MANAGEMENT OF POST-LIVER TRANSPLANTION COMPLICATIONS

Essay

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Internal Medicine

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٢٠٠٨

CONTENTS

	Page
Introduction	١
Aim of the Work	٤
The history and ethics of liver transplantation	٥
Listing and Indications of Liver Trans-plantation	٩
Contraindications of Liver Transplan-tation	٤٨
Selection and Evaluation of Liver Trans-plant Candidates	٥٧
Spotlight on surgical operation	١٠٢
Complications of Liver Transplantation	١١٤
- Introduction	١١٤
- Donor Complications	١١٥
- Recipient Complications	١٢٢
Egyptian Experience in Liver Transplan-tation	٣٩٦
Summary	٤١٤
Referenes	٤٢١
Arabic Summary	

List of Tables

Table No.	*Title*	*Page*
١	Calculation and interpretation of the Mayo risk score for primary biliary cirrhosis	٢٤
٢	Survival after adult liver transplantation by age	٥٨
٣	Patient selection for liver transplantation	٦٩
٤	Non-disease specific minimal listing criteria	٧٣
٥	UNOS liver status classification for patients older than ١٨ years according to disease severity	٧٧
٦	CTP classification	٨٠
٧	Prognostic variables in primary biliary cirrhosis	٨٥
٨	Comparison of MELD and CTP models	١٠١
٩	Monitoring cardiac function with a swan-ganz catheter	١٢٤
١٠	Intensive care unit laboratory tests	١٢٤
١١	Parameters for extubation	١٣٠
١٢	Changes in laboratory values in hepatic disorders	١٤٢

List of Tables*(Cont..)*

Table No.	*Title*	*Page*
١٣	Immunological response to immunosuppressive medications used in transplantation	١٧٨
١٤	Typical steroid dosing regimens for use in liver transplantation: the classic taper used in combination with cyclosporine and azathioprine	١٨٠
١٥	Steroid dosing for treatment of acute cellular rejection (baylor university medical center)	١٨١
١٦	Characteristics of polyclonal antibody therapies used in transplantation immunosuppression	٢٠١
١٧	Immunosuppressive drugs: Mycophenolate mofetil	٢١٢
١٨	Immunosuppressive drugs: Corticosteroids	٢١٣
١٩	Immunosuppressive drugs: Cydosporin..	٢١٤
٢٠	Immunosuppressive drugs: Tacrolimus	٢١٥
٢١	Drugs which affect levels and toxicity of the calcineurin inhibitors and Sirolimus	٢١٦

List of Tables*(Cont..)*

Table No.	*Title*	*Page*
٢٢	Immunosuppressive drugs: Sirolimus	٢١٧
٢٣	Immunosuppressive drugs: Polyclonal antibody preparations	٢١٨
٢٤	Immunosuppressive drugs: Monoclonal antibodies to T lymphocytes	٢١٩
٢٥	Immunosuppressive drugs: Antibodies to IL-٢ receptor	٢٢٠
٢٦	Major side effects of immunosuppressive agnets	٢٢١
٢٧	Baylor university medical center liver transplantation immunosuppression protocols	٢٢٧
٢٨	Banff grading of acute liver allograft rejection	٢٣٨
٢٩	Acute rejection activity index	٢٣٩
٣٠	Steroid treatment protocol for acute rejection	٢٤٤
٣١	Features of early and late chronic liver allograft rejection	٢٥٠
٣٢	Hyperacute rejection criteria	٢٥٦

٣٣ Risk factors for infection in liver transplanttation ٢٧٠

List of Tables *(Cont..)*

Table No.	*Title*	*Page*
٣٤	Antimicrobial drug interactions with tacrolimus/ cyclosporine/sirollmus	٢٩١
٣٥	Common fungal pathogens in orthotopic liver transplant recipients	٢٩٥
٣٦	Randomized controlled trials of fungal prophylaxis in liver transplant recipients	٣٠٩
٣٧	Randomized controlled trials of cytomegalovirus prophylaxis in liver transplant recipients	٣٢٤
٣٨	Antimicrobial prophylaxis for ucla liver transplant recipients	٣٤٦
٣٩	Descriptors of graft dysfunction after liver transplantation	٣٤٨
٤٠	Diagnosis of primary nonfunction-proposed UNOS criteria (Adult)	٣٥٠
٤١	Risk factors for primary nonfunction and initial poor function	٣٥٧
٤٢	Medical complications during follow up period	٣٨٦
٤٣	Demographic Data	٤٠٦

٤٤ Donor Evaluation ٤٠٧
٤٥ Recipient Evaluation ٤٠٩

List of Figures

Figure No.	*Title*	*Page*
١	MELD survival model	٩٢
٢	Three types of donor hepatectomy	١٠٤
٣	Selective vascular occlusion	١٠٦
٤	The completion of the liver transaction	١٠٧
٥	Computed tomographic scan of a hepatic infarct with indwelling drainage tubes	١٤٣
٦	Angiogram demonstrating hepatic artery thrombosis	١٤٩
٧	Endoscopic retrograde cholangiopan-creatography demonstrating severe stenosis or stricture of the common bile duct	١٥٧
٨	Percutaneous transhepatic cholangio-gram showing the dilated common bile duct of a Roux-en-Y choledocho-jejunostomy	١٦٠
٩	Schematic of mechanisms of action of immunosuppressive drugs	١٧٧
١٠	Acute (cellular) rejection	٢٤١

١١ Histopathology of recurrent hepatitis C at ١ week posttransplantation ٢٤١

List of Figures *(Cont..)*

Figure No.	*Title*	*Page*
١٢	Treatment of acute rejection	٢٤٣
١٣	A high power magnification of the portal tract	٢٥٢
١٤	Foam cell transformation of the medial myocytes can also be seen in chronic rejection	٢٥٢
١٥	A higher magnification of the artery from Figure ٤	٢٥٢
١٦	Treatment of chronic rejection	٢٥٣
١٧	Common infections by time after liver transplantation	٢٦٧

List of Abbreviation

AAA	Aromatic Amino Acids
AIDS	Acquired Immunodeficiency Syndrome
ALF	Acute Liver Failure
ALT	Alanine Aminotransferase
ASTS	American Society of Transplantat Surgeons
BCAA	Branched Chain Amioacids
BMD	Bone Mineral Density
BMI	Body Mass Index
BSA	Body Surface Area
CBD	Common Bile Duct
CMI	Cell Mediated immunity
CMV	Cytomegalovirus
CT	Computed Tomography
CTA	Computed Tomographic Angiography
CTP	Child- Turcott-Pugh Score
CTS	Computed Tomographic Scan
CVP	Central Venous Pressure
CVVHD	Continuous Veno-Venous Hemodiafiltration
DHHS	The Department for Health and Human Services (USA)
EBV	Ebstin Barr Virus
ECG	Electrocardiographic
ENBD	Endoscopic Nasobiliary Drainage
ERC	Endoscopic Retrograde Cholangiography

ERCP	Endoscopic Retrograde Cholangiopancreatography.
ESLD	End Stage Liver Disease
FFP	Fresh Frozen Plasma
FHF	Fulminant Hepatic Failure
GVHD	Graft Versus Host Disease
HA	Hepatic Artery
HAT	Hepatic Artery Throbmosis.
HBIG	Hepatitis B Immune Globulin
HBsAg	Hepatitis B Surface Antigen
HBV	Hepatitis B Virus
HCC	Hepatocellular Carcinoma
HCV	Hepatitis C Virus
HDV	Hepatitis D Virus
HIV	Human Immunodefiency Virus
HLA	Human Leukocyte Antigen
HV	Hepatic Vein
ICP	Intracreanial Pressure
ICU	Intensive Care Unit
IL-٢	Interleukin-٢
INR	International Normalized Ratio of Prothrombin Time
IVC	Inferior Venal Cava
KSA	Kingdom of Saudi Arabia
LDLT	Living Donor Liver Transplantation
LHV	Left Hepatic Vein

LRLT	Living Related Liver Transplantation
LT	Live Transplantation
LV	Liver volume
MELD	Model for End Stage Liver Disease
MHC	Major Histocompatibility Complex
MHV	Middle Hepatic Vein
MOF	Multi-Organ Failure
MRA	Magnetic Resonance Angiography
MRCP	Magnetic Resonance Cholangiopancreatography
MRI	Magnetic resonance imaging
NIH	National institute of Health (USA)
OLT	Orthotopic liver transplantation
OPTN	Organ procurement and transplantation network (USA).
PBC	Primary Biliary Cirrhcsis
PCP	Pneumocystis carinii pneumonia
PCR	Polymerase chain reaction
PEEP	Positive end expiratory pressure
PPD	Purified protein Derivative
PRBCs	Packed red blood cells
PSC	Primary sclerosing cholangitis
PT	Prothrombin time
PTA	Percutaneous transluminal angioplasty
PTC	Percutaneous transhepatic cholangiography
PTLD	Post transplantation lymphoproliferative disease

PV	Portal vein
RHV	Right hepatic vein
RPIHV	Right posterior inferior hepatic vein
SBP	Spontaneous Bacterial peritonitis
SGA	Subjective global assessment
SLV	Standard liver volume
SMA	Superior mesenteric artery
SMV	Superior mesenteric vein
SOT	Solid organ transplant
TIPS	Transjugular Intrahepatic Portosystemic Shunt
TPN	Total parenteral nutrition
U/S	Ultrasound
UNOS	United Network for Organ Sharing (USA)
UW	University of Wisconsin

Introduction

Introduction

The liver has been the noble organ, the organ of life from time immemorial-liver in English, Leber in Germany, derived from the verb to live *(Bismuth et al., ١٩٨٤)*.

Liver transplantation is surgery to remove a diseased liver and replace it with a healthy liver from an organ donor. Liver transplant is necessary when disease makes the liver stop working. The most common reason for liver transplantation in adult is cirrhosis. The most common reason for transplantation in children is biliary atresia. Liver transplantationis is usually done when other medical treatment cannot keep a damaged liver functioning *(Stazl et al., ١٩٨٢)*.

Human liver transplantation was begun in the United States in the late ١٩٦٠s by Dr. Thomas Stazl. Interestingly, the majority of his initial patients were children with end stage liver disease. Unfortionatly, in these early series the one year survival after liver transplantation was only ١٩%. This survival rate remained unchanged despite in surgical techniques and new immunosuppressive agents until the late ١٩٧٠s when cyclosporine was introduced. Since then, a