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Outcome of Living Donor Liver transplantation for Secondary biliary cirrhosis in Adult: Single Center Experience.

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Introduction: Although liver transplantation is a definitive cure for secondary biliary cirrhosis (SBC), there is limited data about results of living donor liver transplantation (LDLT) in adults.

Methods: This retrospective study assessed data from 29 SBC patients who had LDLT between December 1994 and July 2018.

Results: The study cohort comprised of 10 males and 19 females, aged 50.0 ± 8.6 years. Except for 3 patients, the rest were diagnosed with secondary biliary cirrhosis from hepatolithiasis, and 25 out of 29 (86.2%) had a history of receiving the hepatobiliary surgery. Model for end-stage liver disease (MELD) score was 18.8 ± 9.4 . The major complication rate was 62.1%, and the most common complication was bleeding. The ICU and hospital stay were 24.4 ± 13.8 and 40.9 ± 24.8 days. Four patients died in first month after LDLT; Tow died of rupture of hepatic artery rupture, one died of Intra-cranial hemorrhage, and the other one died of sepsis.

Conclusions: LDLT for patients with SBC is very difficult, and there's a big danger of massive bleeding. Even though operation time is long and there's a lot of bleeding, thorough planning and a meticulous surgical technique that does not cause complications can reduce the mortality rate in LDLT for patients with SBC.

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