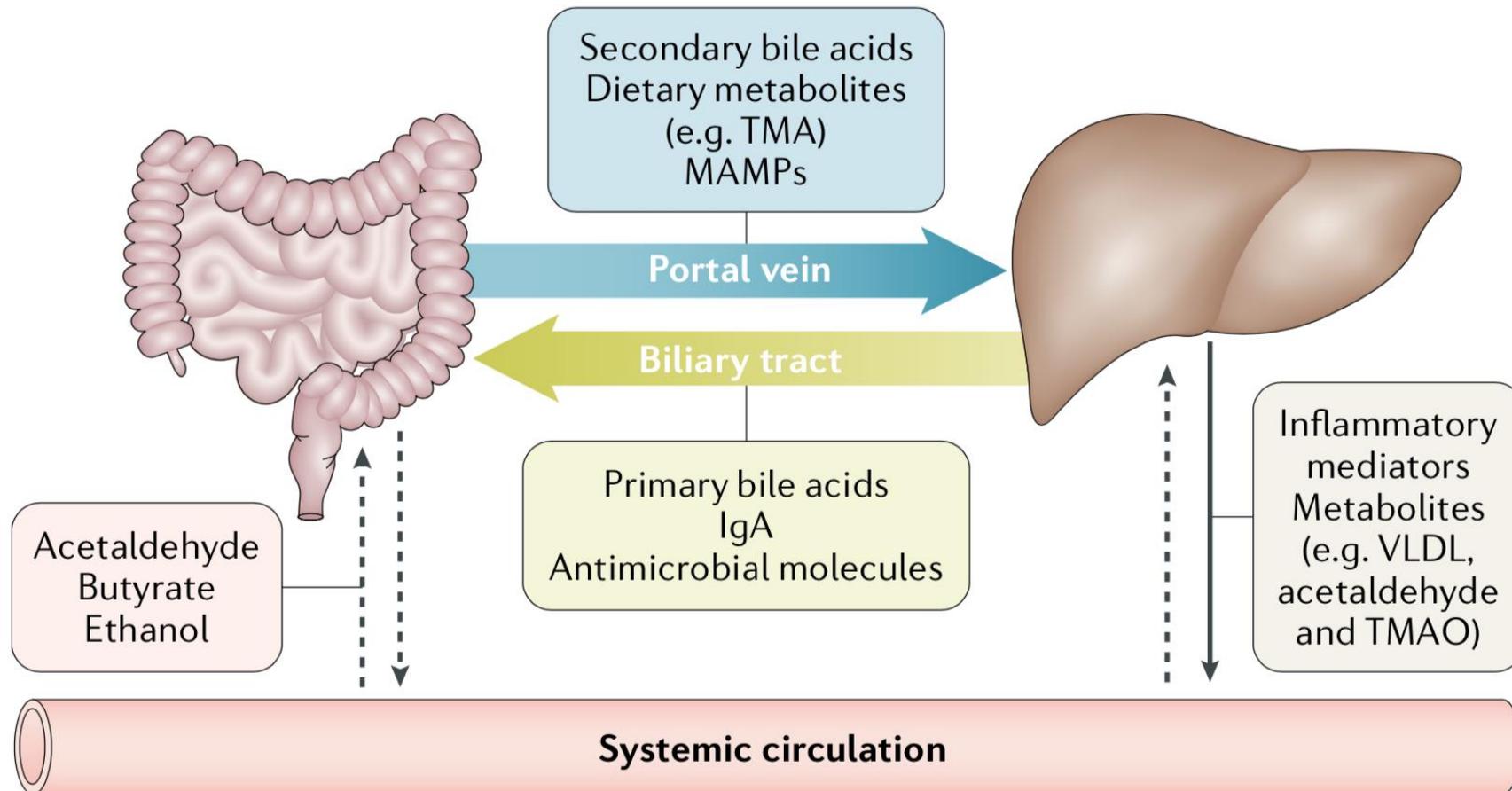
Parenchyma



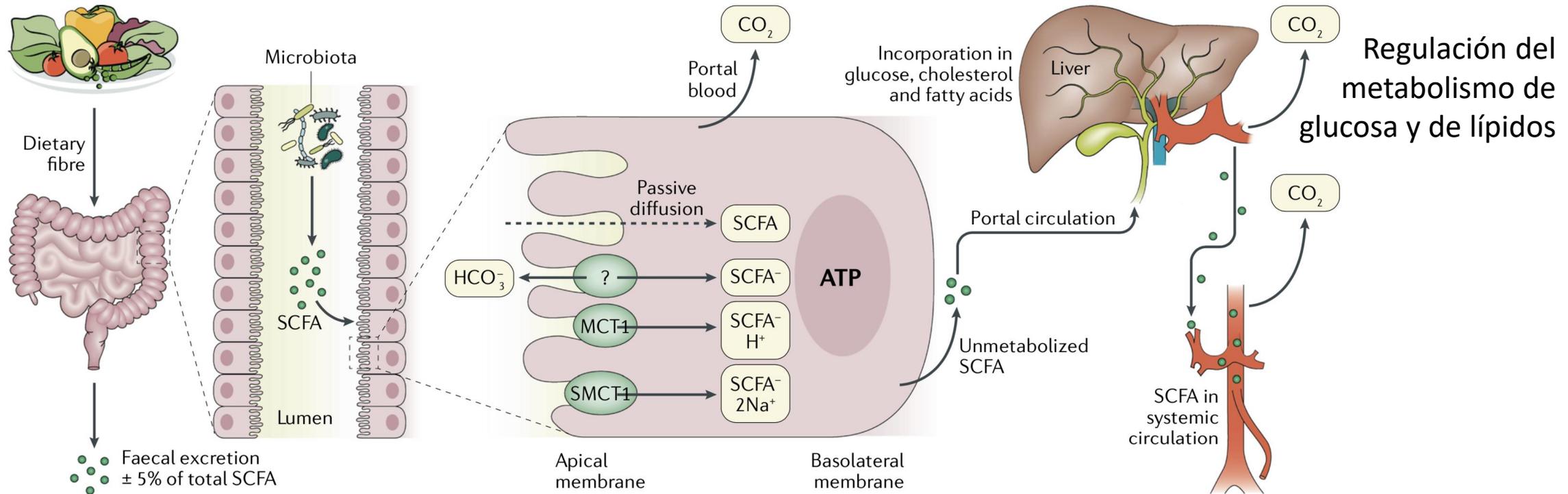
# Desequilibrio → Inflamación



## 2. Eje hígado - intestino



# Ácidos grasos de cadena corta



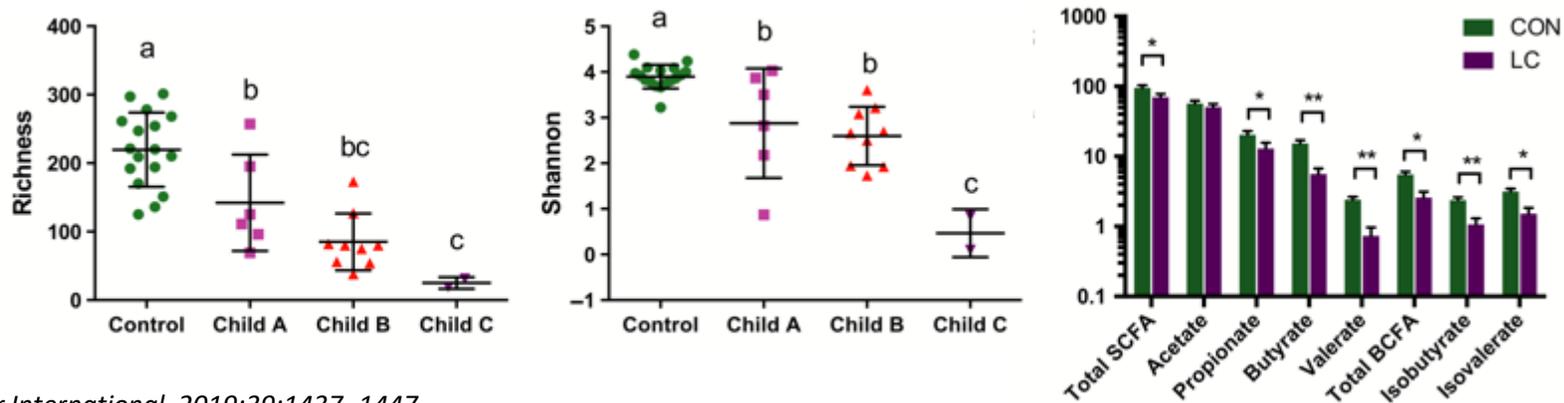
Nat Rev Gastroenterol Hepatol. 2019; 16: 461-478

Regulación de la presión sanguínea  
Regulación de la respuesta inflamatoria



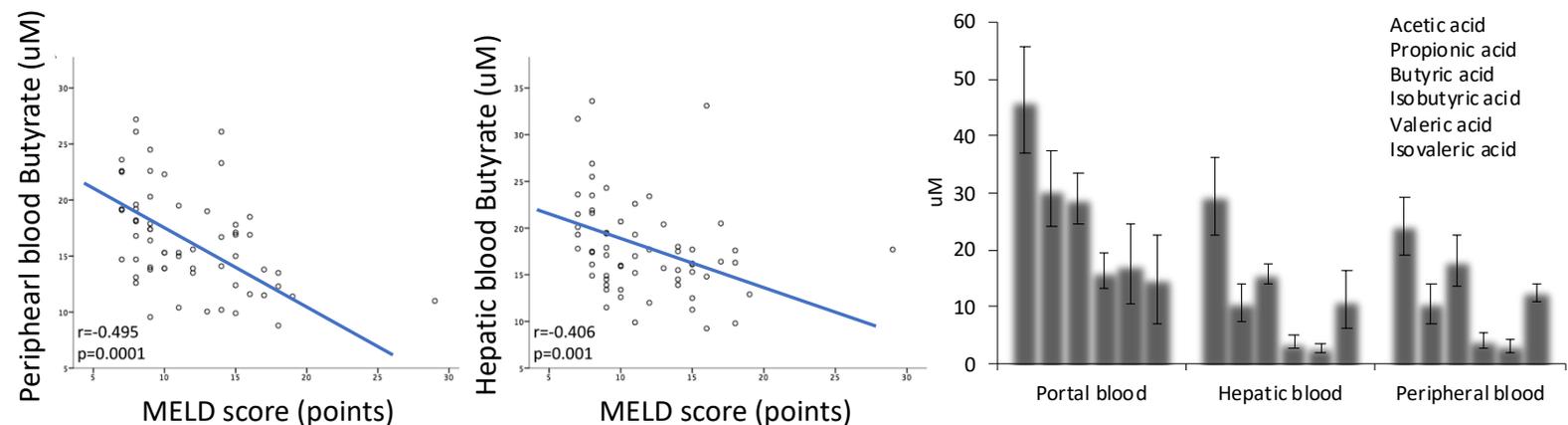
# Ácidos grasos de cadena corta

Reduced capacity of fecal microbiota to produce SCFAs in cirrhosis



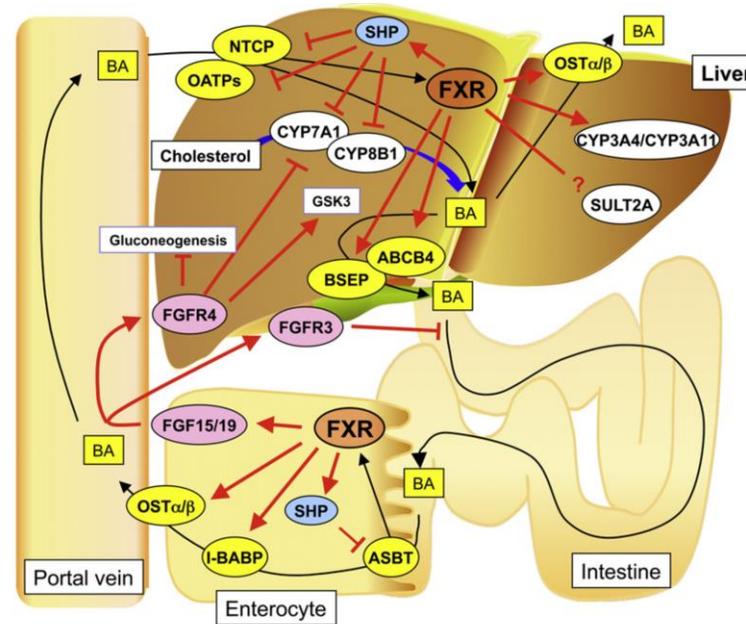
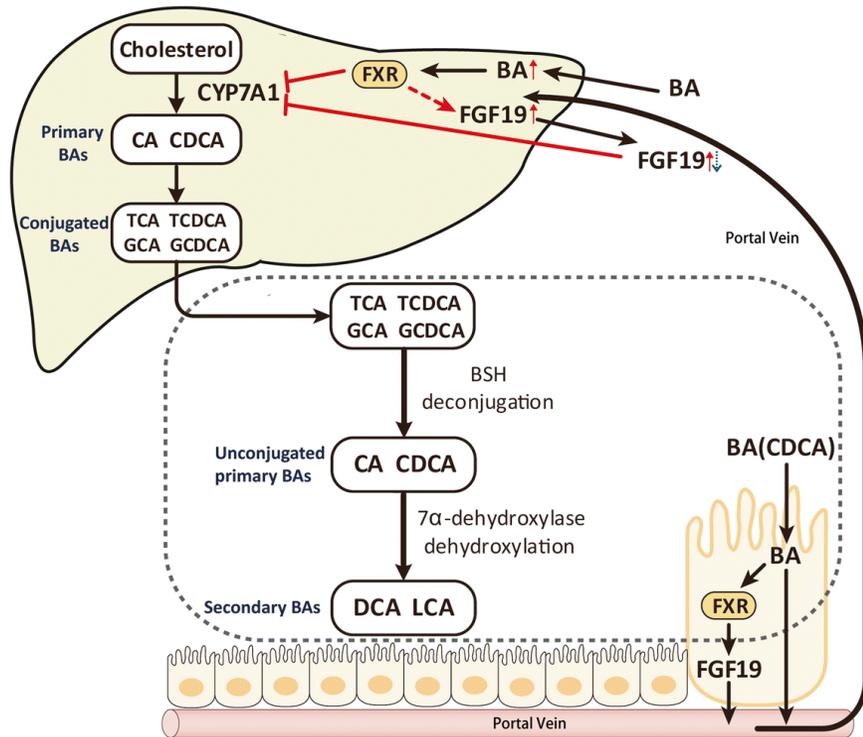
*Liver International. 2019;39:1437–1447*

Reduced SCFAs in cirrhotic patients is associated with more advanced liver disease



*FASEB J. 2019; 33: 11595–11605*

# Ácidos biliares



Cirrosis

- Hígado: ↓ flujo de ácidos biliares
- Intestino: ↓ ácidos biliares primarios
- ↑ ácidos biliares secundarios
- ↓ señalización por FXR

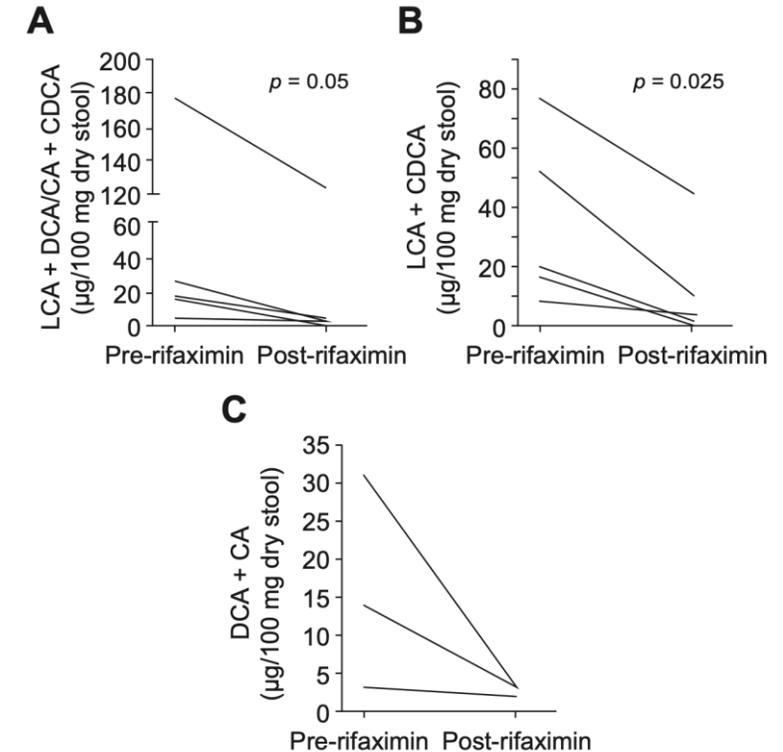
# Ácidos biliares y FXR en cirrosis

Median values in $\mu\text{g}/100 \text{ mg dry stool}$	Controls (n = 14)	Early cirrhosis (n = 23)	Advanced cirrhosis (n = 24)
<b>Total bile acids</b>	206.5	156.1	39.0*
<b>Primary</b>			
CA (% in whom detected)	36.0 (14)	64.6 (22)	16.0 (71)**†
CDCA (% in whom detected)	3.1 (51)	10.1 (57)	12.4 (83)**†
<b>Secondary</b>			
LCA (% in whom detected)	83.2 (100)	63.8 (87)	12.7 (46)**†
DCA (% in whom detected)	110.7 (100)	35.8 (83)	8.3 (50)**†
<b>Secondary/primary ratios</b>			
LCA/CDCA	39.7	7.6	2.2*
DCA/CA	6.3	3.2	0.9*
LCA + DCA/CDCA + CA	79.8	9.6	0.004*

\* $p < 0.05$  between groups on Kruskal–Wallis tests on median concentrations.

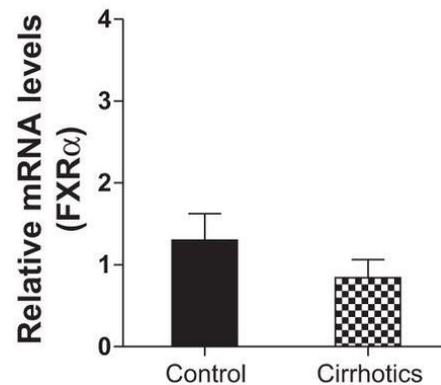
† $p < 0.05$  between groups on percent in whom the respective bile acids were detected.

CA, cholic acid; CDCA, chenodeoxycholic acid; LCA, lithocholic acid; DCA, deoxycholic acid.

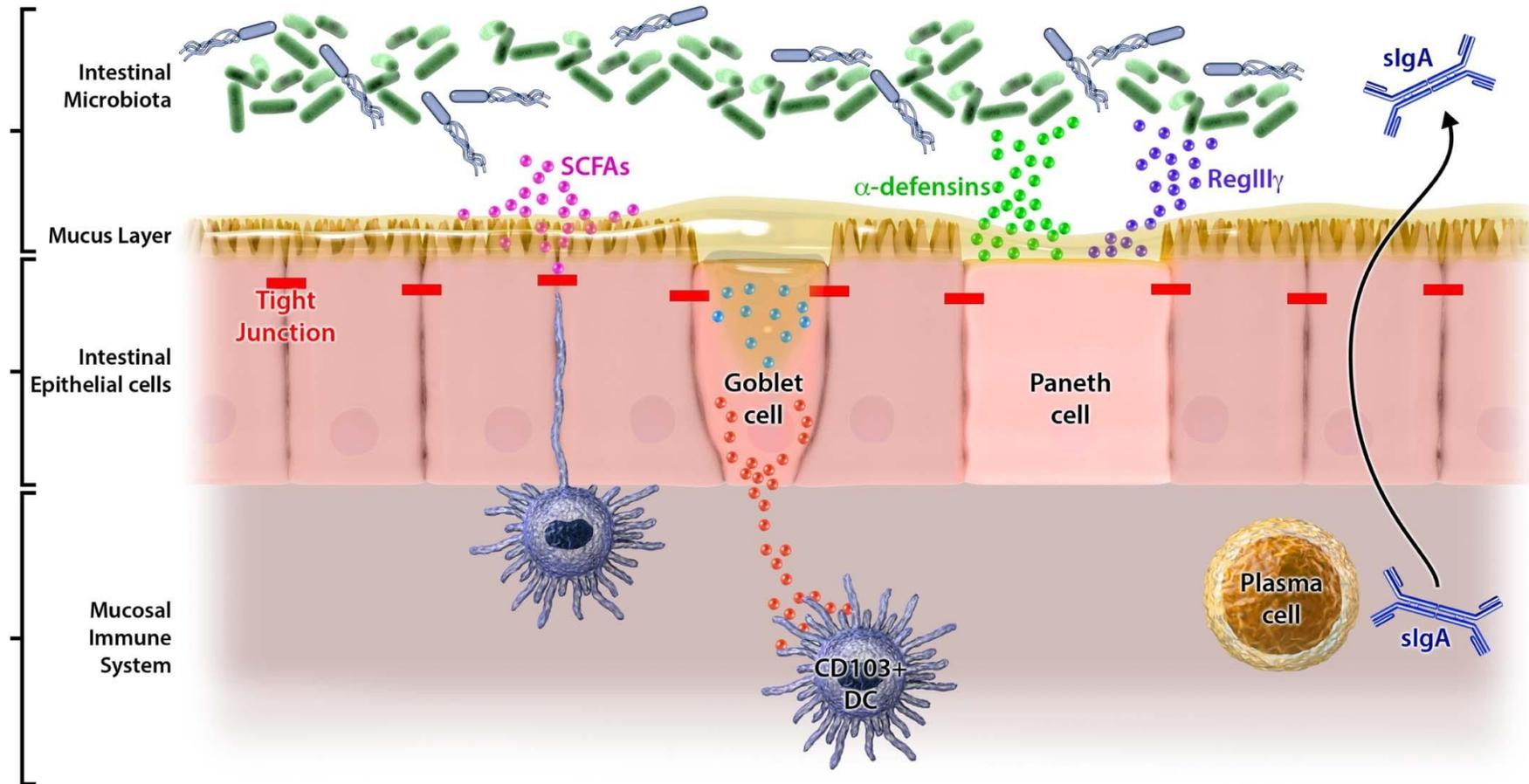


*Journal of Hepatology* 2013; 58: 949–955

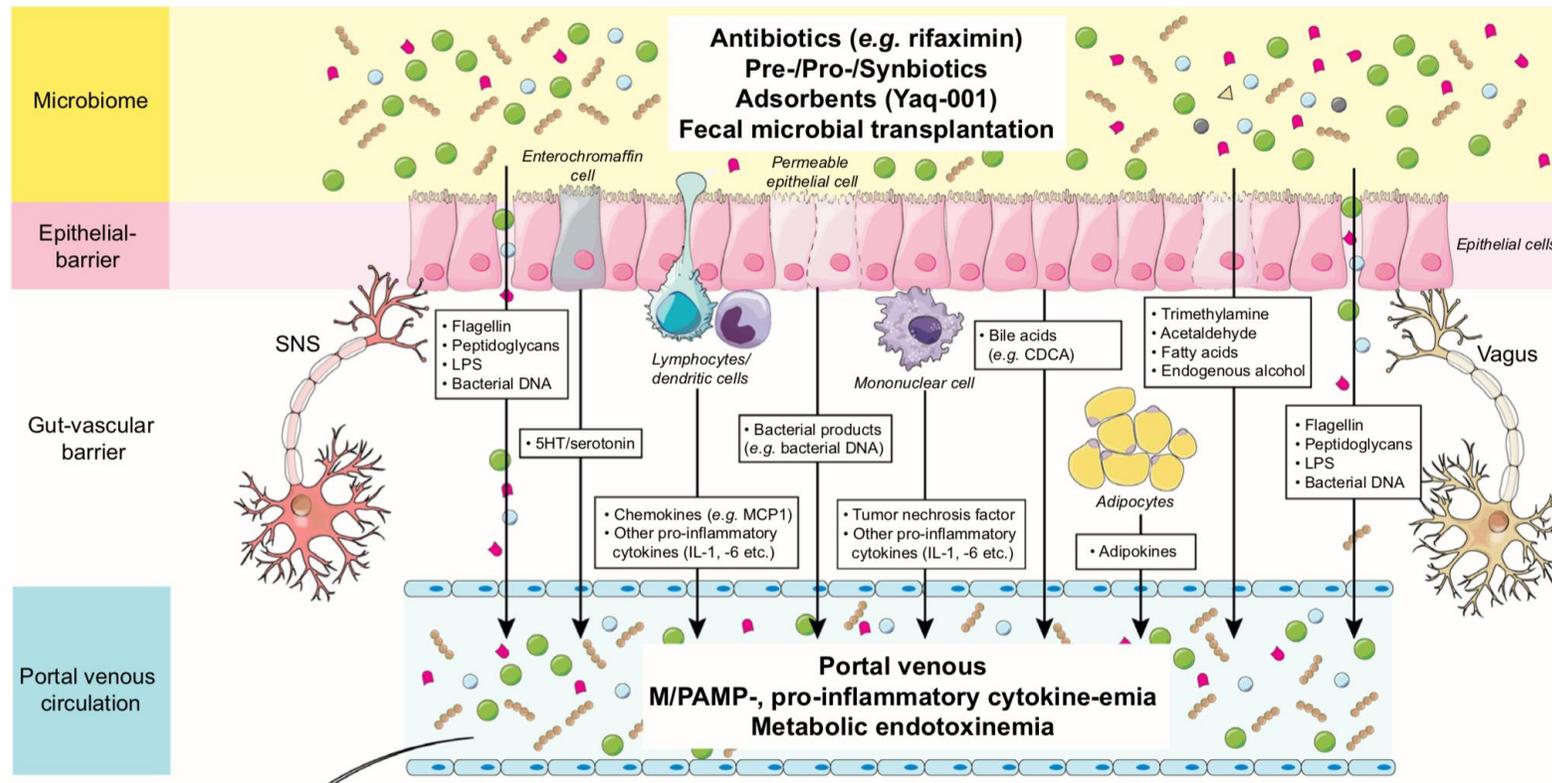
*Hepatology* 2003; 37:551-557



# 3. Composición de la barrera intestinal



# Composición de la barrera intestinal



*J Hepatol.* 2017 Nov;67(5):1084-1103

- Cirrhosis impairs the muco-epithelial barrier promoting pathological BT via the portal-venous circulation.

- This barrier appears to be FXR-modulated, as FXR-agonists reduce portal-venous BT.

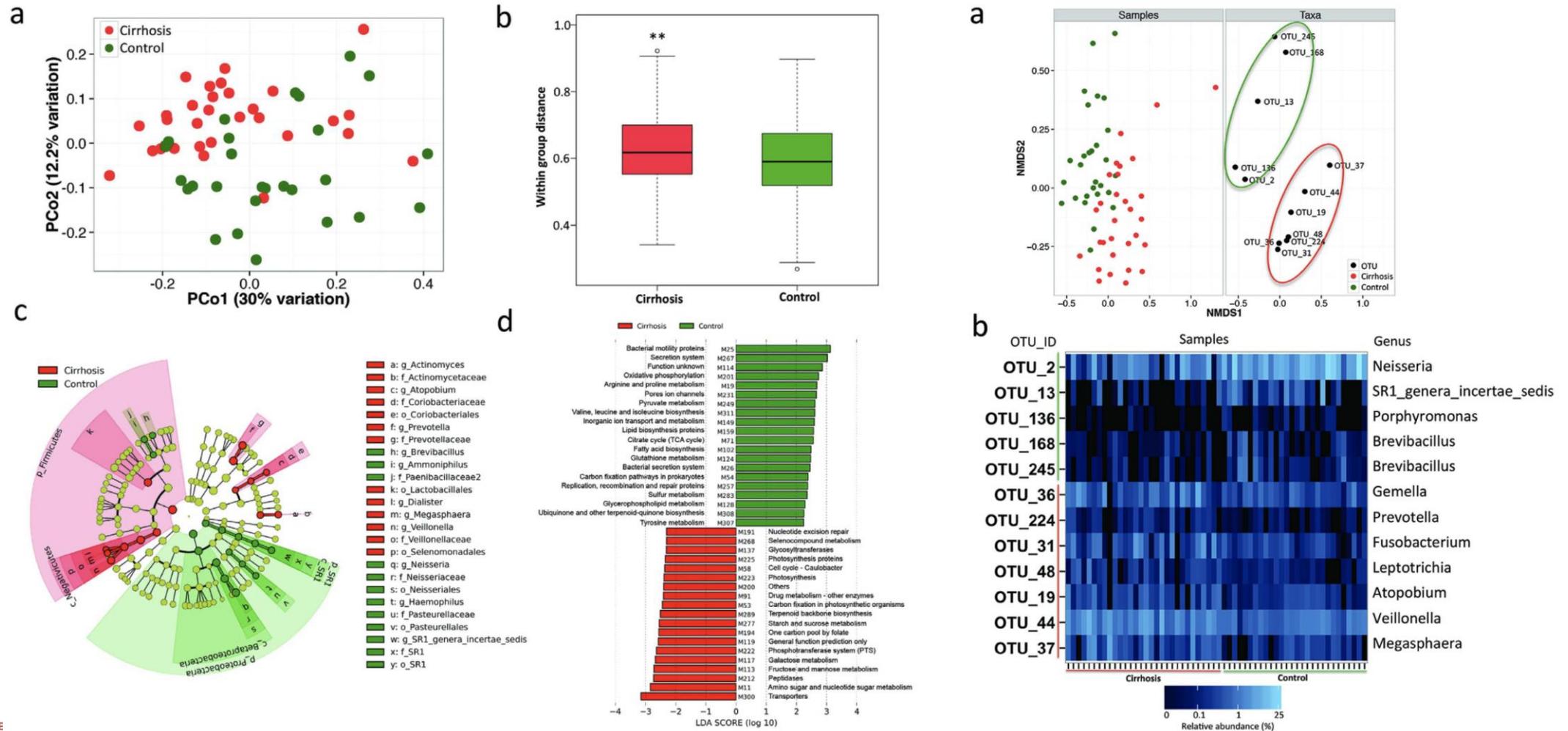
*J Hepatol.* 2019 Jul 8. pii: S0168-8278(19)30389-7

- During diet-induced dysbiosis the GVB is disrupted.

- OCA can control GVB disruption in preventive and therapeutic ways.

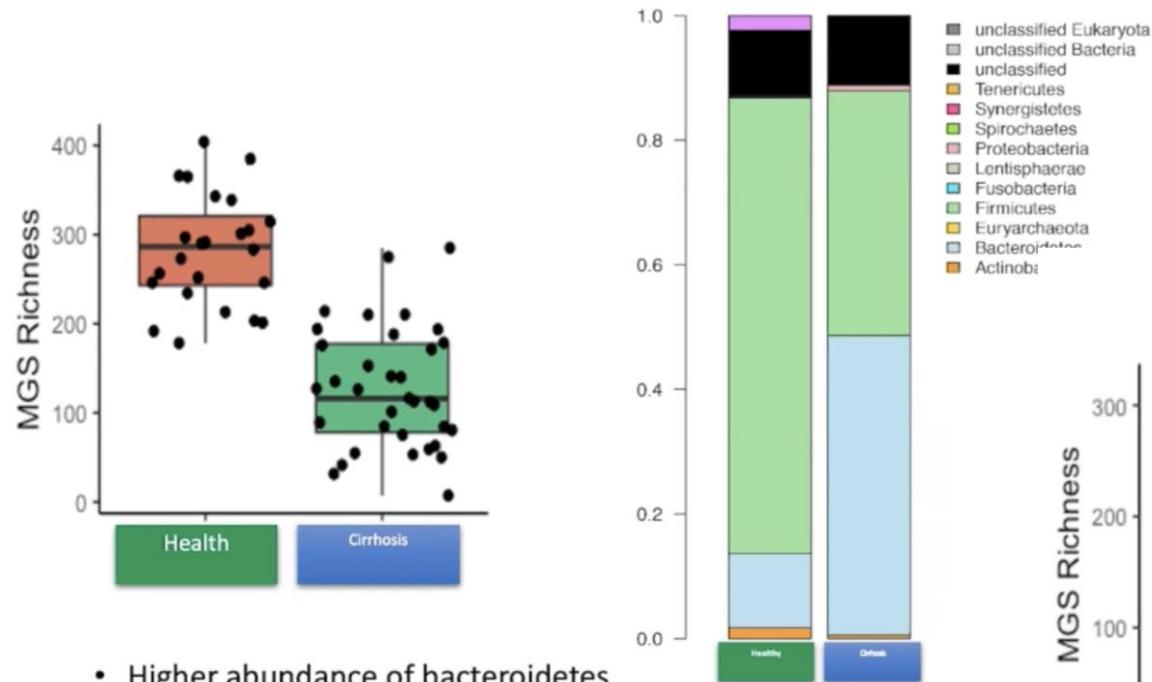
*J Hepatol.* 2019 Aug 13. pii: S0168-8278(19)30471-4

# 4. Disbiosis intestinal durante la cirrosis



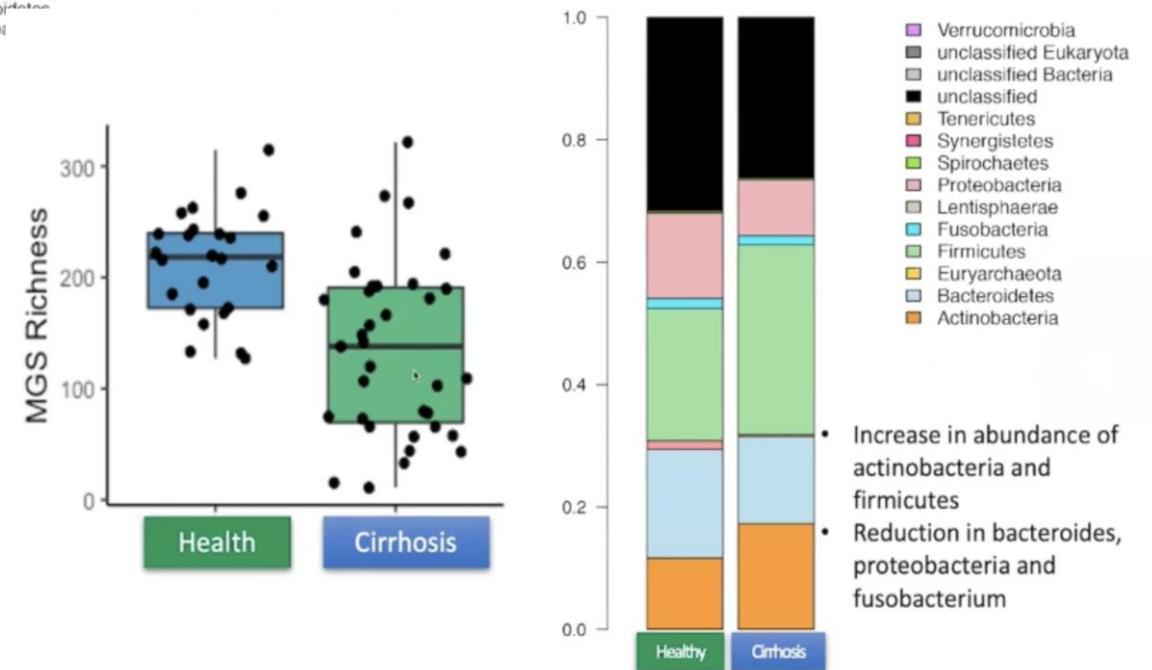
# Disbiosis intestinal durante la cirrosis

## Reduced gut microbial diversity



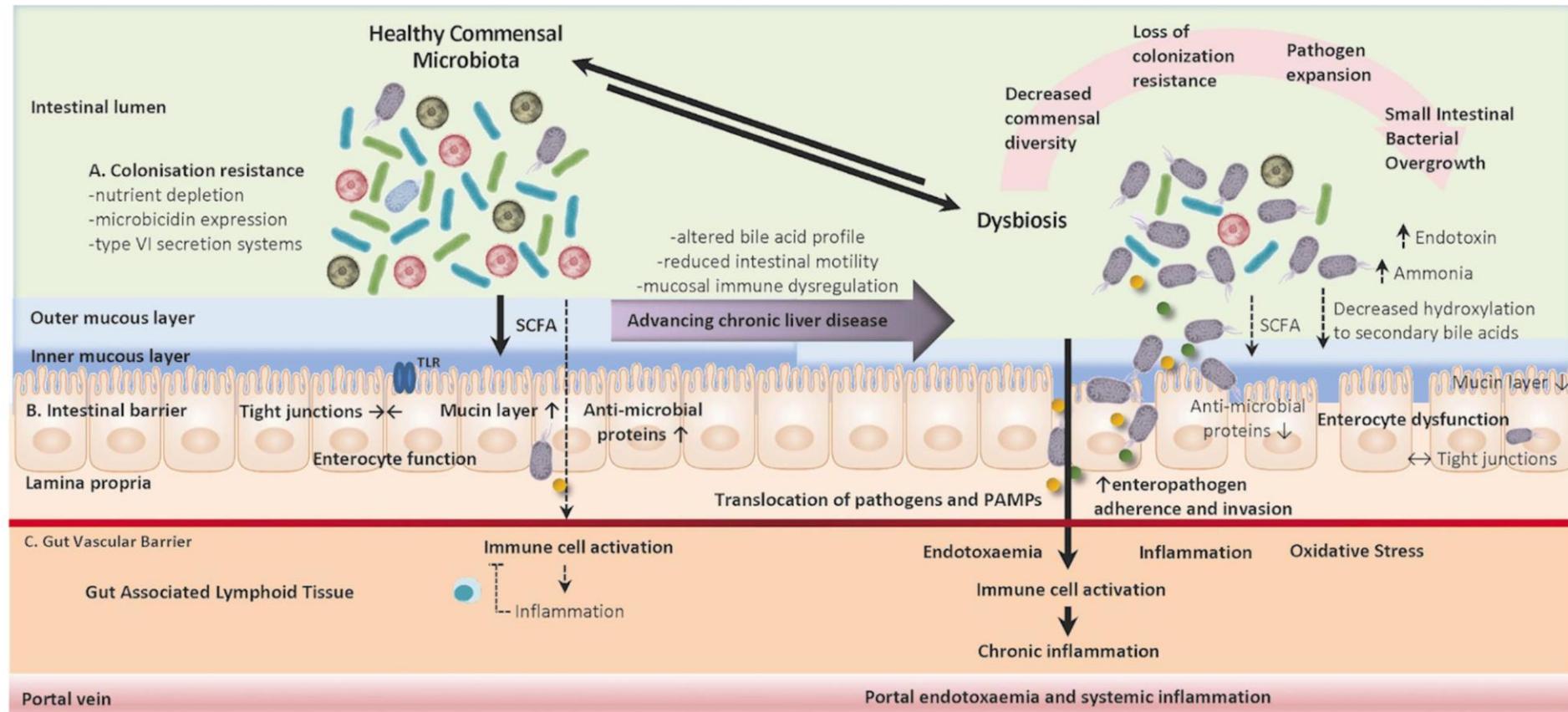
- Higher abundance of bacteroidetes
- Reduction in actinobacteria and firmicutes in cirrhosis

## Reduced saliva microbial diversity

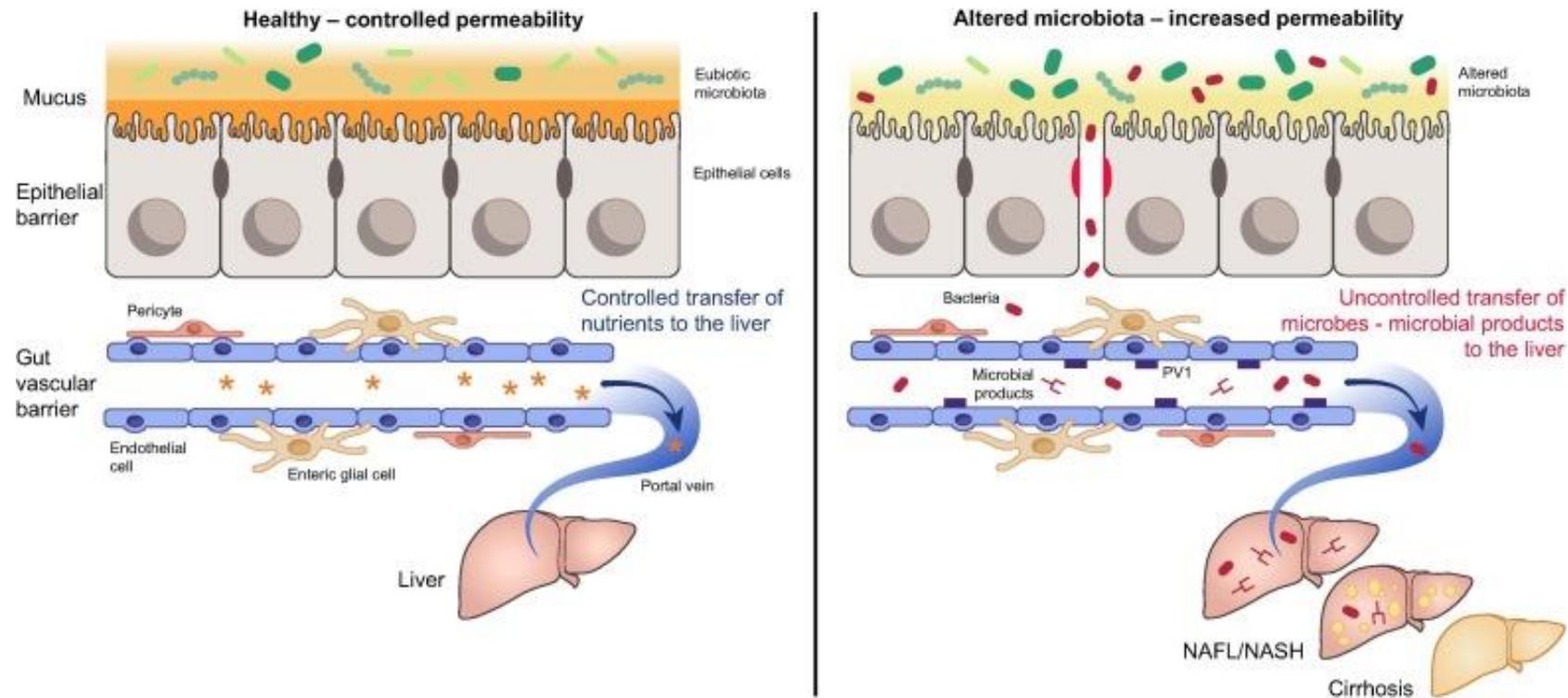


- Increase in abundance of actinobacteria and firmicutes
- Reduction in bacteroidetes, proteobacteria and fusobacterium

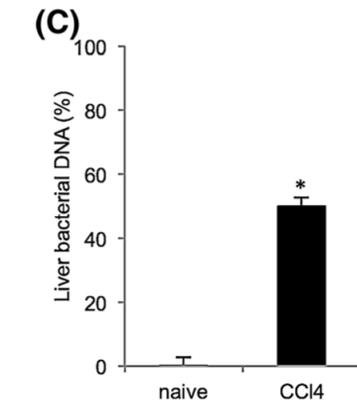
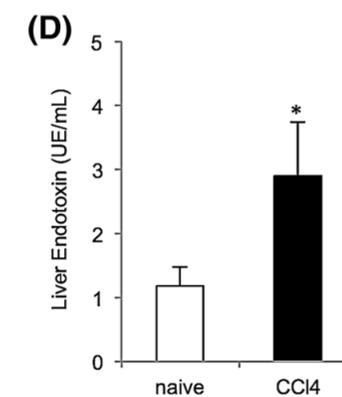
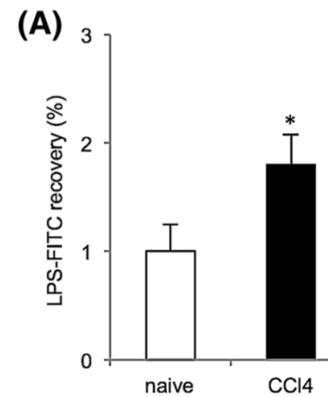
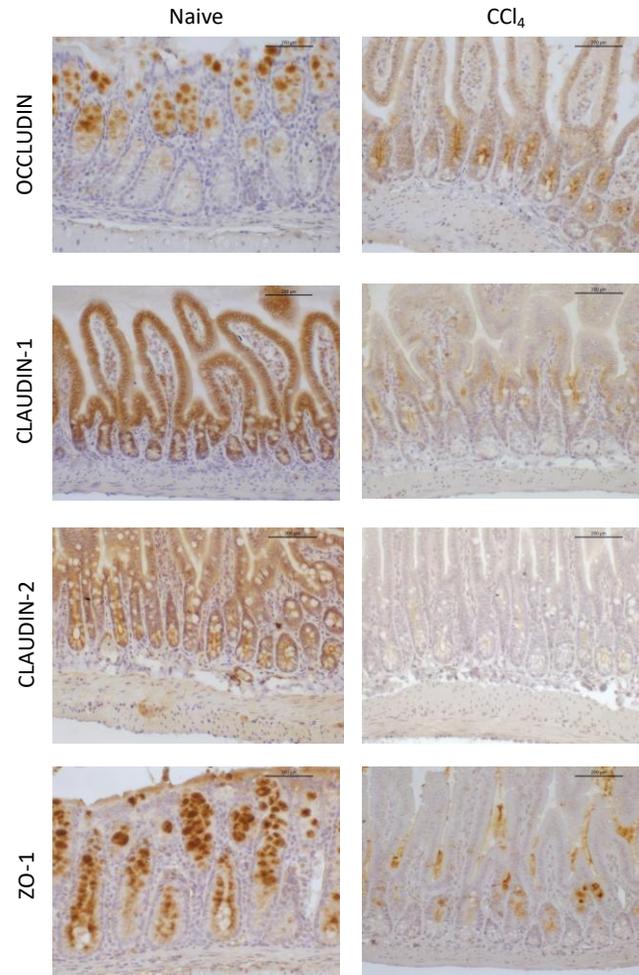
# Disbiosis intestinal durante la cirrosis



# Disbiosis intestinal en la cirrosis



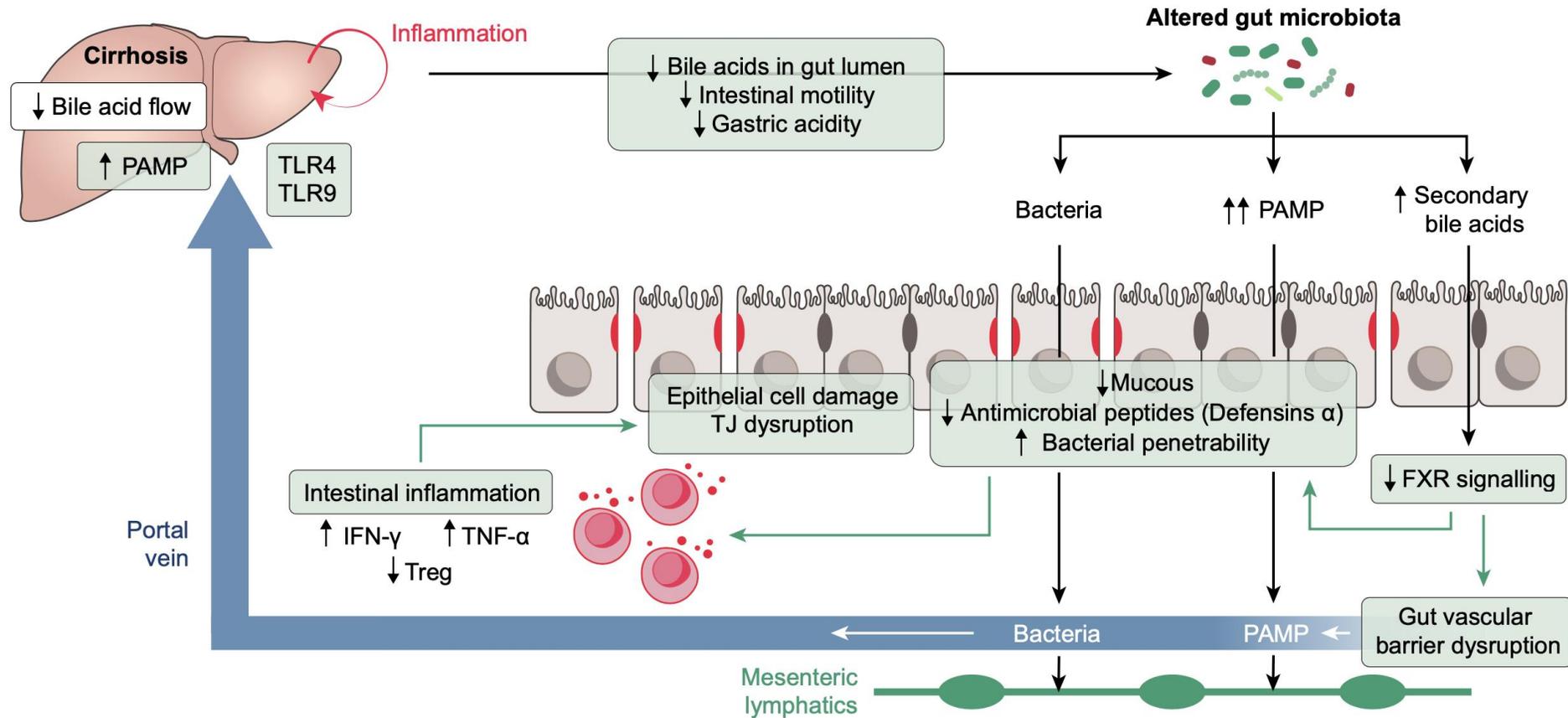
# Integridad de la barrera intestinal



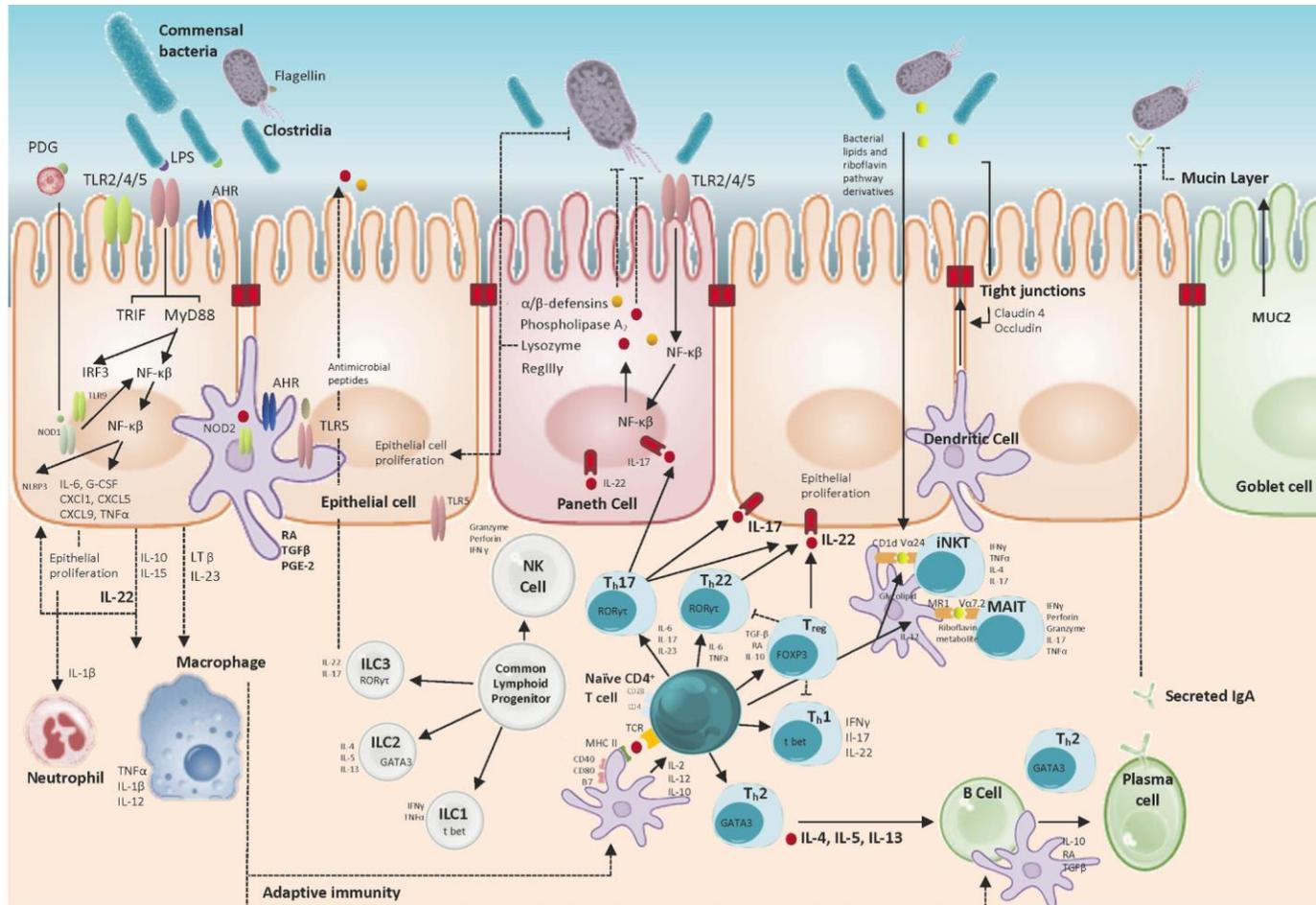
*Eur J Nutr. 2016;55:197-206*

*J Hepatol. 2019 Dec;71(6):1126-1140*

# Integridad de la barrera en la cirrosis

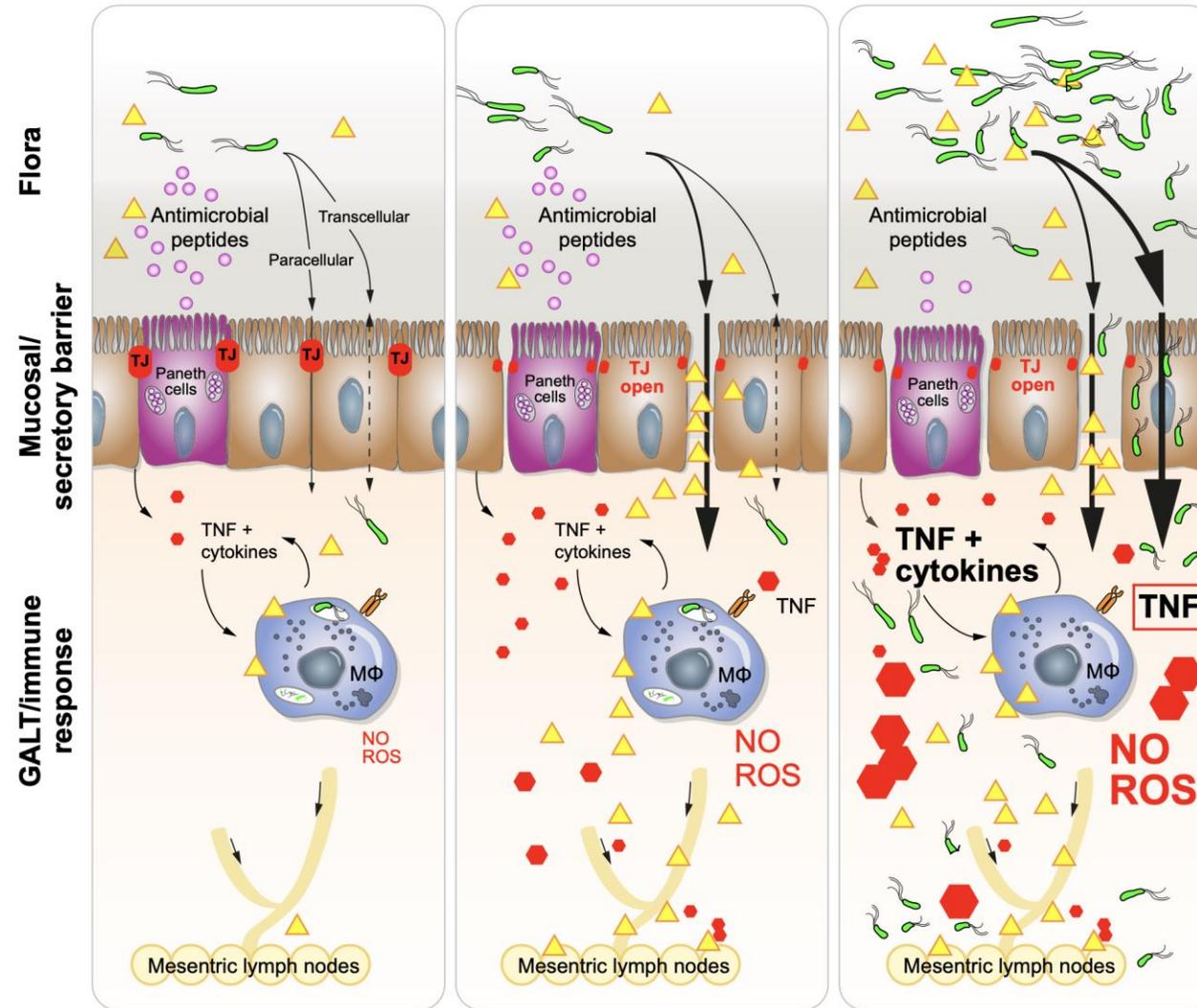


# 5. Sistema Inmune y respuesta inflamatoria

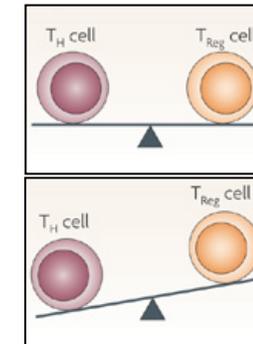
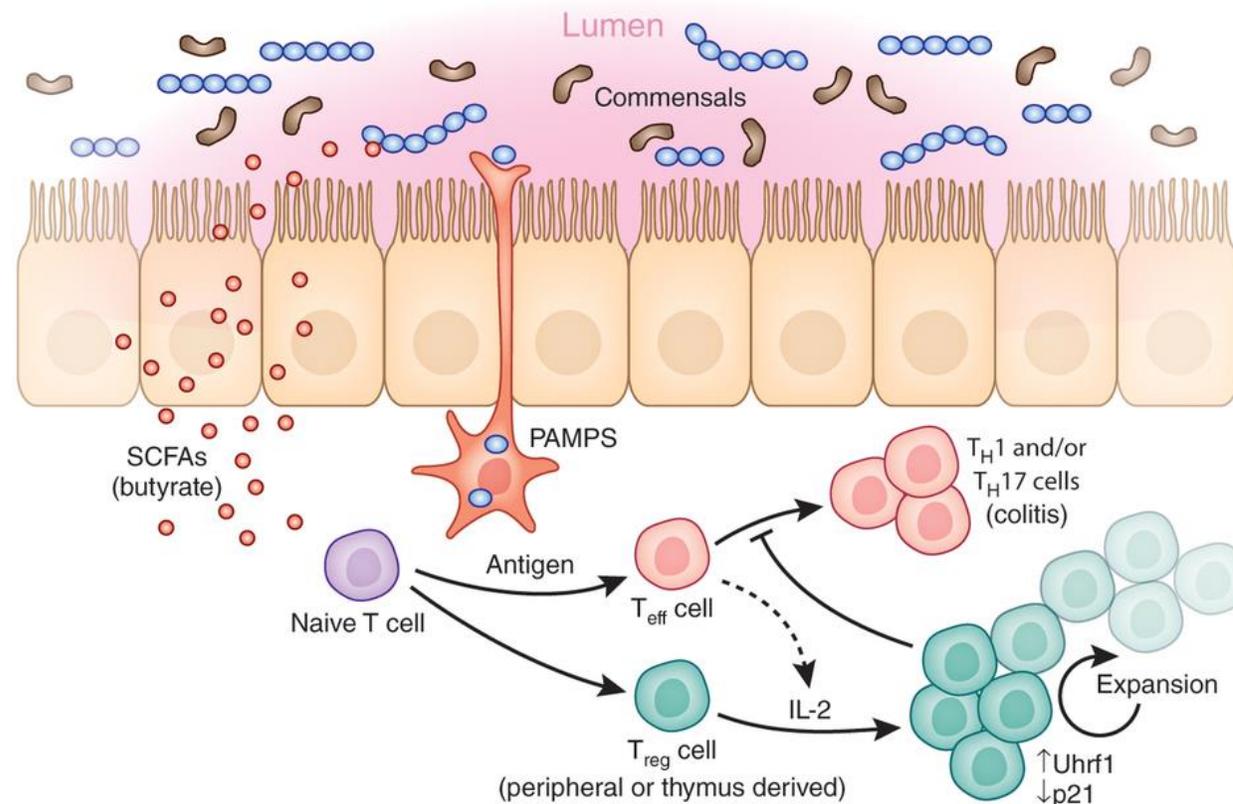


Gut 2020 Oct 15;gutjnl-2020-320786.

# Sistema Inmune y respuesta inflamatoria



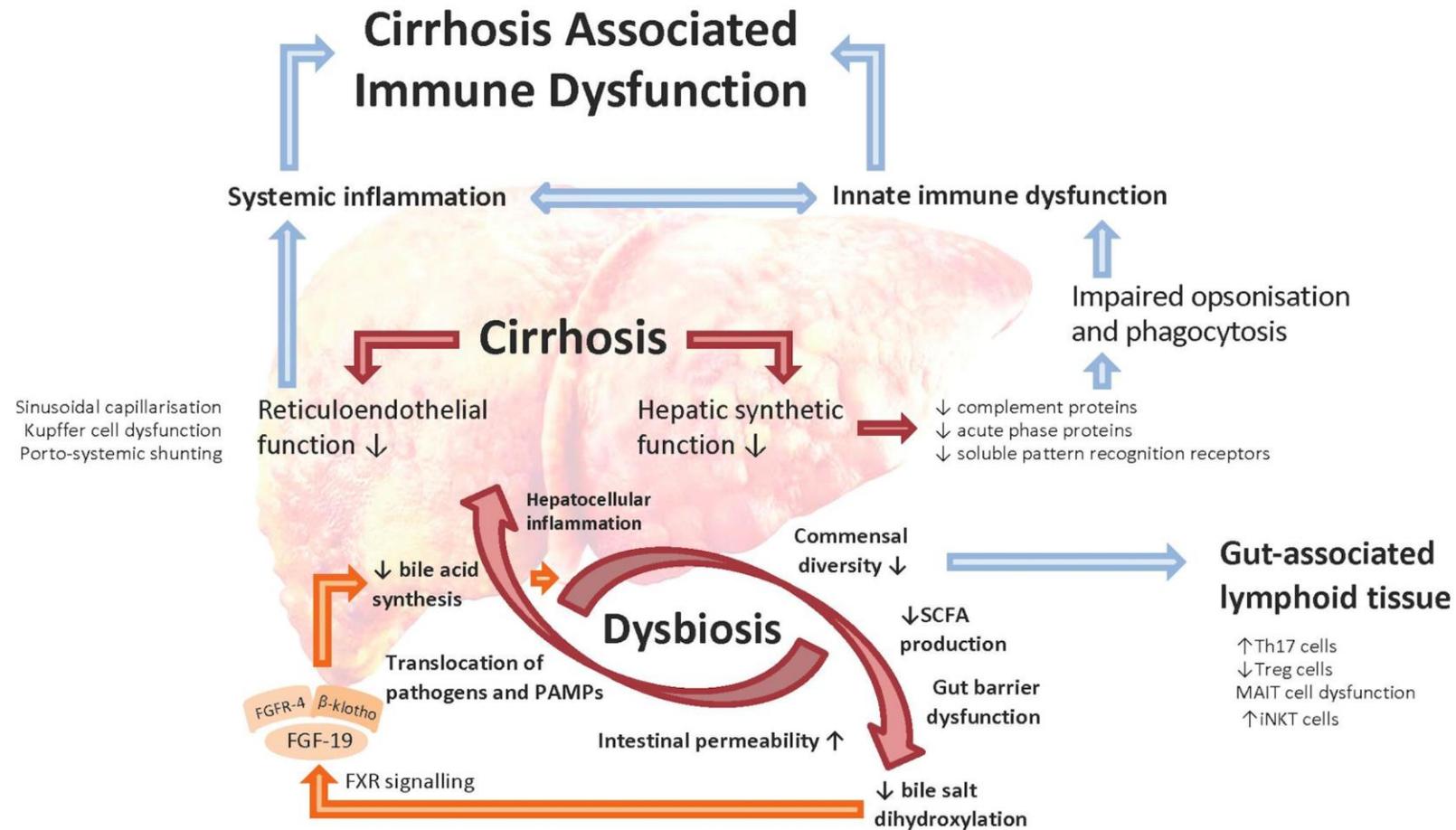
# Sistema Inmune y respuesta inflamatoria



**Eubiosis**

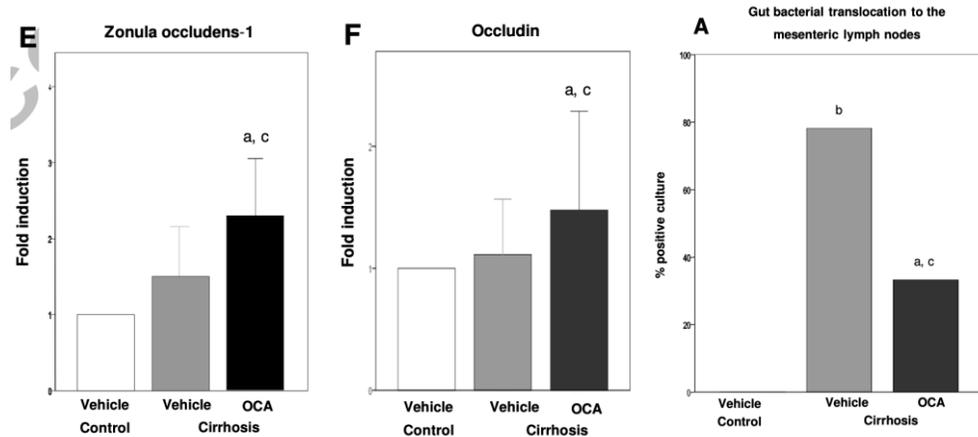
**Dysbiosis**

# Sistema Inmune y respuesta inflamatoria

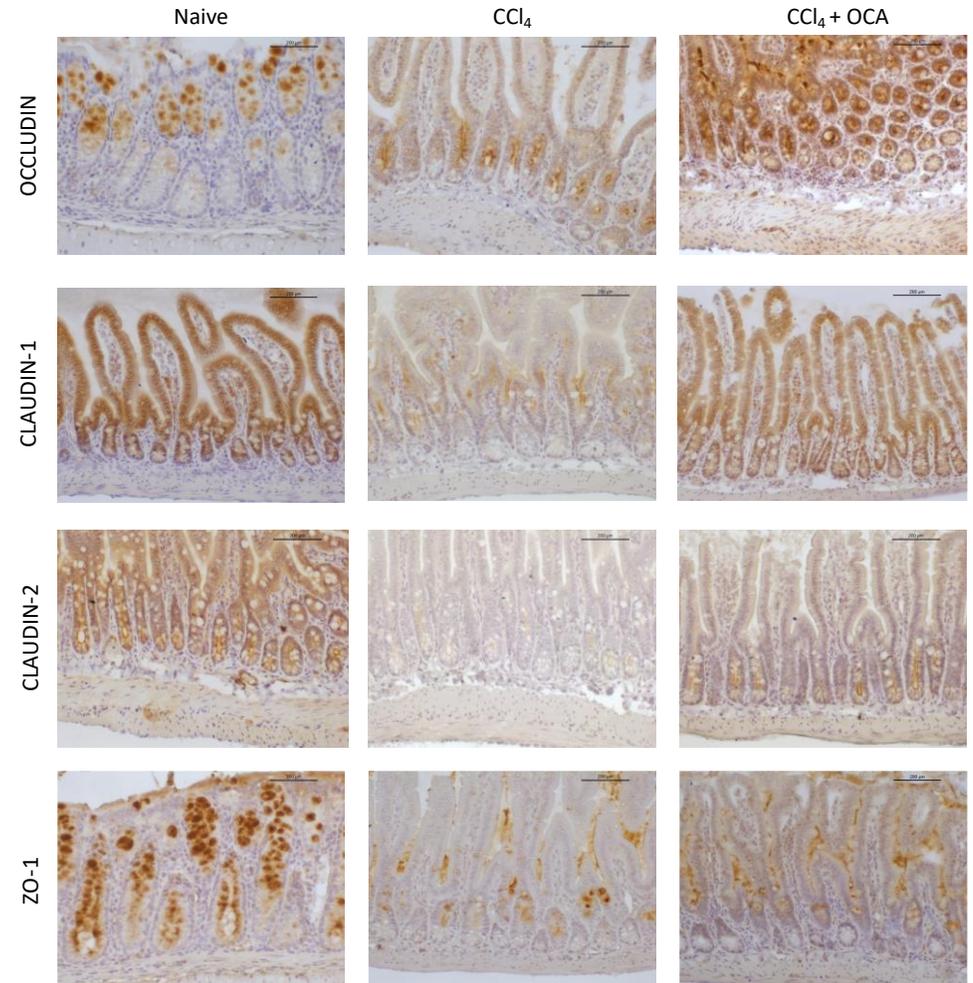
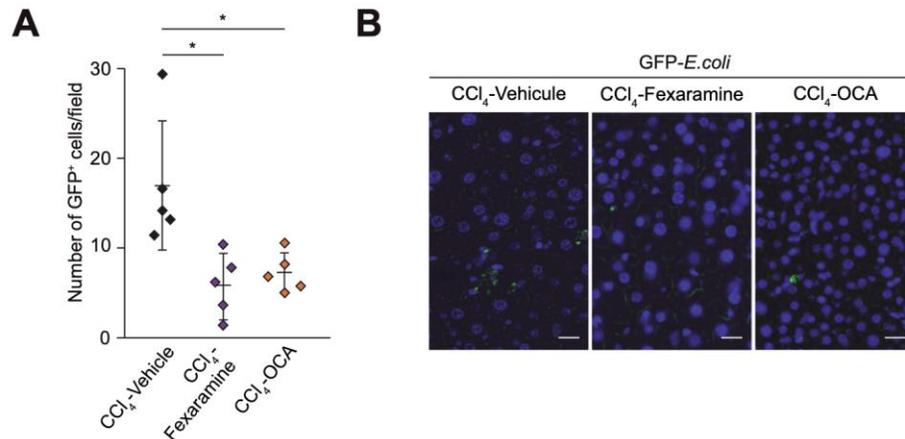


# 6. Recuperación de la integridad de la barrera

## Recuperación de FXR



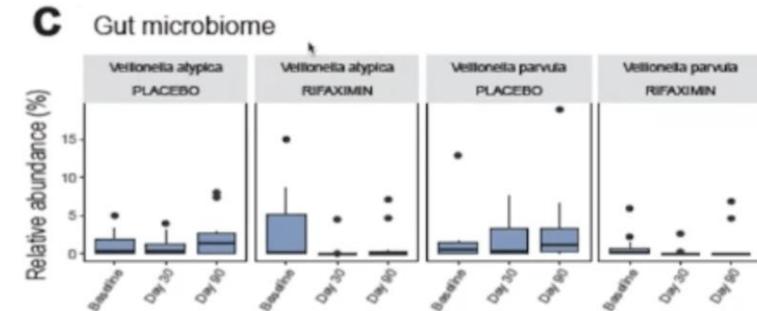
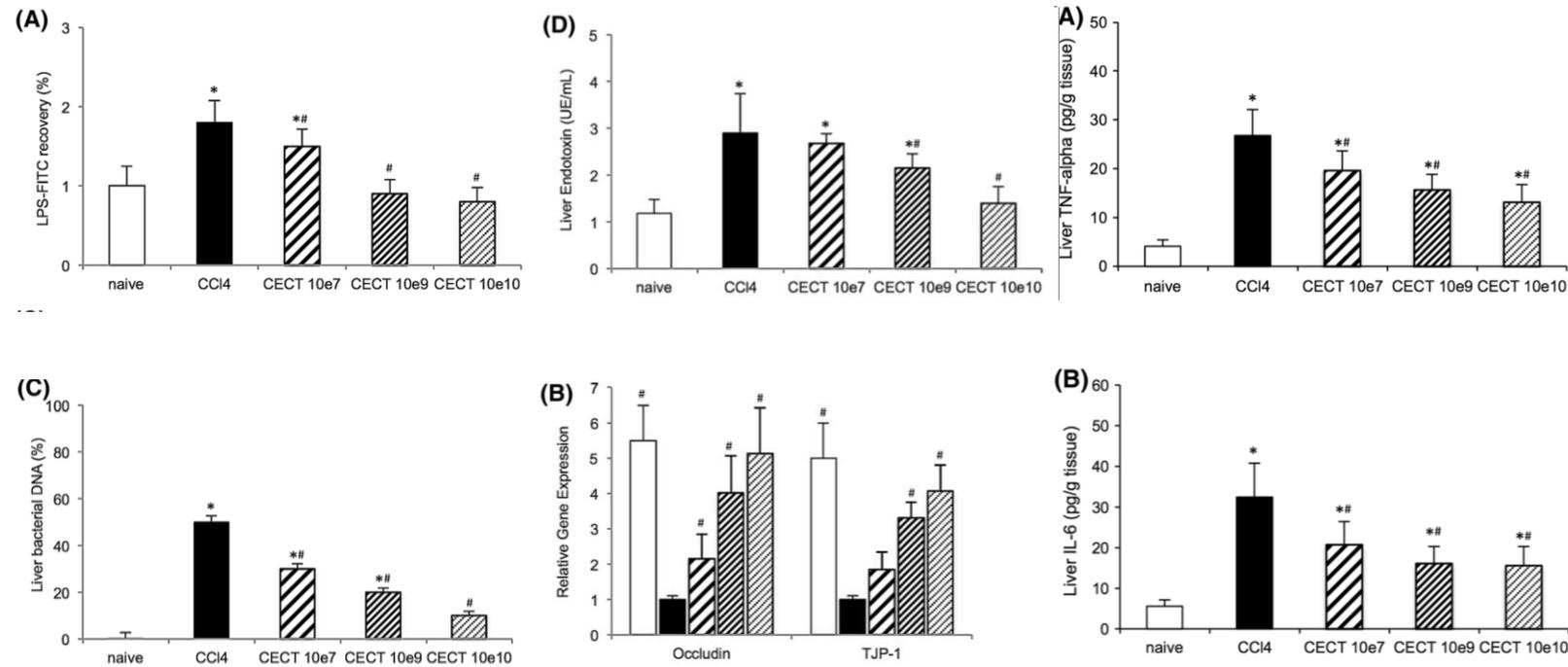
*J Hepatol.* 2016 May;64(5):1049-1057



*J Hepatol.* 2019 Dec;71(6):1126-1140

# Recuperación de la integridad de la barrera

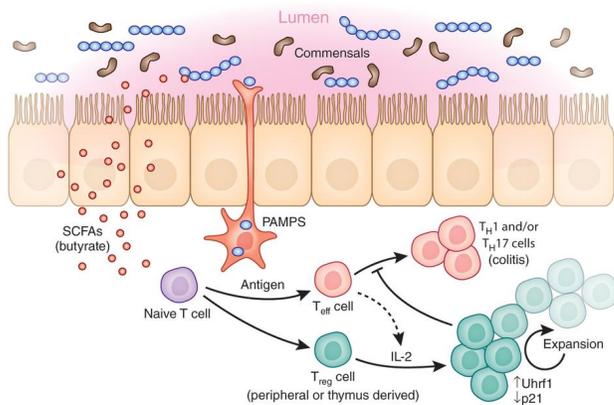
## Recuperación de eubiosis



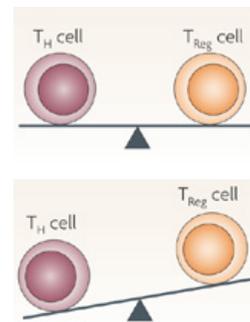
RFX suppresses the growth of bacteria with mucin-degrading capacities

# Recuperación de la integridad de la barrera

## Recuperación de Tregs

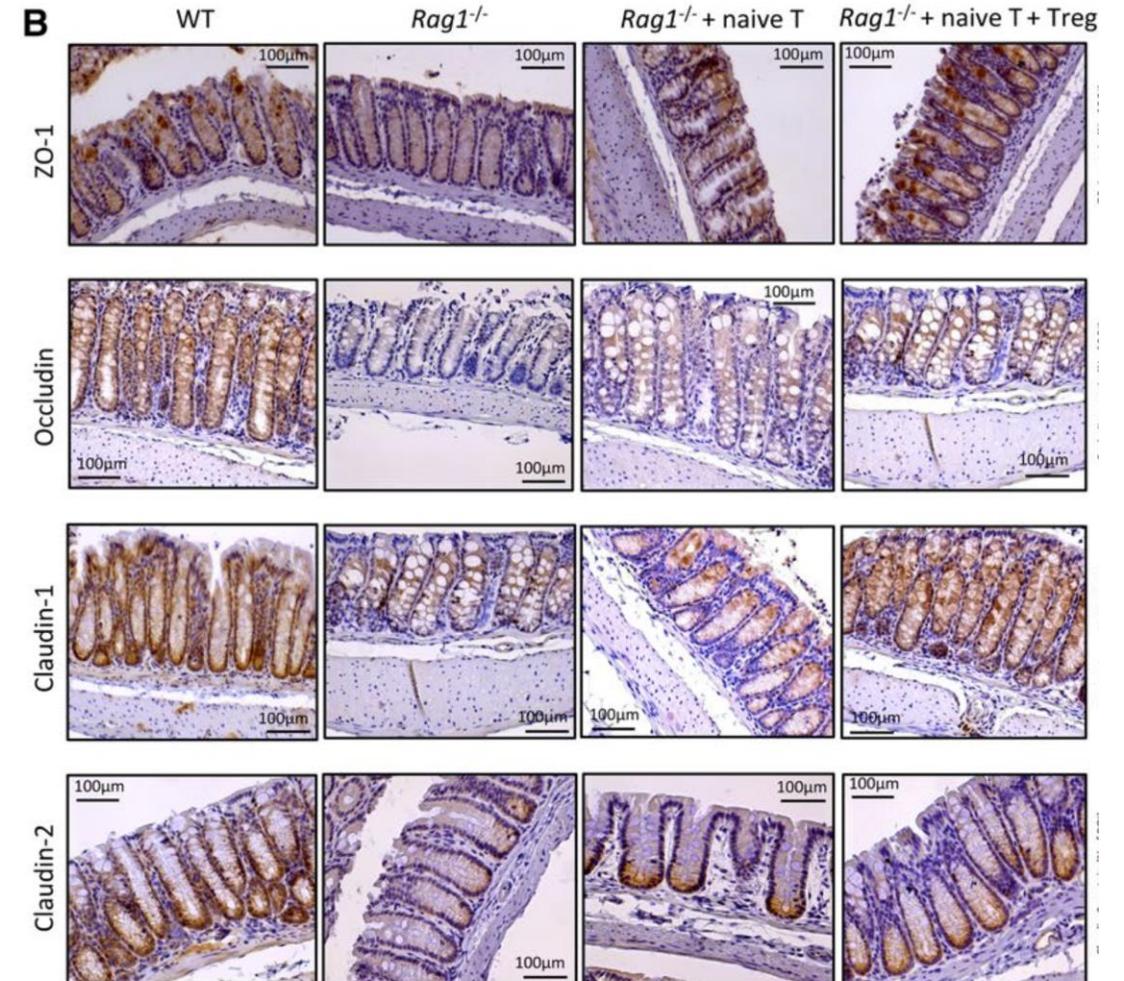


*Nat Rev Immunol* 9, 313–323 (2009)



**Eubiosis**

**Dysbiosis**



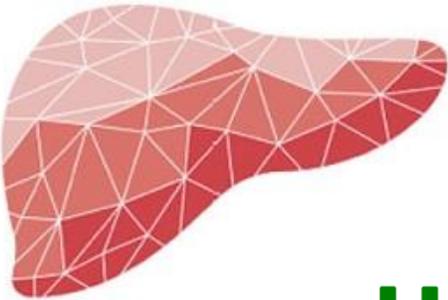
# Conclusiones

Hígado e intestino intercambian sustancias constantemente de forma bidireccional. En la cirrosis esta comunicación se encuentra alterada.

El descenso en el flujo de ácidos biliares contribuye a un descenso en la señalización a través de FXR (TJs, moco, AMPs): **pérdida de integridad** de la barrera.

La **disbiosis intestinal** produce un descenso de SCFAs y señales tolerogénicas: aumento de la traslocación espontánea de productos microbianos.

La actividad inmunitaria se polariza hacia un fenotipo inflamatorio que **aumenta la distorsión** de la barrera, la TB y la liberación **sistémica** de mediadores inflamatorios.



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