

# EP-423 | Resolution of hepatic steatosis and T2D remission in an obese patient through a multidisciplinary weight loss program with very low-calorie-ketogenic diet

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**A. Moretti<sup>1</sup>**; V.J. Coelho<sup>2</sup>; L.L. Correa<sup>3</sup>; G. Guzmán Rolo<sup>4</sup>; I. Sajoux<sup>4</sup>

<sup>1</sup>*Clinica Adriana Moretti, São Paulo, Brazil*; <sup>2</sup>*Clinica Figueira, São Paulo, Brazil*; <sup>3</sup>*IEDE—Instituto Estadual de Diabetes e Endocrinologia, Rio, Brazil*;

<sup>4</sup>*Medical Dept PronoKal Group, Barcelona, Catalunya, Spain*

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**INTRODUCTION:** Obesity is the most significant single risk factor for the development of type 2 Diabetes and non-alcoholic fatty liver disease (NAFLD) is predictive of the presence of fibrosis and potentially progressing to advanced liver disease 1-3 as well.

**METHODS:** We present a case report from a 37-year-old Asian man obese patient, BMI: 34.4 kg/m<sup>2</sup>, medical history of hypertension, dyslipidemia and hepatic steatosis (AST 83 UI, ALT: 208 UI, GGT 152 UI, Abdominal US: Hepatic steatosis grade 3), during the medical consultation was diagnosed T2D condition (glucose 127 mg/dl, insulin: 25 µU/ml, HbA1c 6.9%). Patient was treated with a commercial multidisciplinary method 4 based in 3 stages: (1) VLCKD low fat based on a high-biological-value protein preparations, vegetables and supplements, (2) low-calorie diet with progressive incorporation of regular healthy foods and (3) maintenance. All stages are accompanied by physical exercise and emotional support.

**RESULTS:** Patient lost a total of 21.5 kg, final BMI: 26.7 kg/m<sup>2</sup> and normal WC: 91 cm in 68 days. He had remission of T2D: normal OGTT (T0': 80 mg/dl, T120': 64 mg/dl) HbA1c: 5.7%, also liver enzymes decreased to normal levels (AST 36 IU, ALT 44 IU, GGT 30UI) and Abdominal US showed a normal liver free of steatosis.

**CONCLUSION:** Treatment with the multidisciplinary program based on VLCKD, physical exercise and emotional support has proven effective, not only for weight loss but also for resolving grade 3 hepatic steatosis and inducing T2D remission.

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