Global multi-stakeholder endorsement of the MAFLD definition

Comprising over 1000 signatories representative of multiple stakeholders, including hepatologists, internists, diabetologists, endocrinologists, paediatricians, primary-care providers, nephrologists, cardiologists, pathologists, patient advocates, nurses, nutritionists, and pharmaceutical experts from over 134 countries, we—the undersigned—endorse both the name metabolic (dysfunction)-associated fatty liver disease (MAFLD) as an overarching term and its definition for fatty liver diseases associated with metabolic dysregulation.[1–3] We advocate for this change because it more accurately reflects the underlying pathogenesis of the disease than does the previously used term, non-alcoholic fatty liver disease (NAFLD). Furthermore, we believe that this designation will enhance our ability to advance the science of fatty liver disease and to improve patient care.[4,5] This open letter represents the voices of individuals and multiple stakeholders across the global liver health community; it is not intended to devalue any other initiative, but to complement and inform them.

We publish this letter in response to substantial evidence showing the superior use of the MAFLD definition over that of NAFLD for patient awareness and management,[6–9] alignment with other diseases associated with metabolic dysregulation, advocacy for a more comprehensive approach to policies related to non-communicable diseases, and because the term is devoid of stigma.[10,11] Widespread adoption of the name and definition of MAFLD will allow for greater standardisation across the spectrum of disease and will help to set us on the path to a more cogent, coherent, and logical framework to understand, diagnose, and treat this commonly encountered condition.

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