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Living donor liver transplantation (LDLT): A single center experience

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In the absence of cadaveric donor liver transplantation, Living-Donor Liver Transplantation (LDLT) is an alternative option for patients with end-stage liver disease. LDLT continues to be a life-saving option in countries without satisfactory cadaveric donation. In our country, the cadaveric donation is still limited by religious and cultural beliefs, as in Japan, Korea and India. We reported the outcome of 120 adult LDLTs at Cairo University Transplant Center. Patient's records were retrospectively reviewed between 2006 and 2014 for recipient survival and complications. Transplant recipients consisted of 110 men and 10 women (ages 19 to 62 years). The main indication for LDLT was hepatitis C cirrhosis. All procedures were right lobe hepatectomy without middle hepatic vein. All donors survived the procedure and 64 of 120 LDLT recipients were alive. 30 patients died in the early (first 3 months) post-operative period (25%) because of infections, vascular complications, biliary complications, CVA and pulmonary embolism. 64% of the donors survived for one year. HCV recurrence occurred in 61 patients (50.8%); biliary complications developed in 47 recipients (39%), where most of them were treated by interventional technique. Vascular complications occurred in 12 patients (10%). 38 patients suffered from infections (31.6%). Acute rejection occurred in 21 patients (17.5%); while chronic rejection developed in 7 patients (5.8%). Our results indicate that LDLT is with rather satisfactory outcome in absence of cadaveric donation.

Biography

Mona El-Amir has completed her MSc from Cairo University, School of Medicine, Egypt. She is a Professor of Internal Medicine, Cairo University. In 2010, she became a member of European Association for Study of Liver (EASL) as well as of Asian Pacific Association for Study of Liver (APASL). Currently, she is working as an active member of Liver Transplant Center, Medical School of Cairo University.

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