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A COMPLICATED SITUATION OF DIAGNOSIS OF BIOMARKERS IN ALCOHOLIC LIVER CIRHOSIS INJURY BY ROUSSEL UCLAF CAUSALITY ASSESSMENT METHOD

Bari Md.N.[1*], Anwar Md.[3], Ansari Md.R.[1], Osman E.H.A.[2], Alfaki, M.A.[1], Mohammad I.[1]

[1] Department of Basic Medical Sciences, College of Medicine, Prince Sattam bin Abdul-Aziz University, Al-Kharj, Saudi Arabia

[2] College of Nursing and Health Sciences, Department of Diagnostic Radiology in Jazan University Saudi Arabia

[3] College of Science, Shri Jagdishprasad Jhabarmal Tibrewala University in Jhunjhunu, India

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Abstract

Exogenous compounds, including drugs, alcohol, and herbs, can cause liver injuries that can be accurately diagnosed through laboratory testing, toxin analyses, or ultimately reactive intermediates produced during the chemical's metabolic breakdown Located the liver and capable of interacting covalently with target proteins. For idiosyncratic drug-induced liver damage Drug-induced liver injury, which is seldom diagnosed using metabolic intermediates, the circumstances are considerably different. For the diagnosis of idiosyncratic Drug-induced liver injury, the verified, liver-specific, quantitative, structured Rousseau-Uclaf Causality Assessment Method is a useful technique. Novel diagnostic biomarkers, however, are always being sought for in order to validate and supplement Rousseau Uclaf Causality Assessment Method-based Drug-induced liver injury diagnosis. With regard to peculiar Drug-induced liver injury, a subset of biomarkers—including glutamate dehydrogenase, hyper acetylated High Mobility Group Box 1, and total High Mobility Group Box 1, microRNA-122, microRNA-192, and cytokeratin analogues proteins—reached the clinical focus by adhering to prior regulatory letters of recommendations. The European Medicines Agency has recommended against using the exploratory hyper acetylated High mobility group box 1 isoform biomarkers in clinical research due to misbehavior at one of the cooperating partner sites, which has cast doubt on the validity of the novel metrics both the whole and much more the acetylated High Mobility Group Box 1. According to European Medicines Agency, the whole promise of the suggested biomarkers was heavily reliant on the remarkable outcomes of the now-indicted hyper acetylated High Mobility Group Box 1 biomarker. As a result, the European Medicines Agency made the wise decision to formally withdraw its Letter of Support, which affected each of the aforementioned biomarkers. There is currently a great deal of attention on novel biomarkers, which means that reassessments are necessary before guidelines are updated. However, Integrin beta 3 may emerge as a novel diagnostic biomarker; it has only been examined in 16 patients and may be medication specific. As a result of the significant uncertainties that still exist, it would be premature to make any definitive recommendations.

Keywords: alcoholic liver cirrhosis; biomarkers; alcoholic liver disease; diagnosis liver injury illness; roussel uclaf casualty assessment method

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Address for Correspondence:

Nadeem MD Bari
Department of Basic Medical Sciences, College of Medicine, Prince Sattam bin Abdul-Aziz University, Al-Kharj, 11942, Saudi Arabia
Tel: +966509280389
E-mail: nadeembari273@gmail.com, m.bari@psau.edu.sa