

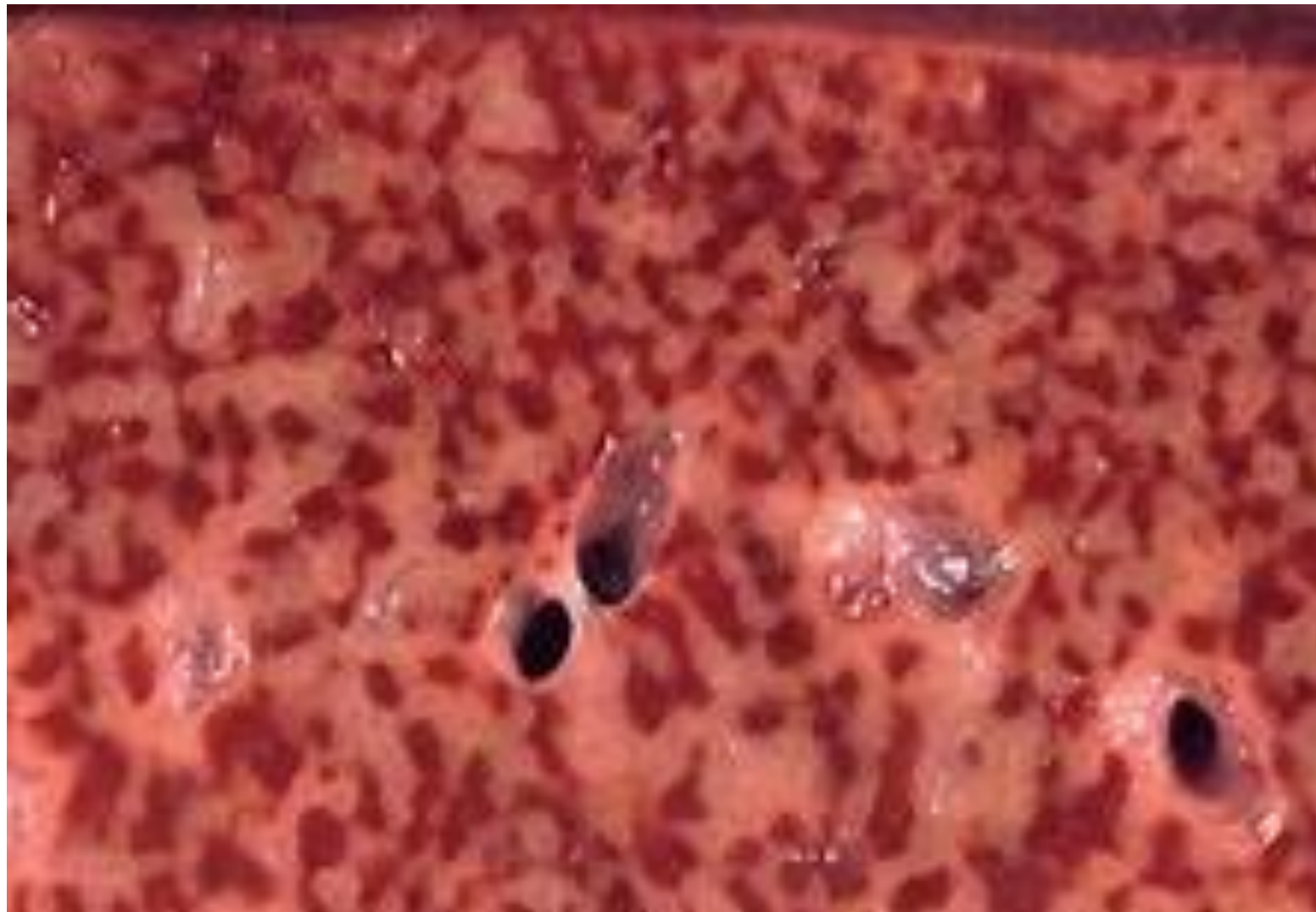
# Nutmeg liver (congestive hepatopathy)

Nutmeg liver (congestive hepatopathy) refers to the mottled appearance of the liver as a result of hepatic venous congestion. The cut surfaces of the enlarged liver resemble the appearance of speckled nutmeg Kernel. The most common cause of nutmeg liver is right heart failure, secondary to myocardial infarction, cardiomyopathy, etc. The increased pressure in the hepatic vein causes centrilobular congestion of the liver, deoxygenation of hepatocytes and eventually centrilobular hemorrhagic necrosis. The congested area is surrounded by a paler zone composed of damaged hepatocytes with fatty change. Later, fibrosis develops mainly from the centrilobular zone and this condition is called as “cardiac cirrhosis”.

Ref.: Xanthopoulos A, et al. Heart failure and liver disease: cardiohepatic interactions. J Am Coll Cardiol Heart Fail 2019; 7(2): 87-97. doi: 10.1016/j.jchf.2018.10.007



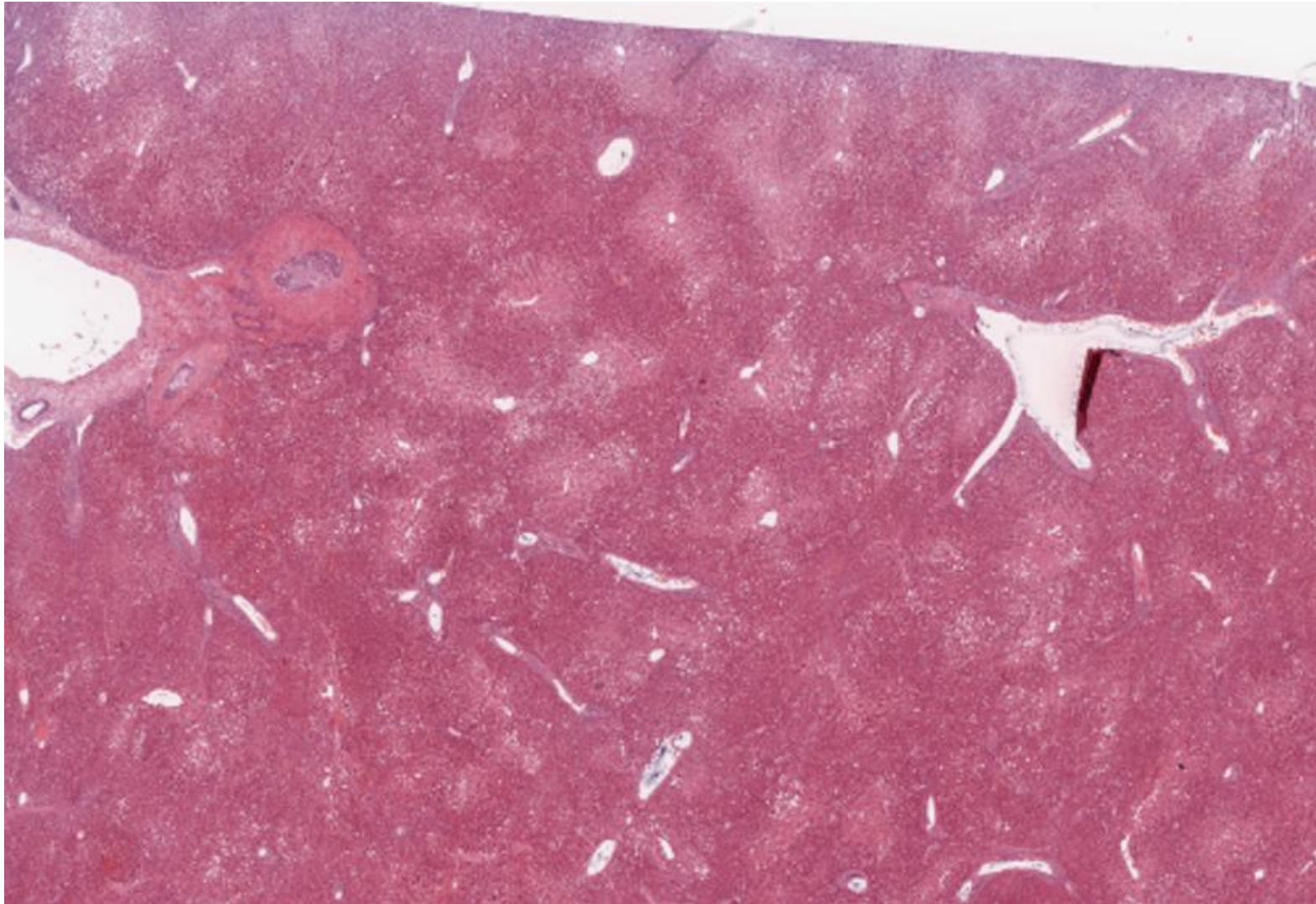
Gross appearance of the cut surface of the liver with chronic passive congestion (nutmeg liver). The centrilobular zone is red-congested, surrounded by yellowish-colored periportal zone.



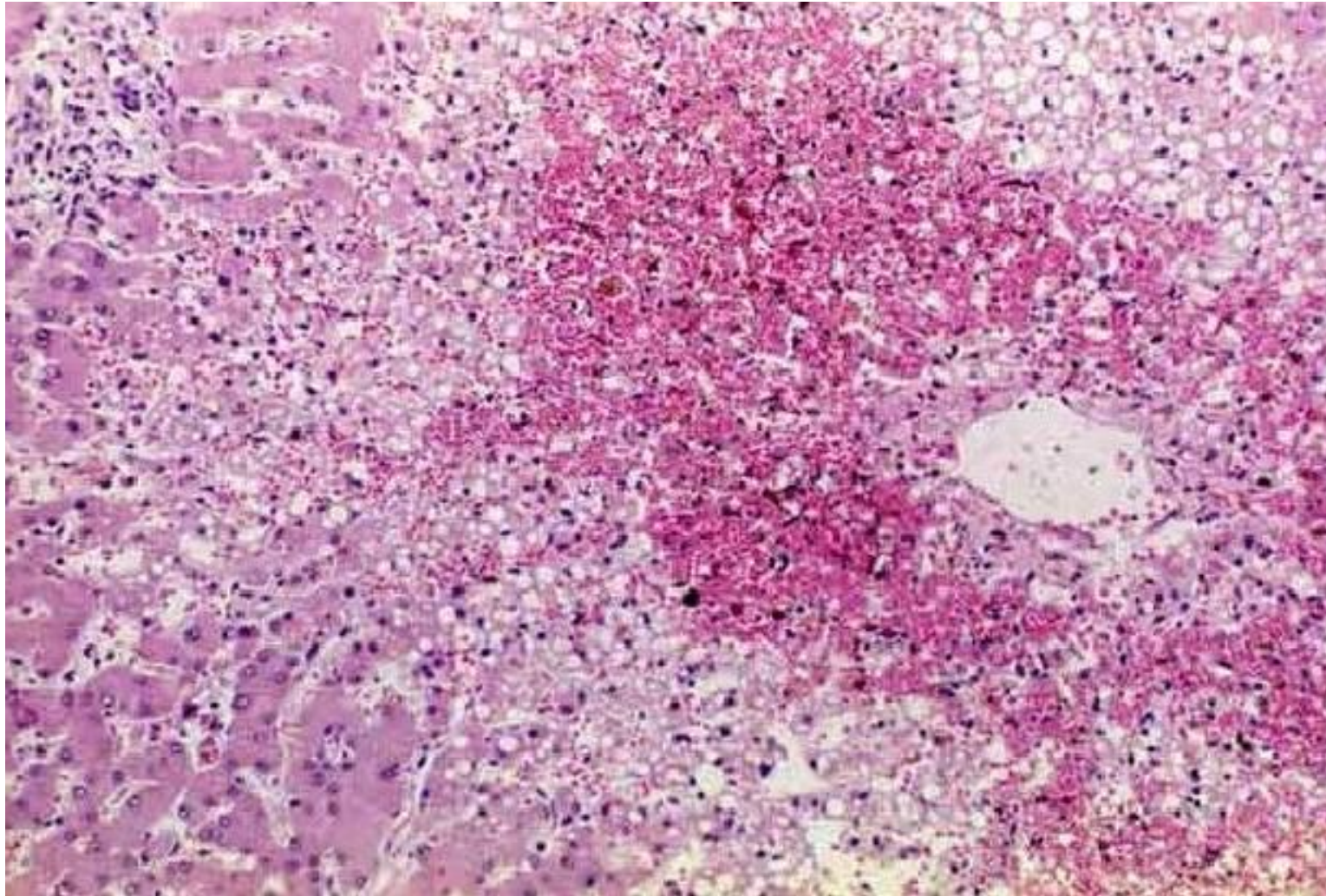
Gross appearance of the cut surface of the liver with chronic passive congestion (nutmeg liver). The centrilobular zone is red-congested, surrounded by yellowish-colored periportal zone.



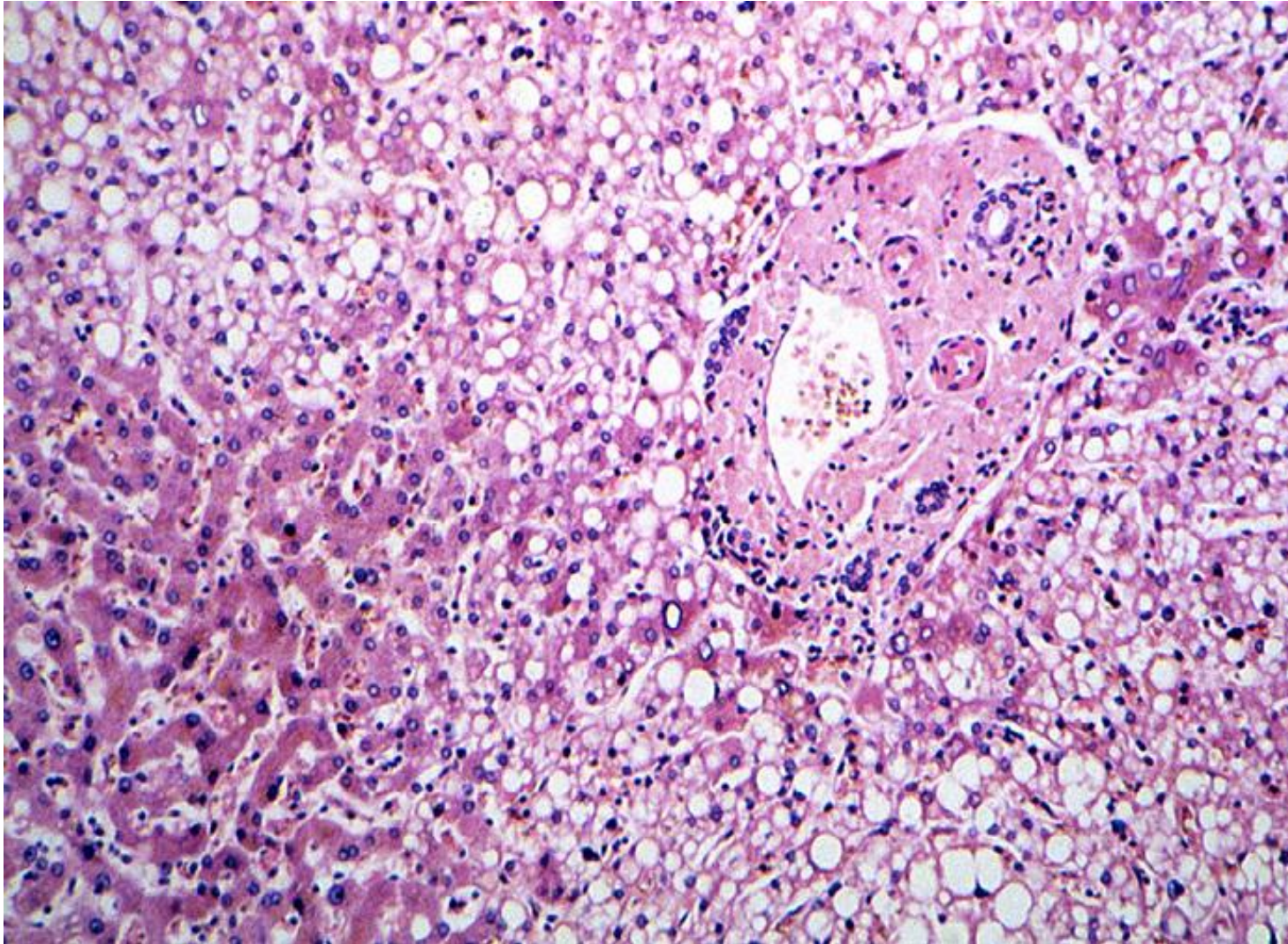
Nutmeg (*Myristica fragrans*) is a tropical evergreen tree, and the spice is made of its seed. The cut surface of the liver with chronic passive congestion resembles the cut surface of the seed of nutmeg, hence the name “nutmeg liver”.



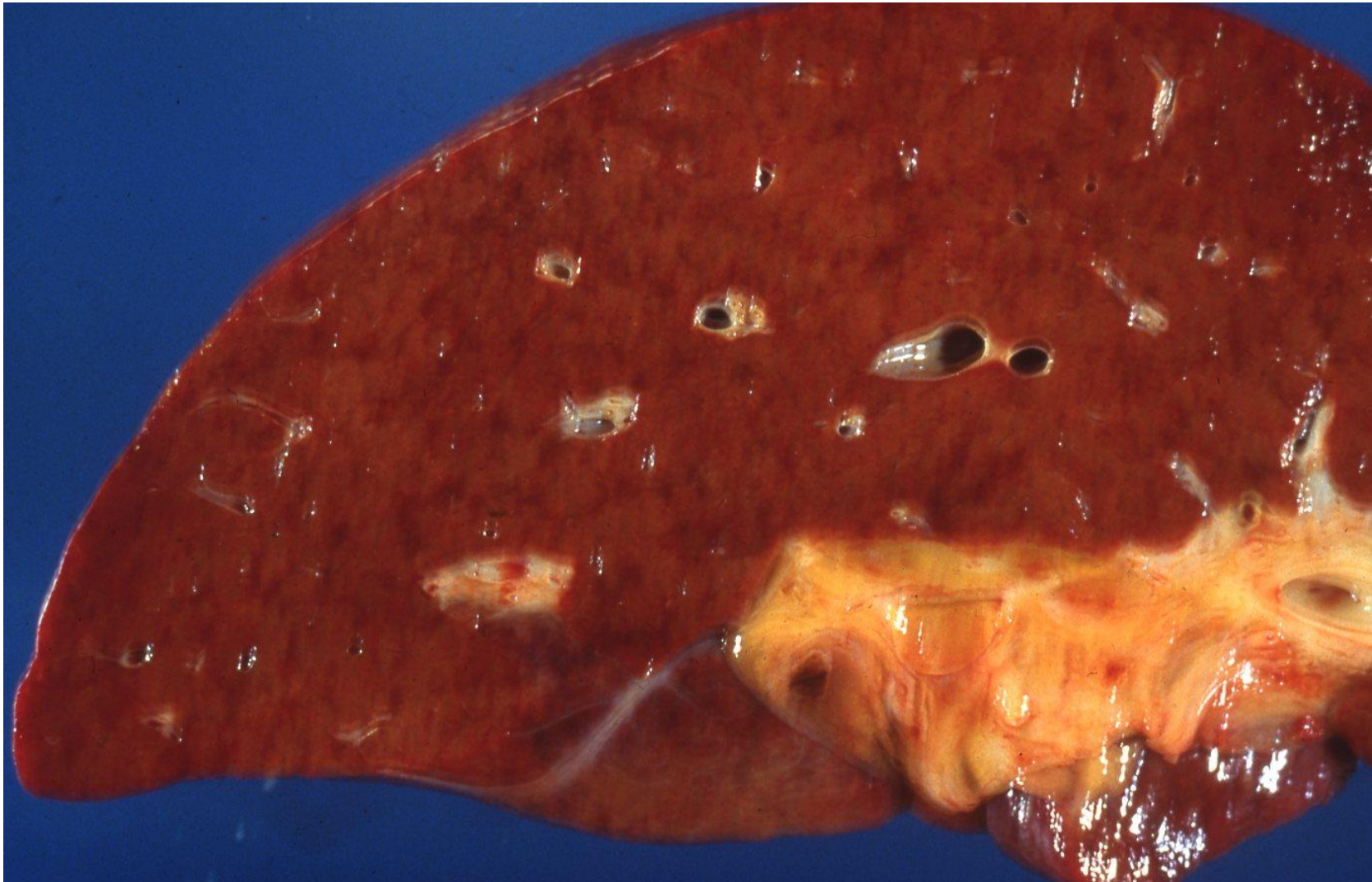
Low-powered microscopic appearance of the liver shows marked and fused centrilobular congestion. The periportal zones are devoid of congestion (H&E-1).



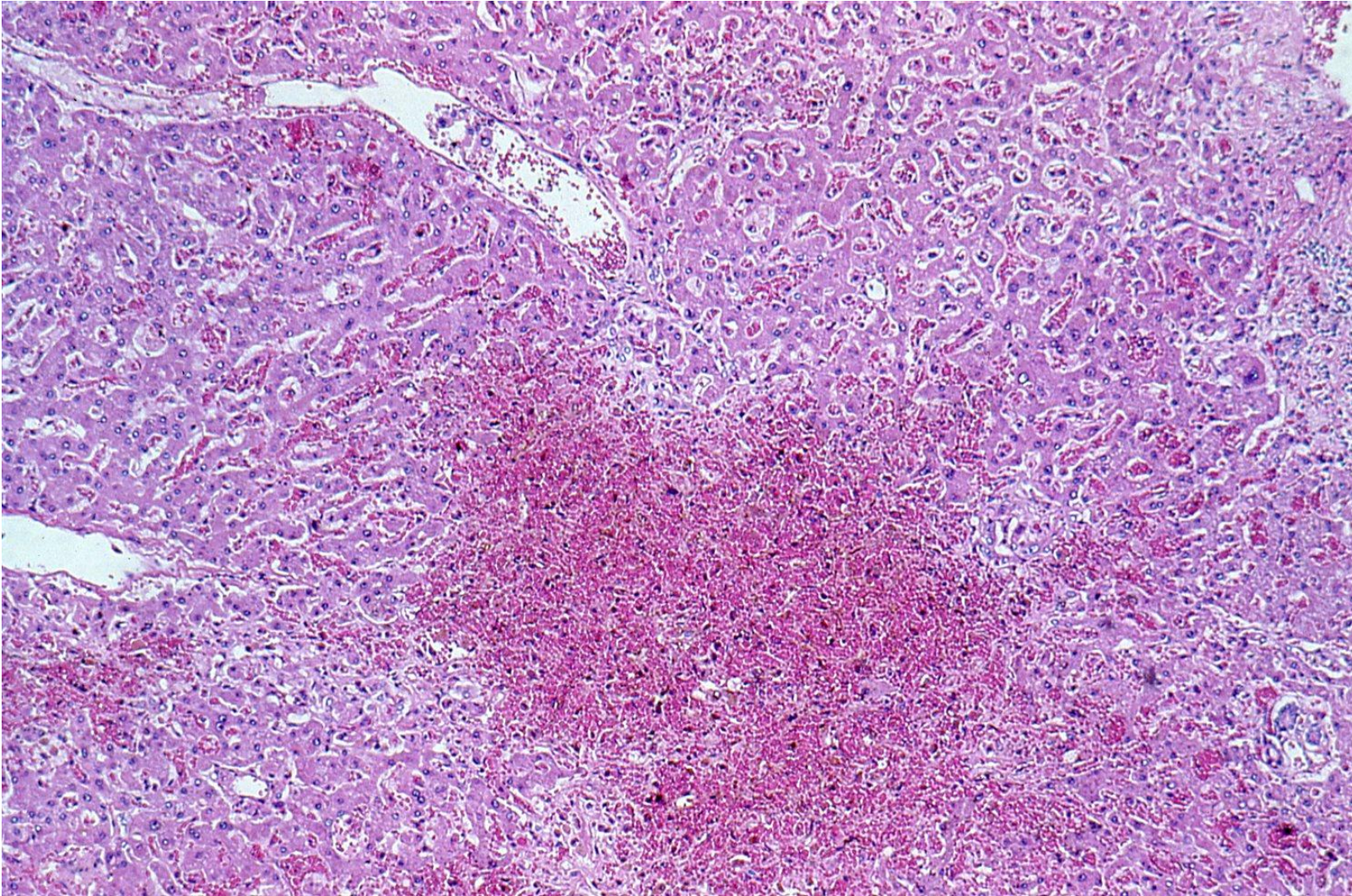
Microscopic appearance of the liver shows centrilobular congestion with hepatocellular necrosis. The periportal zones are devoid of congestion and reveal fatty change (H&E-2).



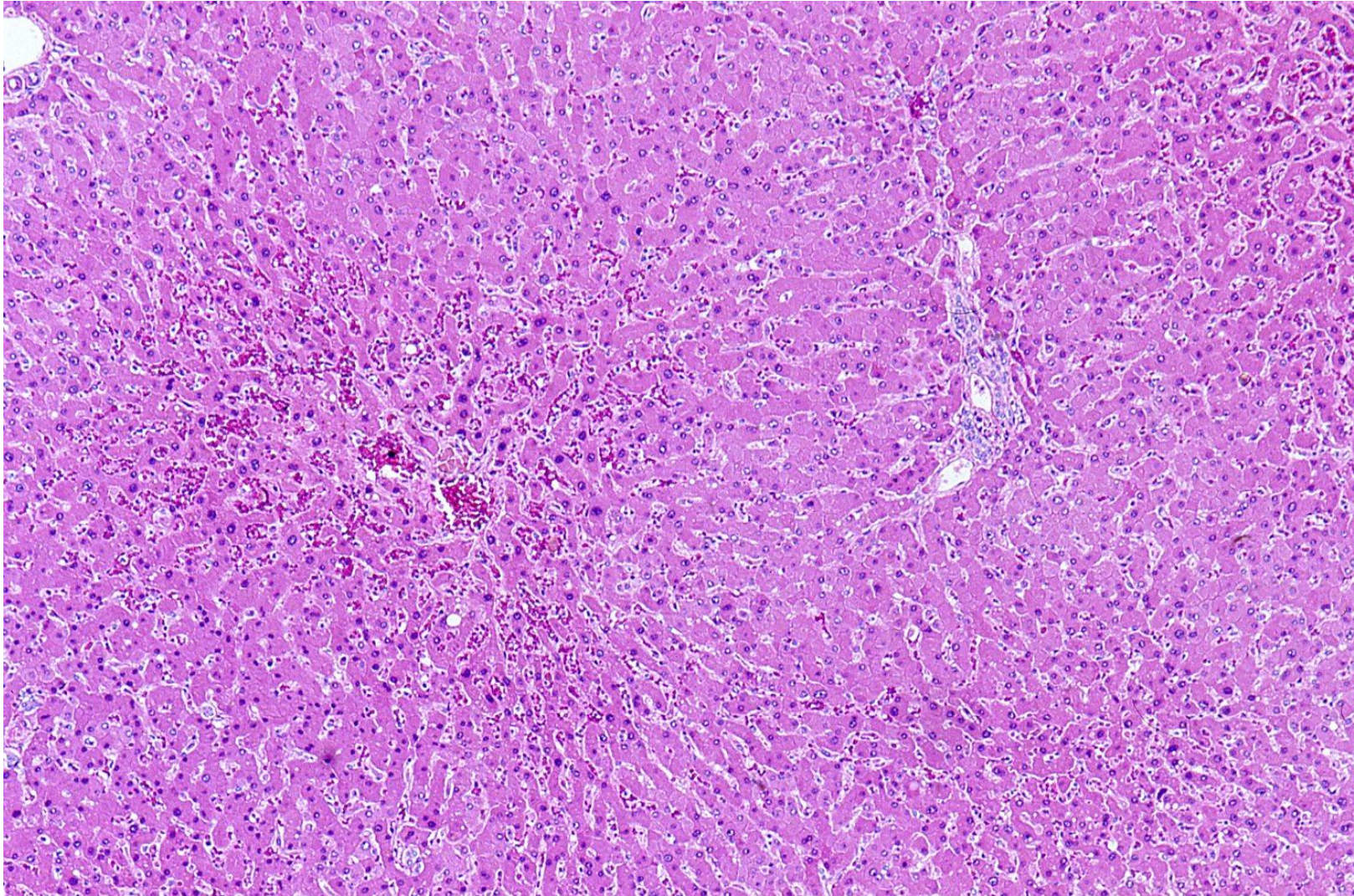
Microscopic appearance of the periportal zone of the liver shows fatty change of large droplet type (H&E-3).



Gross appearance of the cut surface of the liver with chronic passive congestion in another case. The centrilobular zone is red-congested.



Microscopic appearance of the liver with chronic passive congestion in the above (H&E). The centrilobular zone is red-congested with hepatocellular loss and markedly elevated transaminases in the serum.



Mild liver congestion. Microscopic appearance of the liver shows mild degree of centrilobular congestion (H&E). The hepatocytes in the periportal zones remain intact without fatty change.