TREATMENTS OF NON-ALCOHOLIC STEATOHEPATITIS (NASH)

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HINTERGRUND
Changes in lifestyle over the last few decades such as high caloric intake (e.g. through high-fat, high-fructose and high-glucose diets) combined with a sedentary lifestyle have increased the incidence of overweight and metabolic syndrome, which is characterized by abdominal obesity, insulin resistance, hypertonia and dyslipidemia. The latest WHO cancer report predicts a doubling in cancer incidence within the next two decades, the great majority of which will be attributable to modifiable risk factors such as high caloric intake, smoking and a sedentary lifestyle. The liver, which is the most important metabolic organ in the body, is greatly affected by a chronic state of hypercaloric uptake, overweight, sedentary lifestyle and the resulting pathology (metabolic syndrome). Non-alcoholic fatty liver disease (NAFLD), comprising several liver diseases including NAFL and NASH, which is the most frequent liver disease world-wide, is a clinical manifestation of overweight and metabolic syndrome. The prevalence of NAFL is increasing globally. Currently, 90 million Americans and 40 million Europeans suffer from NAFLD. A significant number of NAFL patients develop non-alcoholic steatohepatitis (NASH), fibrosis and, subsequently, hepatocellular carcinoma (HCC).

LÖSUNG
Compounds were identified that target thrombocyte activity or aggregation capacity through cellular components for the treatment of diseases associated with non-alcoholic fatty liver disease (NAFLD). These compounds are effective for treating non-alcoholic steatohepatitis (NASH), an advanced stage of NAFL (non-alcoholic fatty liver), in order to avoid the development of liver cirrhosis and hepatocellular carcinoma (HCC). Also provided are methods for screening for new NASH therapeutics.

VORTEILE
Treatment of non-alcoholic steatohepatitis (NASH), an advanced stage of NAFL (non-alcoholic fatty liver), in order to avoid the development of liver cirrhosis and hepatocellular carcinoma (HCC).
ANWENDUNGSBEREICHE

Pharmaceutical composition