Inclusion criteria

- Age ≥18 years
- Elective TIPS placement for refractory ascites or recurrent variceal bleeding (see protocol for exact definitions)
- Confirmed liver cirrhosis as documented by liver biopsy, elastography (e.g. Fibroscan) or combination of usual radiological and biochemical criteria.

Key exclusion criteria

- Any absolute contraindications for TIPS placement (see protocol)
- Use of ciclosporin
- Life-threatening variceal bleeding with emergency TIPS placement which can not be delayed 72 hours
- Age > 80 years
- HIV
- Non-cirrhotic portal hypertension
- Portal vein thrombosis
- History of OHE not induced by SBP or gastrointestinal bleed
- Current or recent (<3 months) use of rifaximin
- Overt neurologic diseases such as Alzheimer or Parkinson
- Pregnant or breastfeeding women

Study

Prevention of hepatic **E**ncephalopathy by **A**dministration of **R**ifaximin and **L**actulose in patients with liver cirrhosis undergoing placement of a TIPS: a multi-centre randomized, double blind, placebo controlled trial.

Study treatment

From 72 hours before TIPS, until 12 weeks after TIPS placement. Start dosage lactulose: 25mL 2dd, further based on amount of bowel movements (≤ 2 soft stools per day). Rifaximin: 550mg 2dd or placebo 550mg 2dd.

Visits

Day –7 (baseline), start treatment at day –3, day 0 = TIPS placement, day 10, week 4, week 12, week 52.

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