

Evaluation of Jaundice (cholestatic)

(ALT < 400 U/L; ALP > 350 U/L;

Bilirubin > 50 umol/L; GGT > 100 U/L)

Predominant Cholestatic Pathology

Extrahepatic Obstruction

Stones, stricture

Pancreatitis

Malignancy

Intrahepatic Obstruction (acute)

Viral hepatitis

Alcoholic hepatitis

Ascending cholangitis

Drugs (*see below*)

Intrahepatic Obstruction (chronic)

Primary biliary cirrhosis

Sclerosing cholangitis

Chronic active hepatitis

Drugs (*see below*)

Intrahepatic Obstruction (minimal liver disease)

Pregnancy

Post-operative cholestasis

Benign recurrent cholestasis

Gram negative bacteraemia

Drugs

The most common agents are:

- Amoxicillin with clavulanic acid
- Anabolic steroids
- Clopidogrel
- Chlorpromazine
- Erythromycin
- Irbesartan
- Mirtazapine
- Oestrogens
- Oral contraceptives
- Terbinafine
- Tricyclic antidepressants

but this list is not comprehensive.

See <https://livertox.nlm.nih.gov/index.html> for a comprehensive list.

Evaluation

Reassess clinically.

Exclude viral hepatitis by serological investigations.

Ultrasound and radiological studies (e.g. ERCP, PTC), as necessary.

If you suspect primary biliary cirrhosis, evaluate serum lipids and antimitochondrial antibody.