

STAGE 2 FATTY LIVER · NAFLD

Metabolic Correction Approach

Root-cause correction, not symptomatic management.

16-Week Protocol

Integrative Approach

Liver Fat Reduction

PATIENT OVERVIEW

PATIENT

Neha Arora

AGE

42 Years

GENDER

Female

LOCATION

New Delhi

DIAGNOSIS

NAFLD – Grade 2 (Ultrasound confirmed)

COMORBIDITIES

Insulin Resistance · Borderline Dyslipidemia

— CHIEF COMPLAINTS

Why She Came to Us

Persistent Fatigue

Especially pronounced after meals

Abdominal Heaviness

Right upper quadrant discomfort

Weight Loss Resistance

Plateau despite dietary attempts

Metabolic Dysregulation

Sugar cravings + irregular appetite

Digestive Discomfort






Occasional bloating and fullness

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— BASELINE CLINICAL FINDINGS

What the Tests Revealed

 Hepatic Steatosis <hr/> Moderate Grade 2 on ultrasound imaging	 ALT Elevated <hr/> Liver enzymes mildly above normal range	 Central Adiposity <hr/> Significant abdominal fat accumulation	 Insulin Resistance <hr/> Impaired glucose uptake confirmed	 Sluggish Digestion <hr/> Post-meal fatigue slow gastric motility
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— HOLISTIC TREATMENT PROTOCOL

The Integrative Approach

<p>01  Lifestyle Modifications</p> <ul style="list-style-type: none"> ● Fixed meal timings — no late-night eating ● 8,000–10,000 steps/day + post-meal walks ● 7–8 hours consistent sleep cycle ● Breathwork + light yoga for stress management 	<p>02  Nutrition Protocol</p> <ul style="list-style-type: none"> ● Avoid: refined sugar, maida, packaged foods ● Include: high-fibre, lean protein, healthy fats ● Liver-supportive: beetroot, greens, turmeric ● Eliminate: sugary drinks, excess saturated fat
<p>03  Metabolic Correction</p> <ul style="list-style-type: none"> ● Improve insulin sensitivity ● Reduce hepatic fat accumulation ● Support liver detox pathways (Phase 1 & 2) ● Address gut–liver axis dysfunction 	<p>04  Monitoring & Support</p> <ul style="list-style-type: none"> ● Structured nutritional supplementation ● Gut health optimisation ● Liver function tests every 8–12 weeks ● Repeat ultrasound as clinically indicated

16-WEEK FOLLOW-UP PROGRESS

Patient Journey — Milestone by Milestone



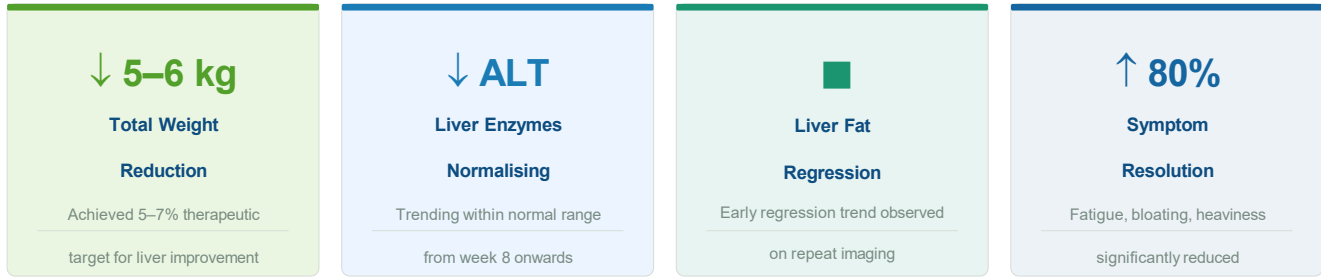
KEY CLINICAL INSIGHT

Weight loss of just 5–7% can significantly improve liver health.

Neha achieved ~5–6 kg reduction — placing her firmly within the therapeutic target range.

16-WEEK OUTCOMES

What Changed — Measurably



KEY CLINICAL INSIGHTS

What This Case Teaches Us

⊕ Fatty Liver is a Metabolic Disease

NAFLD is driven by insulin resistance and gut dysfunction — not just dietary fat. Metabolic repair is the correct intervention frame.

■ Insulin Resistance is the Core Driver

Hepatic fat accumulates when insulin signalling fails. Addressing insulin sensitivity is more effective than targeting the liver directly.

■ 5–7% Weight Loss is Therapeutic

This threshold produces measurable histological improvement in hepatic steatosis — supported by clinical and imaging evidence.

■ Early Intervention Reverses Progression

Stage 2 NAFLD, approached with structured metabolic correction and gut optimisation, carries strong potential for regression.

CASE SUMMARY

Progressive metabolic improvement over 16 weeks through structured, integrative intervention.

Nutrition · Movement · Metabolic Correction · Root-Cause Approach

Root-cause correction, not symptomatic management. — L&B Clinics

GET IN TOUCH

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