



Curriculum Vitae

Personal information **Søren Møller**

Work experience

01/07/1999 – CURRENT – Copenhagen, Denmark

CHIEF PHYSICIAN, FULL PROFESSOR – Hvidovre Hospital and University of Copenhagen

Søren Møller (SM) has a position as Chief Physician at the Department of Clinical Physiology and Nuclear Medicine, Hvidovre Hospital and is Full Professor at Institute of Clinical Medicine, University of Copenhagen. The primary research area is within the field of complications of chronic liver disease with focus on homeostatic pathophysiology and aspects of metabolism, haemodynamics, and kinetics of vasoactive substances.

SM has the responsibility of the haemodynamic laboratory and has during the last decades conducted research programmes with focus on metabolic and kinetic studies of markers of haemodynamic abnormalities, fibrosis, and inflammation. These markers have particular importance with respect to alcoholic and non-alcoholic liver diseases, portal hypertension and nonalcoholic liver disease (NAFLD).

A considerable part of the research relates to organ-related disturbances seen in the multiorgan failure, which characterises patients with end-stage liver disease. This includes abnormalities such as the hepatorenal syndrome, hepatopulmonary syndrome, and cardiovascular dysfunction (cirrhotic cardiomyopathy). SM has contributed to the description of the new entity cirrhotic cardiomyopathy with respect to definition and clinical characteristics.

In the haemodynamic laboratory SM leads and participates in research studies utilizing invasive techniques such as liver vein catheterization, right heart catheterization and transjugular liver biopsies (Tjalb) with simultaneous measurement of portal pressure in combination with imaging techniques as heart CT scans, MRI and MR-Elastography.

The research combines different modalities such as biomarkers, haemodynamics, advanced imaging techniques and metabolomics and genomics

Until now the research has resulted in more than 300 peer-reviewed papers written by SM in cooperation with leading national and international centers. All together the research has gained new insight in the pathophysiological development and our understanding of mechanisms for therapeutic interventions in patients with chronic liver disease..

SM has previously been president for The Danish Association for Liver Diseases, Danish Society for Clinical Physiology and Nuclear Medicine, and Member of Scientific Board of The European Association for the Study of Liver Diseases. Presently SM is president for The Medical Society of Copenhagen. Human health and social work activities

01/07/1999 – CURRENT – Hvidovre, Denmark

SPECIALIST IN CLINICAL PHYSIOLOGY AND NUCLEAR MEDICINE – Hvidovre Hospital

Taking care of daily clinical and investigations of nuclearmedicine.
Haed of hemodynamic laboratory with invasive investigations such as liver vein catheterization, determination of splanchnicus flow, right heart catheterization, and transjugular liver biopsies..

Education and training

01/07/1999 – CURRENT – Islands Brygge 63, Copenhagen, Denmark
CHIEF PHYSICIAN, SPECIALIST IN CLINICAL PHYSIOLOGY AND NUCLEAR MEDICINE – Danish Health Authority
www.sst.dk

01/06/2006 – CURRENT – The Panum Institute, Blegdamsvej 3A, Copenhagen, Denmark
FULL PROFESSOR IN CLINICAL PHYSIOLOGY AND NUCLEAR MEDICINE – University of Copenhagen, Institute of Clinical Medicine
www.ku.dk

Additional information

- Publications** Busk TM, Bendtsen F, Poulsen JH, Clemmesen JO, Larsen FS, Gøtze JP, Iversen JS, Jensen MT, Møgelvang R, Pedersen EB, Bech JN, Møller S. Transjugular intrahepatic portosystemic shunt: Impact on systemic haemodynamics and renal and cardiac function in patients with cirrhosis. Am J Physiol 2018; 314(2): G275-G286.
- Møller S, Bendtsen F. The pathophysiology of arterial vasodilatation and hyperdynamic circulation in cirrhosis. 2017. Liver International 2018; 38:570-580.
- Danielsen KV, Wiese S, Hove JD, Bendtsen F, Møller S. Pronounced coronary arteriosclerosis in cirrhosis. Influence on cardiac function and survival. Dig Dis Sci 2018;63:1355-1362.
- Møller S, Lee SS. Cirrhotic cardiomyopathy. Snapshot. Journal of Hepatology 2018; 69: 958-960
- Wiese S, Hove J, Bendtsen F, Møller S. Myocardial extracellular volume quantified by magnetic resonance imaging is increased in cirrhosis and related to poor outcome. Liver International 2018; 38(9):1614-1623.
- Møller S, Danielsen KV, Wiese K, Hove JD, Bendtsen F. An up-date on cirrhotic cardiomyopathy. Expert Review of Gastroenterology and Hepatology 2019; 13(5): 497-505.
- Møller S, Sibbesen ELC, Madsen JL, Bendtsen F. Indocyanine green retention test in cirrhosis and portal hypertension: Accuracy and relation to severity of disease. JGH

2019; 34:
1093-1099.

Wiese S, Hove J, Mo S, Mygind ND, Tønnesen J, Petersen CL, Clemmesen JO, Gøtze JP, Bendten F, Møller S. Cardiac dysfunction in cirrhosis: a 2-year longitudinal follow-up study using advanced cardiac imaging. *Am J Physiol* 2019; 317(3): G253-G263.

Praktiknjo M, Monteiro S, Grandt J, Kimer N, Werge MP, William P, Brol M, Turco L, Schierwagen R, Chang J, Klein S, Jamsem C, Uschner FE, Welsch C, Moreau R, Schepis F, Bendtsen F, Lise Lotte Gluud, Trebicka J, Møller S. Cardiodynamic state is associated with systemic inflammation and fatal acute-on-chronic liver failure. *Liver International* 2020; 40(6): 1457-1466.

Wiese S, Voiosu A, Hove JD, Danielsen KD Voiosu T, Gørnbæk H, Møller HJ, Genovese F, Reese-Petersen AL, Mookerjee RP, Clemmesen JO, Gøtze JP, Andersen O, Bendtsen F, Møller S. Fibrogenesis and inflammation contribute to the pathogenesis of cirrhotic cardiomyopathy. *APT* 2020; 52;340-350.

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