HASI-PRO - Cohort on Acute Liver Failure without Identified Cause

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General	
Identification	
Detailed name	Cohort on Acute Liver Failure without Identified Cause
Sign or acronym	HASI-PRO
CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation	CNIL
General Aspects	
Medical area	Anatomy - Cytology Biology
Health determinants	Nutrition
Others (details)	Acute Liver Failure
Keywords	Rare disease, liver function, indeterminate acute liver failure, liver transplantation, criteria for transplantation, antibodies, toxicology, survival., cause, etiology, genetics
Scientific investigator(s) (Contact)	
Name of the director	Duclos-Vallée
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Surname

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Organization Hôpital Paul Name of the director Coilly Surname Audrey Address Hôpital Paul Brousse - 12-14 avenue Paul Vaillant Couturier - 94800 Villejuif - France Phone +33 (0)1 45 59 33 36 **Email** audrey.coilly@pbr.aphp.fr Unit Centre Hépato-Biliaire Organization Hôpital Paul Collaborations **Funding** Funding status **Public Details APHP** Governance of the database Sponsor(s) or organisation(s) Centre hépato-biliaire Paul Brousse responsible Organisation status **Public** Additional contact Main features Type of database Study databases Type of database Study databases (details) Cohort study Database recruitment is carried A selection of health institutions and services out by an intermediary Database recruitment is carried No out as part of an interventional study Additional information regarding Comprehensive (all patients presenting in the sample selection. Centre hépato-biliaire Paul Brousse and matching the inclusion criteria).

Database objective

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Acute liver failure predictive factors known and validated and the default for patients admitted in a context of acute liver failure without identified cause and includes liver transplantation. The identification of new prognostic criteria which is essential for better care and improved survival of patients admitted for acute liver failure. Principal objective: -To determine early prognostic factors of mortality in patients admitted for acute liver failure without identified cause. Secondary objectives: - Describe the evolution of acute liver failure without identified cause in 3 months. - Search posterior rare acute liver failure causes: genetic study (polymorphism of the genes encoding cytokeratins 8 and 18), detection of novel antibodies by serum proteome analysis, toxicological study by mass spectrometry.

Inclusion criteria

- Over the age of 18 - cytolysis and/or cholestasis WITH prothrombin time less than 50% or greater than 1.5 INR - signed informed consent by the patient or trusted person - without chronic underlying liver disease - cause of acute liver failure not identified at admission - non-participation in a therapeutic study may alter the patient's prognosis

Population type

Age

Adulthood (19 to 24 years)
Adulthood (25 to 44 years)
Adulthood (45 to 64 years)
Elderly (65 to 79 years)
Great age (80 years and more)

Population covered

Sick population

Gender

Male Woman

Geography area

Local

French regions covered by the database

Île-de-France

Centre Hépato-biliaire Paul Brousse, Villejuif, France.

Detail of the geography area

Data collection

Dates

Date of first collection (YYYY or

2013

Date of last collection (YYYY or MM/YYY) Size of the database Size of the database Size of the database (number of individuals) Details of the number of individuals Data Data Data Data Data Collected Clinical data Biological data Clinical data (detail) Direct physical measures Biological data (detail) DNA collection, urine and serum for future research into genetic and toxic factors. Presence of a biobank Yes Contents of biobank Serum Fluids (saliva, urine, amniotic fluid, ?) DNA Details of biobank content DNA, urine, serum Health parameters studied Health event/morbidity Health event/mortality Health event/mortality Health care consumption and services Care consumption (detail) Hospitalization Procedures Data collection method Systematic collection of clinical and biological data already collected as part of the treatment). Etiological research depth to M1. Blood and urine J0 for the formation of biological collections. Freezing of tissue for liver biopsy sample or a native liver sample in the case of HT. Participant monitoring Yes Details on monitoring of J0, J1, J2, J3, J5, J7, M1, M3 and during liver	MM/YYYY)	
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participants	transplantation.
Links to administrative sources	No
Promotion and access	
Promotion	
Link to the document	http://www.ncbi.nlm.nih.gov/pubmed/21465508
Link to the document	http://www.ncbi.nlm.nih.gov/pubmed/24904954
Link to the document	http://www.ncbi.nlm.nih.gov/pubmed/21465508
Link to the document	http://www.ncbi.nlm.nih.gov/pubmed/24904954
Access	
Terms of data access (charter for data provision, format of data, availability delay)	Contact the scientist in charge.
Access to aggregated data	Access on specific project only
Access to individual data	Access on specific project only