

Proportion of Non-Alcoholic Fatty Liver Disease (NAFLD) and Its Risk Factors Among Diabetic Patients Attending a Diabetic Clinic at a Tertiary Care Centre in Rishikesh, Uttarakhand: A Cross-Sectional Study: Reg ID: 28

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ABSTRACT

Background: Non-Alcoholic Fatty Liver Disease (NAFLD) is the most common chronic liver disease worldwide and is closely linked with Type 2 Diabetes Mellitus (T2DM). Individuals with diabetes are at increased risk of hepatic steatosis, fibrosis, cirrhosis, and hepatocellular carcinoma. Despite the rising burden of metabolic diseases in India, region-specific data from Uttarakhand remain limited, particularly using non-invasive diagnostic modalities such as FibroScan with Controlled Attenuation Parameter (CAP). **Aim:** To estimate the proportion and determine the risk factors of NAFLD among diabetic patients attending a tertiary care centre in Rishikesh, Uttarakhand. **Methods:** A hospital-based cross-sectional study was conducted from December 2024 to May 2025 at All India Institute of Medical Sciences, Rishikesh. A total of 330 T2DM patients aged ≥ 30 years were enrolled using consecutive sampling. Data were collected through structured interviews, anthropometric assessment, biochemical investigations, and FibroScan. NAFLD was defined as CAP >238 dB/m, and liver fibrosis as liver stiffness measurement (LSM) >7.0 kPa. Statistical analysis was performed using SPSS version 25. Descriptive and inferential statistics, including independent t-test, Mann-Whitney U test, and Chi-square test, were applied. A p-value <0.05 was considered statistically significant. **Results:** The proportion of NAFLD among diabetic patients was 60% (198/330). Participants with NAFLD had significantly higher mean body weight ($p=0.001$), body mass index ($p<0.001$), and waist circumference ($p<0.001$). Lower per capita income ($p=0.035$), reduced platelet count ($p=0.003$) were also significantly associated with NAFLD. No significant associations were observed with age, sex, occupation, physical activity, glycaemic control, lipid profile, liver enzyme levels. **Conclusion:** NAFLD is highly prevalent among T2DM patients in this tertiary care setting in Uttarakhand. Obesity, central adiposity, and socioeconomic factors are key determinants. Routine screening using non-invasive tools and early lifestyle interventions are essential to prevent disease progression and related complications.

KEYWORDS

NAFLD, Type 2 Diabetes Mellitus, FibroScan, CAP, Risk Factors.