

CLIF SOFA (Sequential Organ Failure Assessment)

Objetivo: Identificar os doentes com ACLF

Variáveis: bilirrubina, creatinina, terapêutica de substituição renal, encefalopatia hepática, INR, plaquetas, PAM, uso de vasopressores, PaO₂/FiO₂ ou SpO₂/FiO₂

Cálculo:

Table 1. CLIF-SOFA Score

Organ/system	0	1	2	3	4
Liver (bilirubin, mg/dL)	<1.2	≥1.2 to ≤2.0	≥2.0 to <6.0	≥6.0 to <12.0	≥ 12.0
Kidney (creatinine, mg/dL)	<1.2	≥1.2 to <2.0	≥ 2.0 to <3.5	≥ 3.5 to <5.0	≥ 5.0
			or use of renal replacement therapy		
Cerebral (HE grade)	No HE	I	II	III	IV
Coagulation (international normalized ratio)	<1.1	≥1.1 to <1.25	≥1.25 to <1.5	≥1.5 to <2.5	≥ 2.5 or platelet count ≤20×10⁹/L
Circulation (mean arterial pressure, mm Hg)	≥70	<70	Dopamine ≤5 or dobutamine or terlipressin	Dopamine >5 or E ≤0.1 or NE ≤0.1	Dopamine >15 or E >0.1 or NE >0.1
Lungs					
PaO ₂ /FiO ₂ or SpO ₂ /FiO ₂	>400	>300 to ≤400	>200 to ≤300	> 100 to ≤200	≤ 100
	>512	>357 to ≤512	>214 to ≤357	> 89 to ≤214	≤ 89

NOTE. The original SOFA score is described by Vincent et al.²⁴ Like the SOFA score, the CLIF-SOFA score includes subscores ranging from 0 to 4 for each of 6 components (liver, kidneys, brain, coagulation, circulation, and lungs), with higher scores indicating more severe organ impairment. Aggregated scores range from 0 to 24 and provide information on overall severity. The text in bold indicates the diagnostic criteria for organ failures (see also Supplementary Materials and Methods).

HE, hepatic encephalopathy; E, epinephrine; NE, norepinephrine; PaO₂, partial pressure of arterial oxygen; FiO₂, fraction of inspired oxygen; SpO₂, pulse oximetric saturation.

Fonte: Moreau R, Jalan R, Gines P, Pavesi M, Angeli P, Cordoba J, et al. Acute- on-chronic liver failure is a distinct syndrome that develops in patients with AD of cirrhosis. *Gastroenterology* 2013;144:1426–1437.

Calculador automático:

<http://www.efclif.com/scientific-activity/score-calculators/clif-c-aclf>