

Suspect NAFLD in people who have type 2 diabetes or metabolic syndrome

Take an alcohol history to rule-out alcohol-related liver disease

See NICE's cirrhosis guideline

Test CYP for NAFLD using ultrasound

Do not use routine liver blood tests to rule-out NAFLD

Fatty liver on ultrasound in CYP

Normal ultrasound in CYP

Incidental findings of fatty liver and other suspected causes of fatty liver have been ruled-out (e.g. ultrasound done for another reason and alcohol, drugs, and hepatitis C virus excluded)

Diagnose with NAFLD

Do not diagnose with NAFLD

Retest CYP every 3 years
Use FLI for adults and ultrasound for CYP

Positive results

Negative results

See recommendations for the non-pharmacological management of NAFLD

Test people for advanced liver fibrosis (F3 or above), consider using the enhanced liver fibrosis

Positive ELF ≥ 10.51

Negative ELF < 10.51

Diagnose with advance liver fibrosis

Do not diagnose with advanced liver fibrosis

Refer to a relevant specialist in hepatology

In addition to non-pharmacological management, see recommendations on the pharmacological management of advanced liver fibrosis

Retest adults with NAFLD for advanced liver fibrosis every 3 years and CYP every 2 years, consider using ELF

Positive ELF ≥ 10.51

Negative ELF < 10.51

Monitor adults aged over 16 years with NAFLD and advanced liver fibrosis for cirrhosis in line with NICE's cirrhosis guideline

Be aware the NAFLD is a risk factor for type 2 diabetes, hypertension, and chronic kidney disease
Be aware that in people with type 2 diabetes, NAFLD is a risk factor for atrial fibrillation, myocardial infarction, ischaemic stroke, and cardiovascular death