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شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



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شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



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شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

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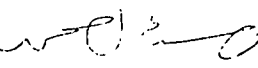
HCV Recurrence Following Living Donor Liver Transplantation In Egyptian Adults

Thesis
Submitted for the Fulfillment of
Master degree in Tropical Medicine

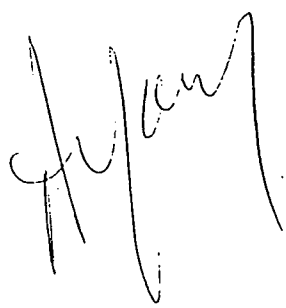
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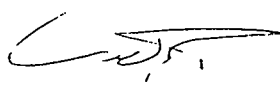
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Keywords: child sexual abuse; disclosure; social support; coping strategies

عصام

بسم الله الرحمن الرحيم

" يرفع الله الذين آمنوا منكم
و الذين أوتوا العلم درجات "

سورة المجادلة - آية ١١

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ABSTRACT:

Background: HCV related end stage liver disease is the main indication for living donor liver transplantation in Egypt. Many risk factors may contribute to the HCV recurrence post LDLT. Our aim was to investigate the incidence of clinical HCV recurrence post-LDLT in adult Egyptian patients and to evaluate disease progression in these patients and its impact on outcome of liver transplantation.

Patients and methods: This study was conducted on 98 cases of adult to adult LDLT in Dar El Fouad hospital. All of the recipients received a right lobe donation, only two received left lobe donation. Our inclusion criteria for clinical HCV recurrence were: elevated transaminases; seropositivity of HCV PCR; and confirmatory histology. They were clinically assessed and investigated (Laboratory including: Full blood picture, coagulation profile, C-reactive protein, Liver function tests, Kidney function tests, Immunosuppressant level and Imaging by Abdominal Ultrasound, Abdominal Doppler of the portal vein, hepatic arteries and veins daily follow up during hospital stay and on weekly basis during the first three months then on monthly basis till the end of six months and then every two month.

Results : Recurrence of HCV was universal in terms of viremia. Clinical recurrence of HCV was seen in 31.1% of recipients and no mortality was reported among them. Clinically recurrent HCV was mild. There was a significant impact of the previous exposure to hepatitis B virus on the development of clinical HCV recurrence while other recipient factors (age, sex, child's score, MELD score and seropositivity for CMV) did not influence HCV recurrence. It was noticed that HCV pre transplant viral titre was higher in HCV recurrent group yet it was not statistically significant. Other risk factors as donor age, donor sex, immunosuppressive drugs, GRWR and estimated graft size did not affect HCV recurrence.

Conclusion: HCV is the main indication for LDLT in Egypt . Although clinical HCV recurred in about 31% of patients yet no mortality was reported in this group. There are many risk factors affecting HCV recurrence yet only the previous exposure to HBV had significantly influenced HCV recurrence in our study.

Keywords: Recurrent HCV, living donor liver transplantation, Egyptian adults.

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