Impact of pretransplant infection management on the outcome of living donor liver transplantation

Thesis Submitted for Partial fulfillment of Master Degree in Tropical Medicine

BY

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Abstract

Background: Liver transplantation (LT) has emerged as an established therapeutic option for patients with chronic liver disease (CLD) and hepatocellular carcinoma(HCC).

Patients with end stage liver disease (ESLD) are at high risk of infection with multidrugresistant organisms, which can affect the outcome of LT.

<u>Aim of the work:</u> To Study theimpact of pre-transplant infection management on the outcome of living donor liver transplantation (LDLT).

Methods: A combined retrospective analysis and prospective follow upwas done at National Hepatology and tropical medicine research institute for data of 50 patients with CLD who performed LT from September 2013 to December 2017, we divided patients into group (1): Patients who had infection within three months before transplantation with adequate treatment and group (2): patients without infection, both groups were followed 4 months post-operatively.

Results: Results had showed that patients with high MELD score are more susceptible to infection pre and post-operative and chest infection is the most common infection pretransplant. There was no significant statistical differences regarding hospital and ICU stay and post-operative coursebetween both groups, but the mortality rate was more in patients with group (1) (40%) than those of group (2) (23.3%) and the causes of mortality in the first group were mainly due to medical causes (mainly due to infections and sepsis) in 75% versus 28.6% in group (2) without statistical significance.

<u>Conclusions:</u> Liver cell failure (LCF) and concomitant infection 3 months before LT with adequate treatment had no significant statistical differences regarding hospital and ICU stay and had a comparable post-operative course regarding medical complications, but the mortality rate was more in patients with infection than those without infection and the causes of mortality were mainly due to medical causes.