

LIVER TRANSPLANTATION FOR PSC

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OVERVIEW

- INDICATIONS FOR TRANSPLANT IN PSC
- SPECIAL CONSIDERATIONS OF PSC
- TRANSPLANT SURGERY FOR PSC

INDICATIONS

- CHOLANGITIS AND STENTING
- PRURITIS
- RISK OF MALIGNANCY
- DECOMPENSATED CIRRHOSIS-MELD

SPECIAL CONSIDERATIONS

- INFLAMMATORY BOWEL DISEASE
- CHOLANGIOCARCINOMA
- RECURRENCE OF DISEASE

TRANSPLANT SURGERY

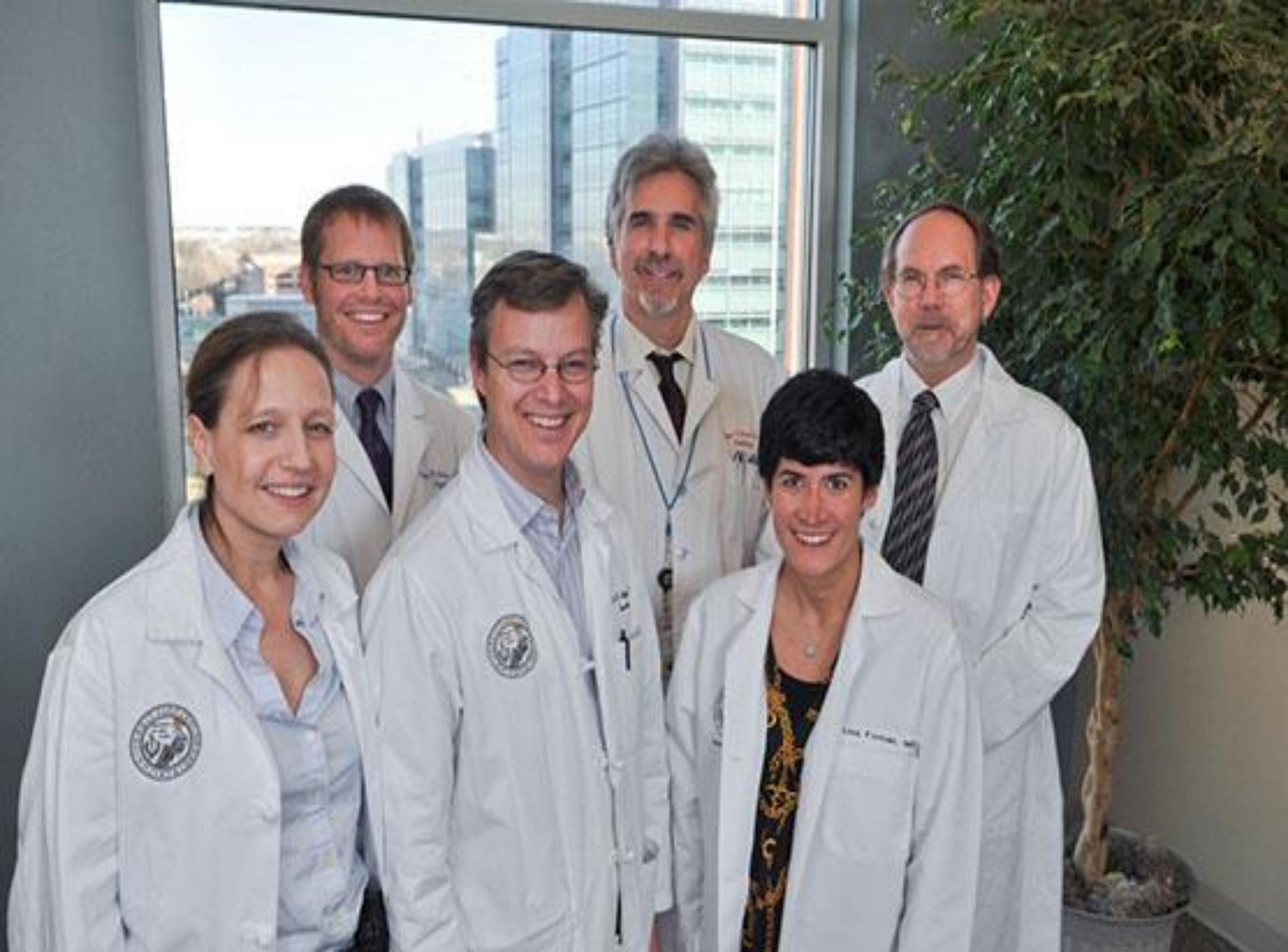
- STANDARD LIVER TRANSPLANT
- DONORS IN THE AGE OF MELD
- LIVE DONOR LIVER TRANSPLANT
- BILIARY RECONSTRUCTION

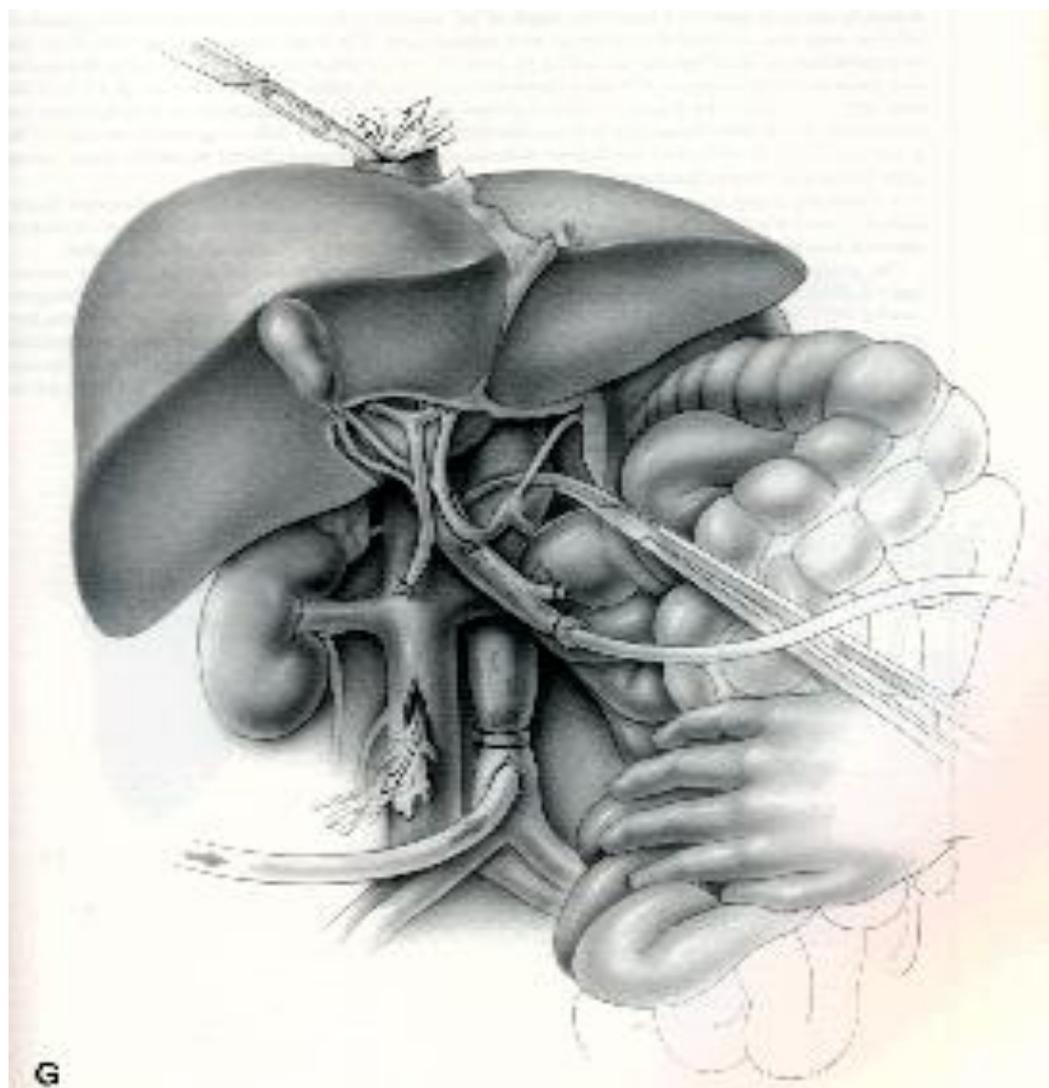
TEAM EFFORT

- NURSES
- COORDINATORS
- PHYSICIANS AND SURGEONS
- SOCIAL WORKERS
- DIETICIANS
- HOSPITAL SUPPORT

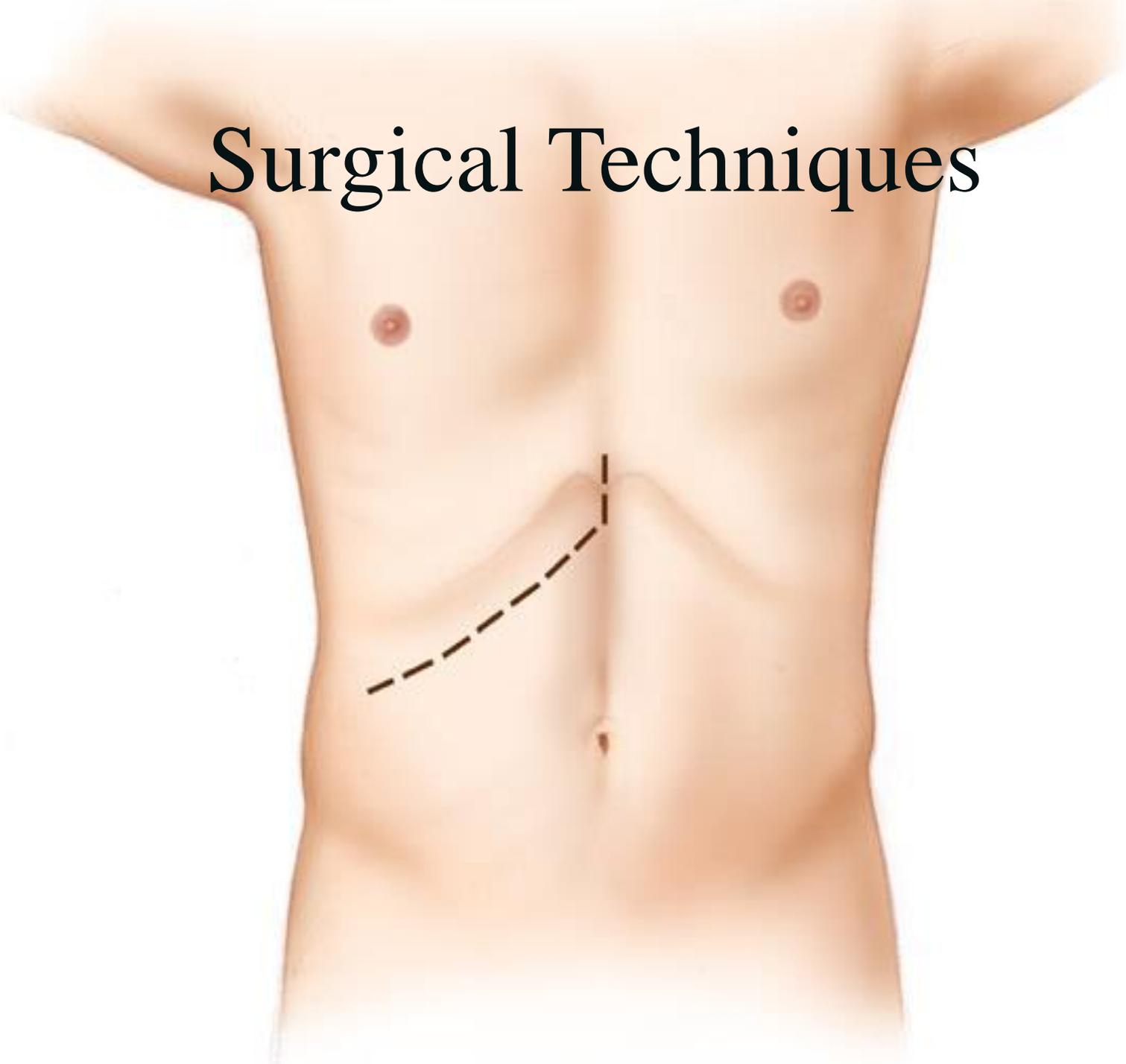
CU Transplant Surgeons

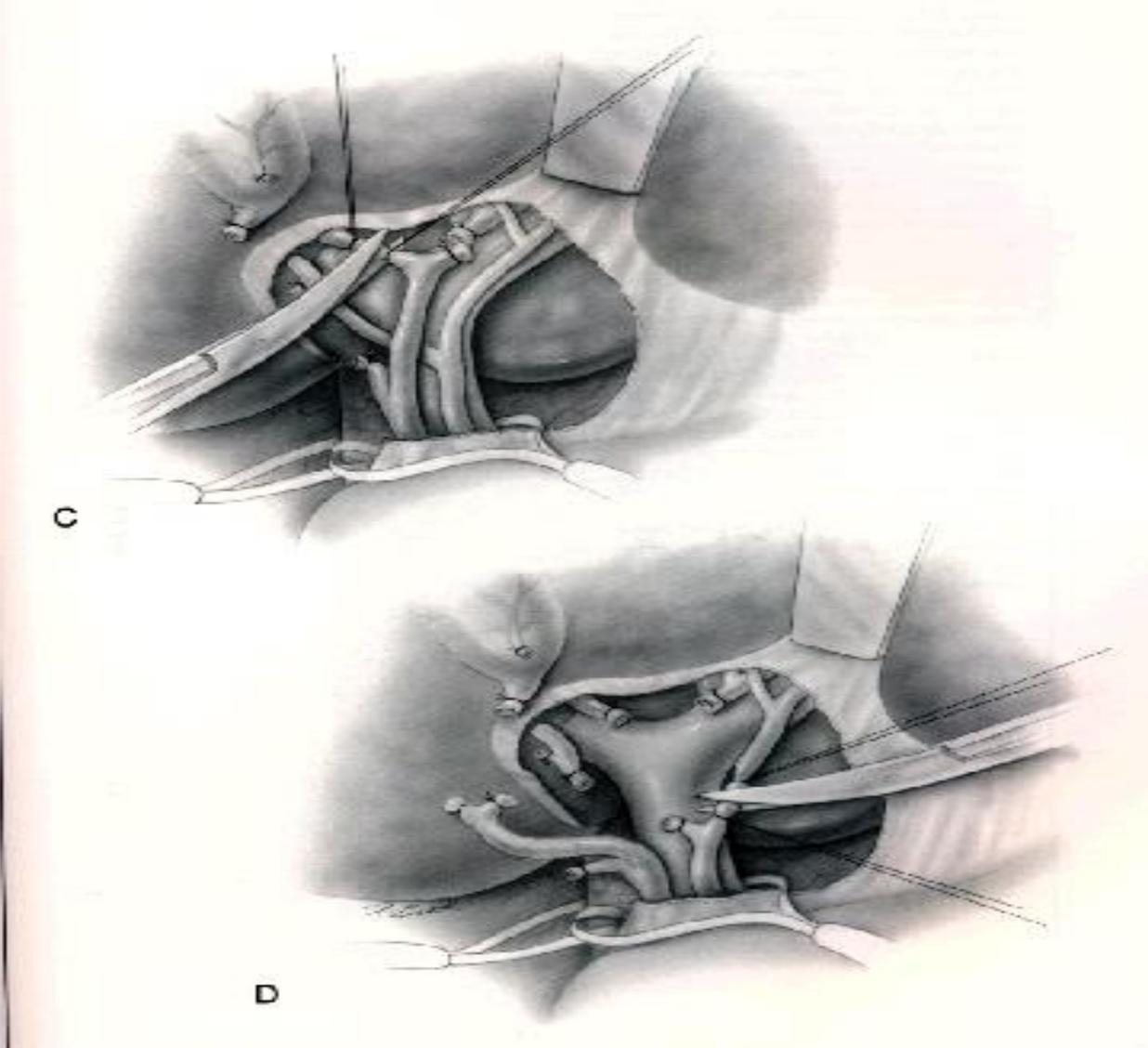






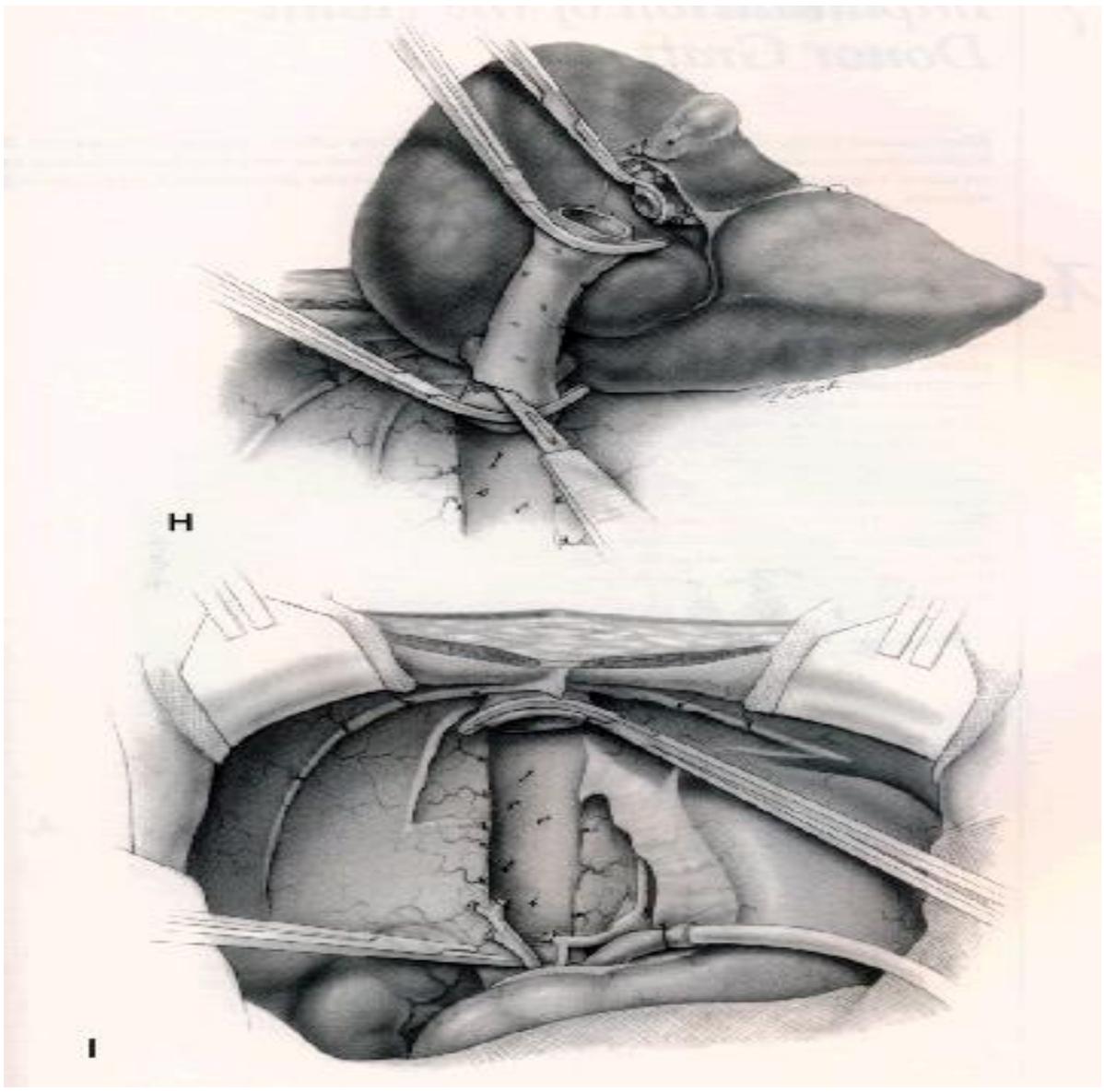
Surgical Techniques





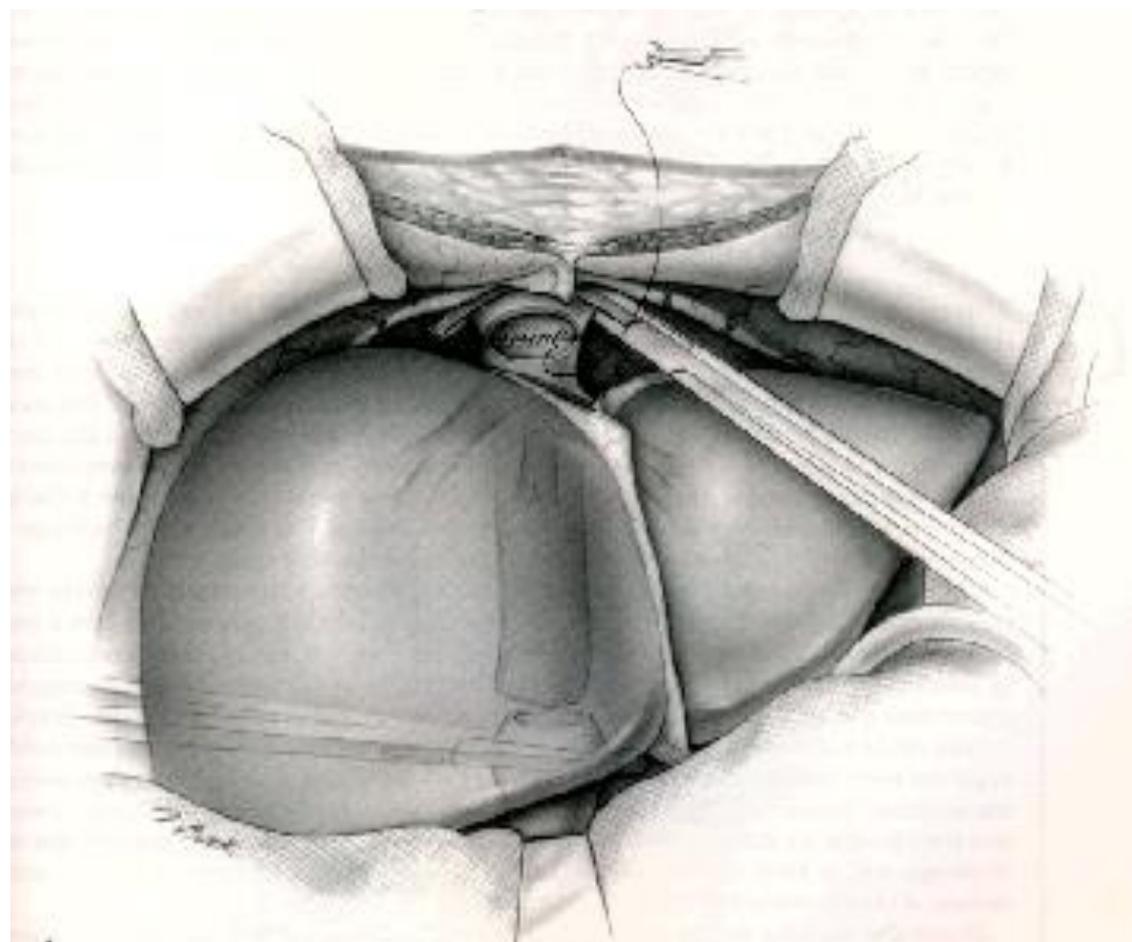
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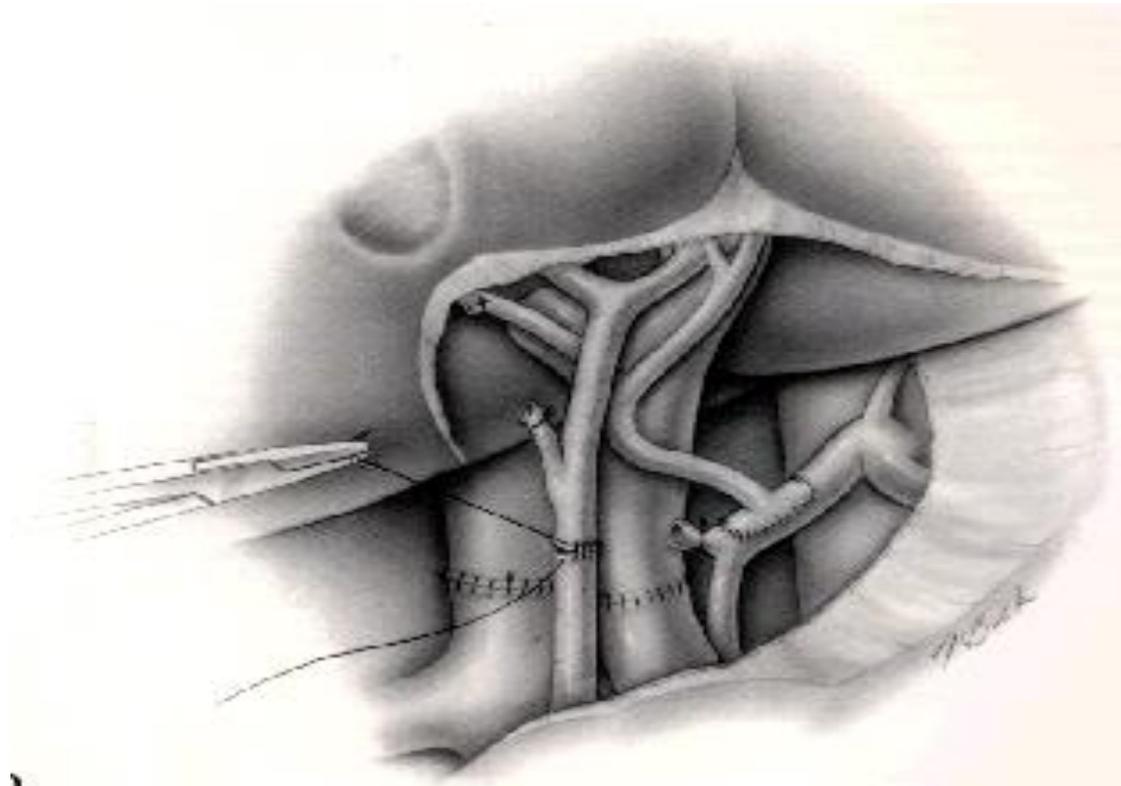
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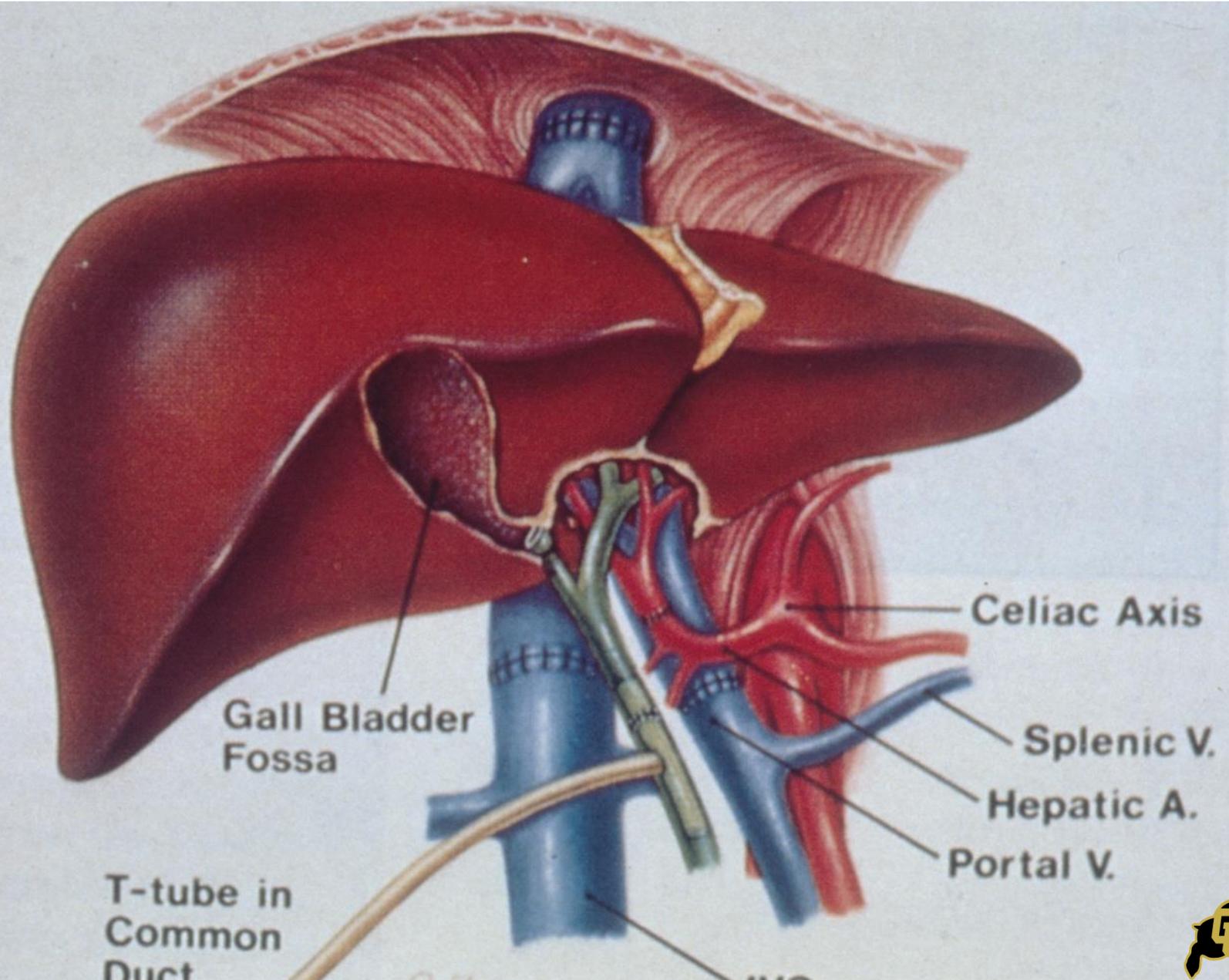
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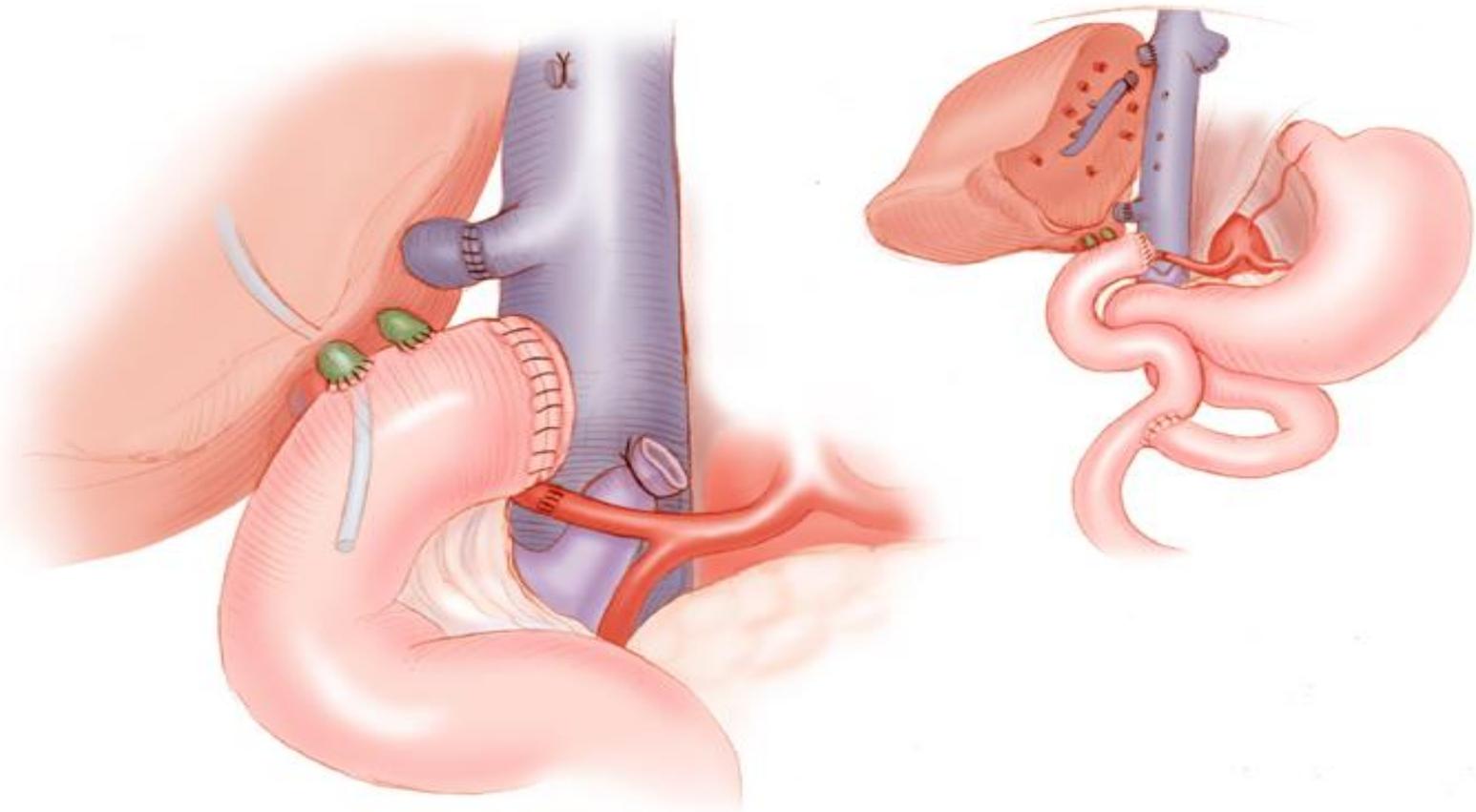


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Orthotopic Liver Transplant – Whole liver

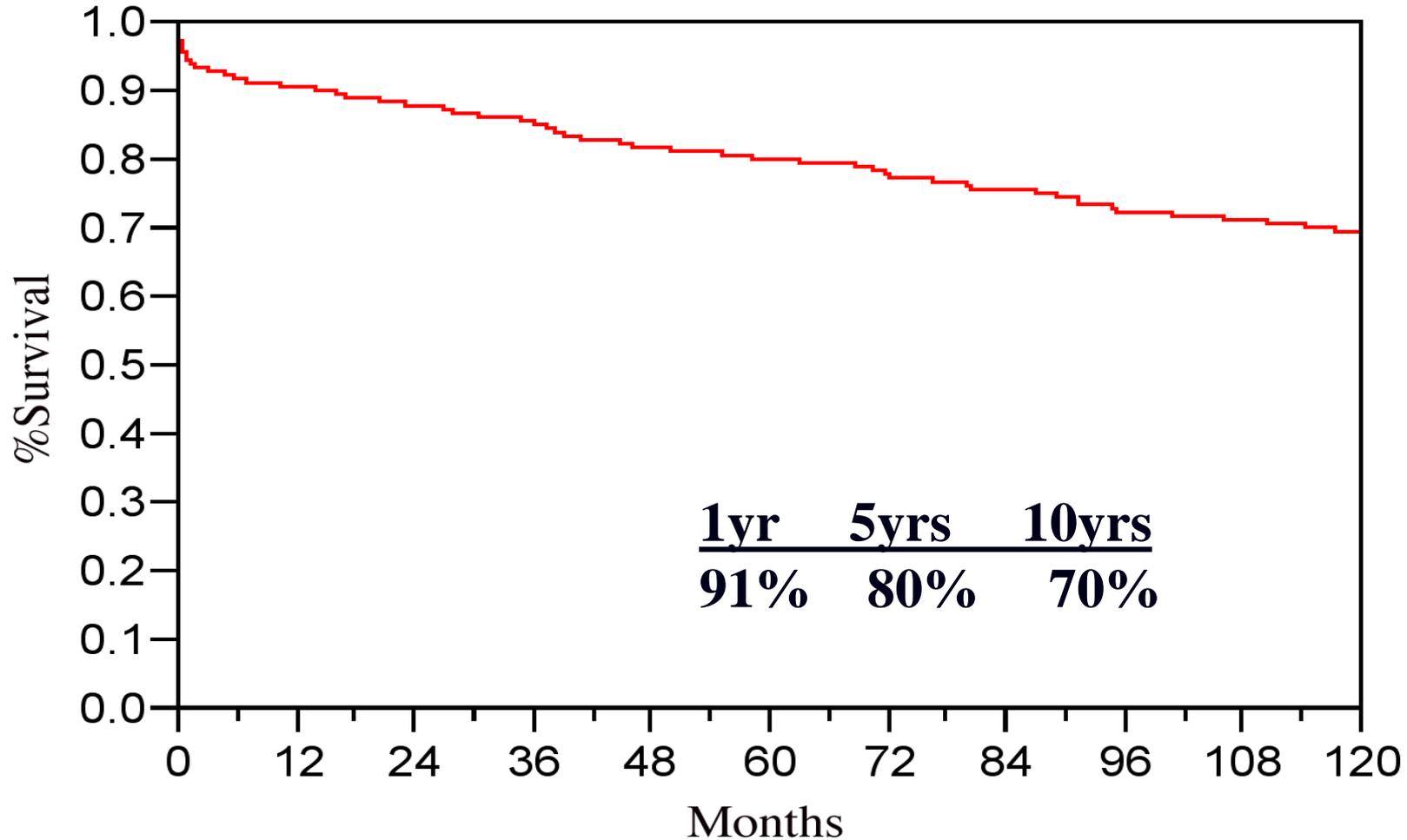


Hepatico Jejunostomy

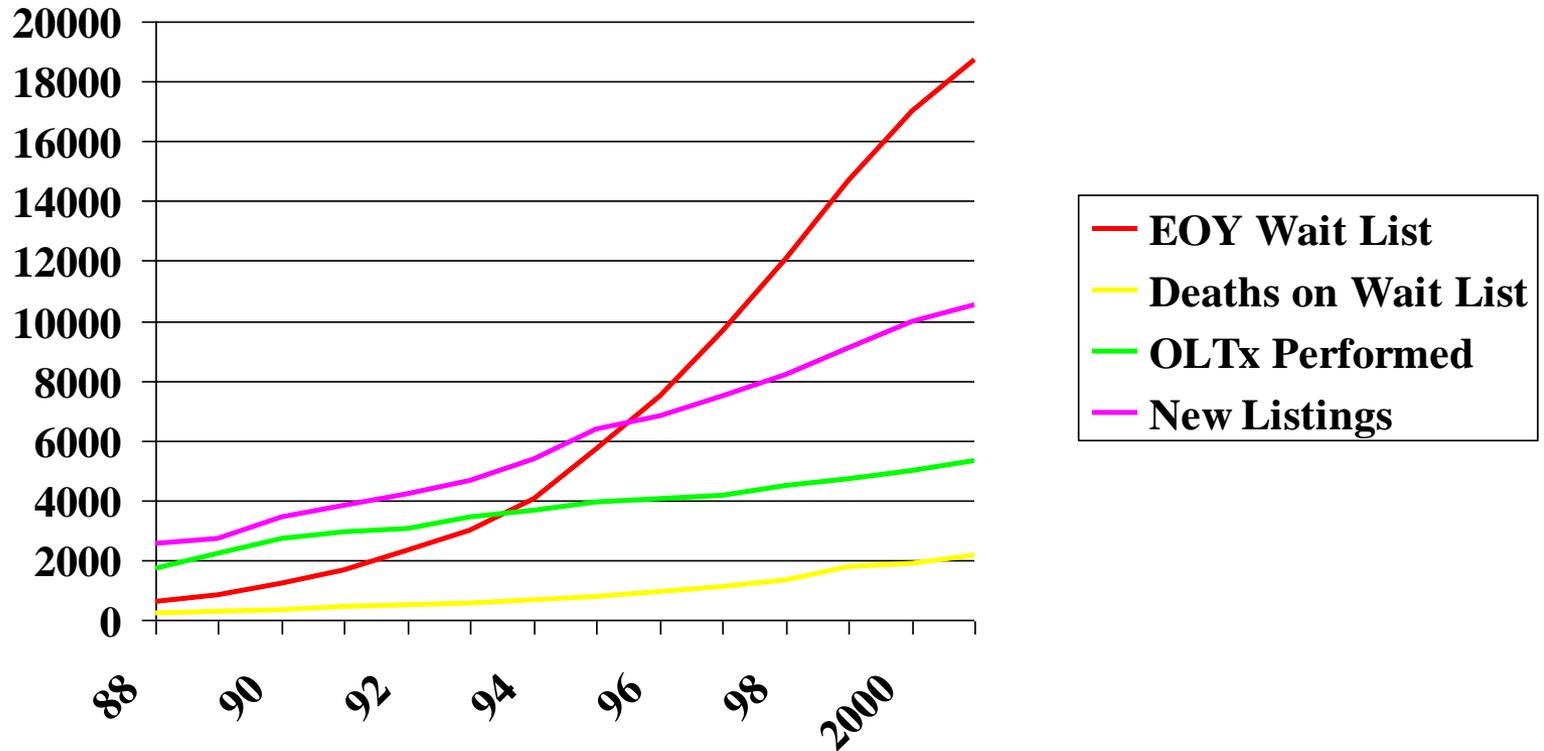


A New Beginning – New Era

Overall Patient Survival



Liver Tx in US: UNOS Dataset



$$\text{New Listings} = [(\text{EOY2} - \text{EOY1}) + \text{OLTx} + \text{Deaths}]$$

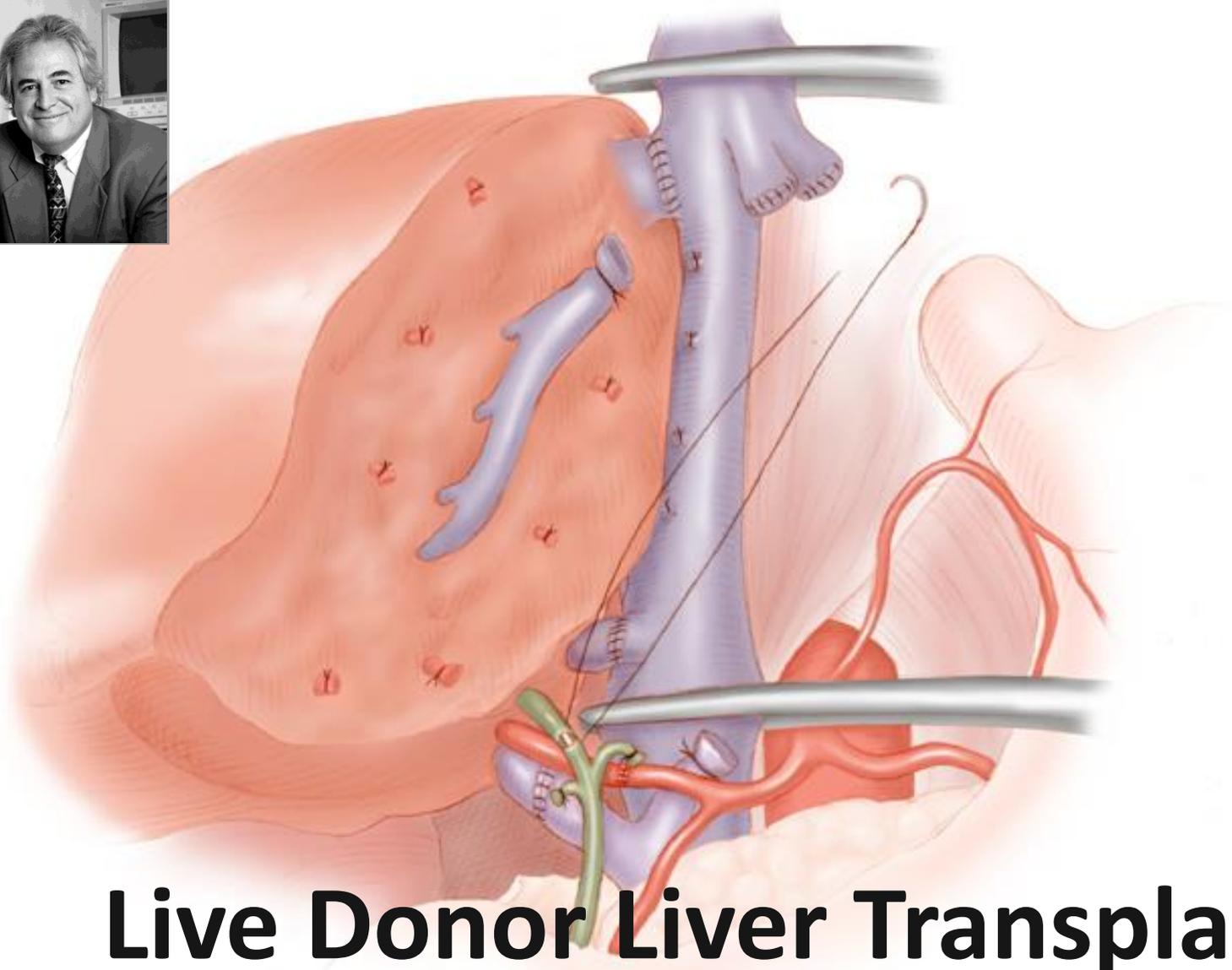
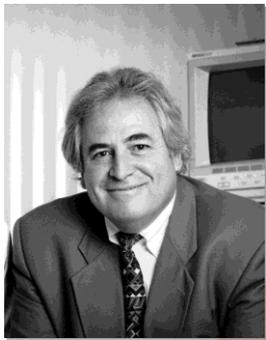
Strategies to Maximize the Donor Pool

- ***ECD [Extended Criteria Donors]***
 - *Older donors*
 - *High BMI Donors,*
 - *HTN, Stroke, Cardiac events*
 - *HCV HBV donors*
- ***DCD [Donation after Cardiac Death]***
- ***Live donors***
 - ***LRD***
 - ***LNRD***
 - ***Altruistic Donation***
- ***Increase donor consent rate***



The Ethical Dilemma





Live Donor Liver Transplant 1997

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TRANSPLANTATION

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ADULT LIVING DONOR LIVER TRANSPLANTATION USING A RIGHT HEPATIC LOBE

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ROSHAN SHRESTHA,³ THOMAS E. TROUILLOT,³ M. SUSAN MANDELL,⁴ TRACY G. STEINBERG,¹
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The NEW ENGLAND JOURNAL of MEDICINE

Medical Progress

ADULT-TO-ADULT TRANSPLANTATION OF THE RIGHT HEPATIC LOBE FROM A LIVING DONOR

JAMES F. TROTTER, M.D., MICHAEL WACHS, M.D.,
GREGORY T. EVERSON, M.D., AND IGAL KAM, M.D.

TRANSPLANTATION of the right hepatic lobe from an adult living donor to an adult recipient is rapidly emerging as an effective treatment for selected patients with end-stage liver disease.¹⁻⁴ The development of living-donor liver transplantation in the United States over the past five years has been driven by the shortage of donor organs for transplantation. In the past decade, the number of patients awaiting liver transplantation has increased by a factor of almost eight, from 1676 in 1991 to 14,710 in 1999 (Fig. 1). During the same period, the number of liver transplantations increased by only about 50 percent, from 2931 in 1991 to 4480 in 1999. With the growing discrepancy between the numbers of donors and recipients, the me-

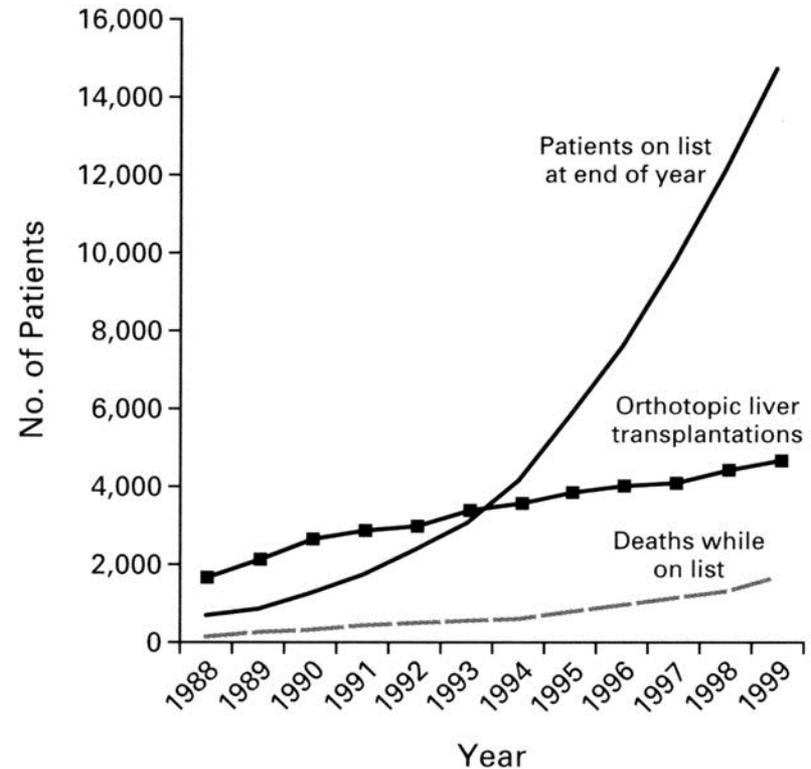
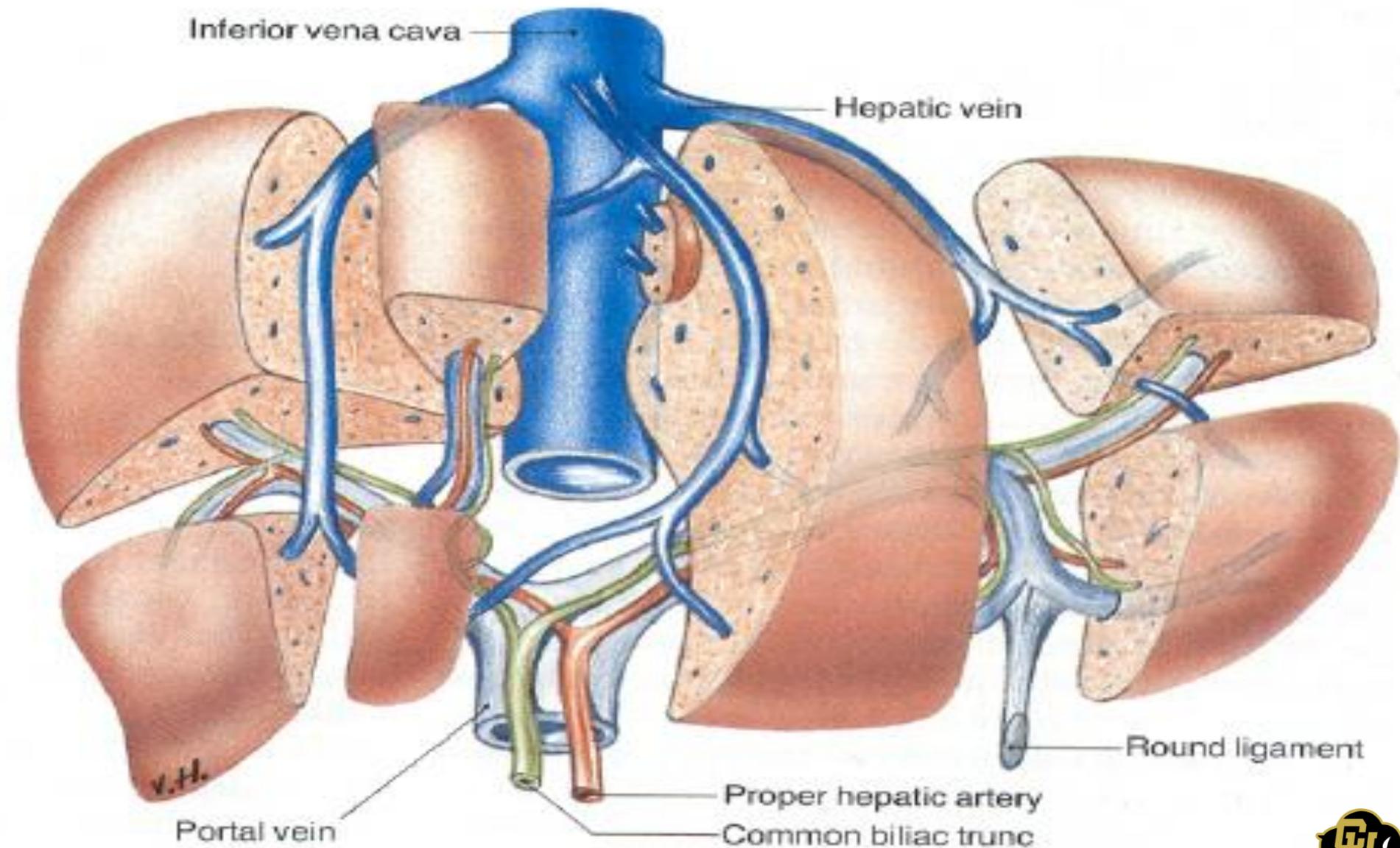


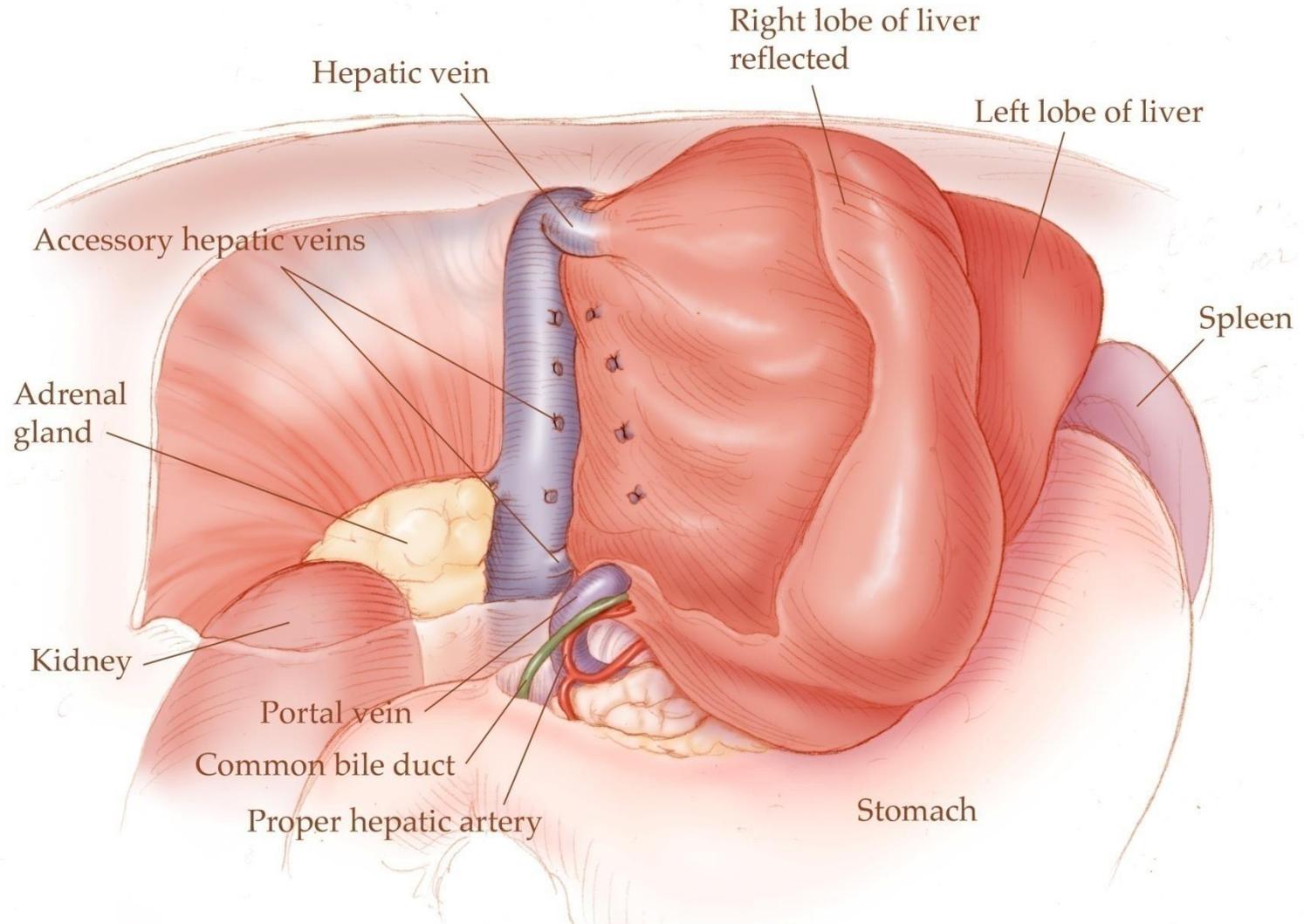
Figure 1. Waiting List for Liver Transplantation in the United States.



Live Donor Liver Transplant



Donor Surgery



Caval Dissection



Donor Surgery

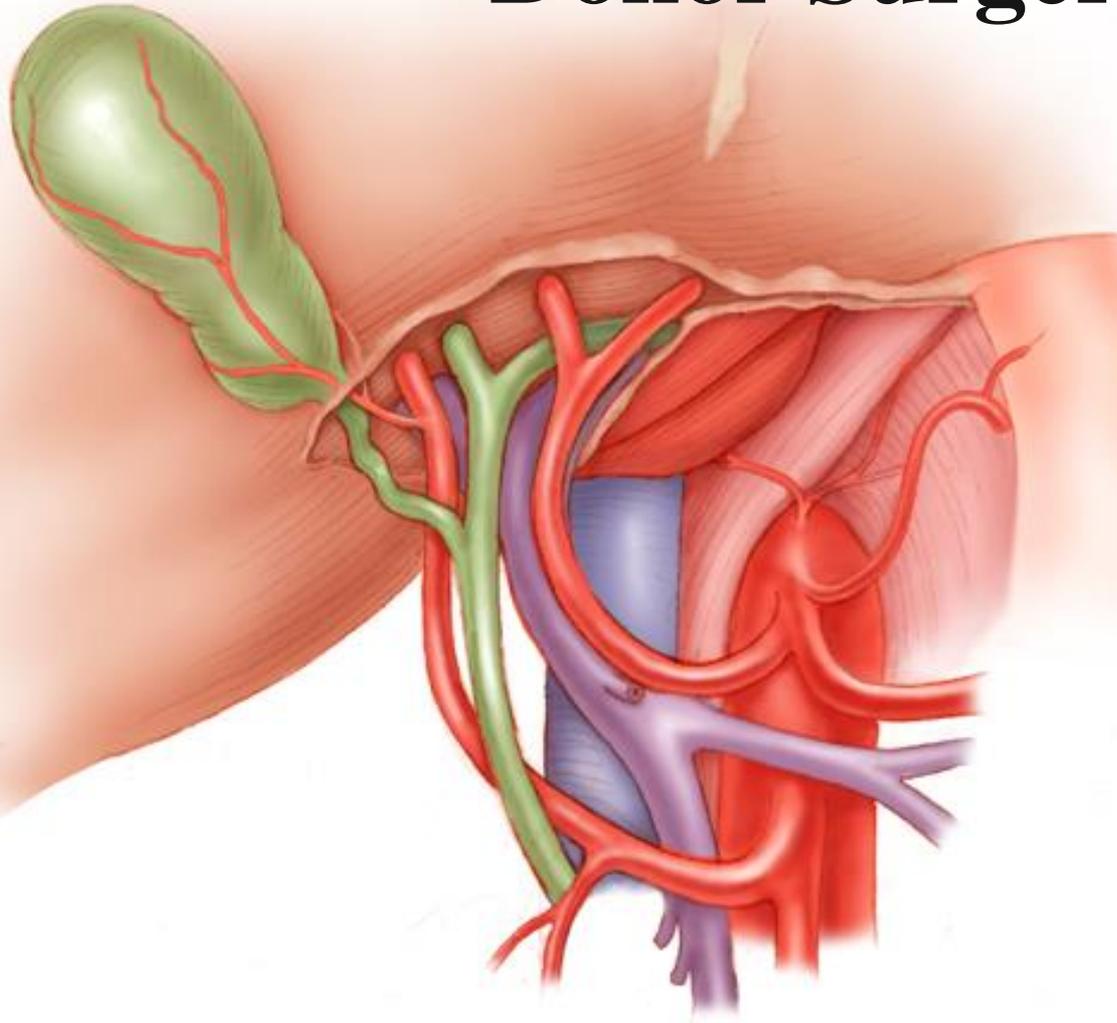
Caval dissection

Hilar dissection with intra-operative
cholangiogram

Parenchymal dissection



Donor Surgery



Hilar Dissection

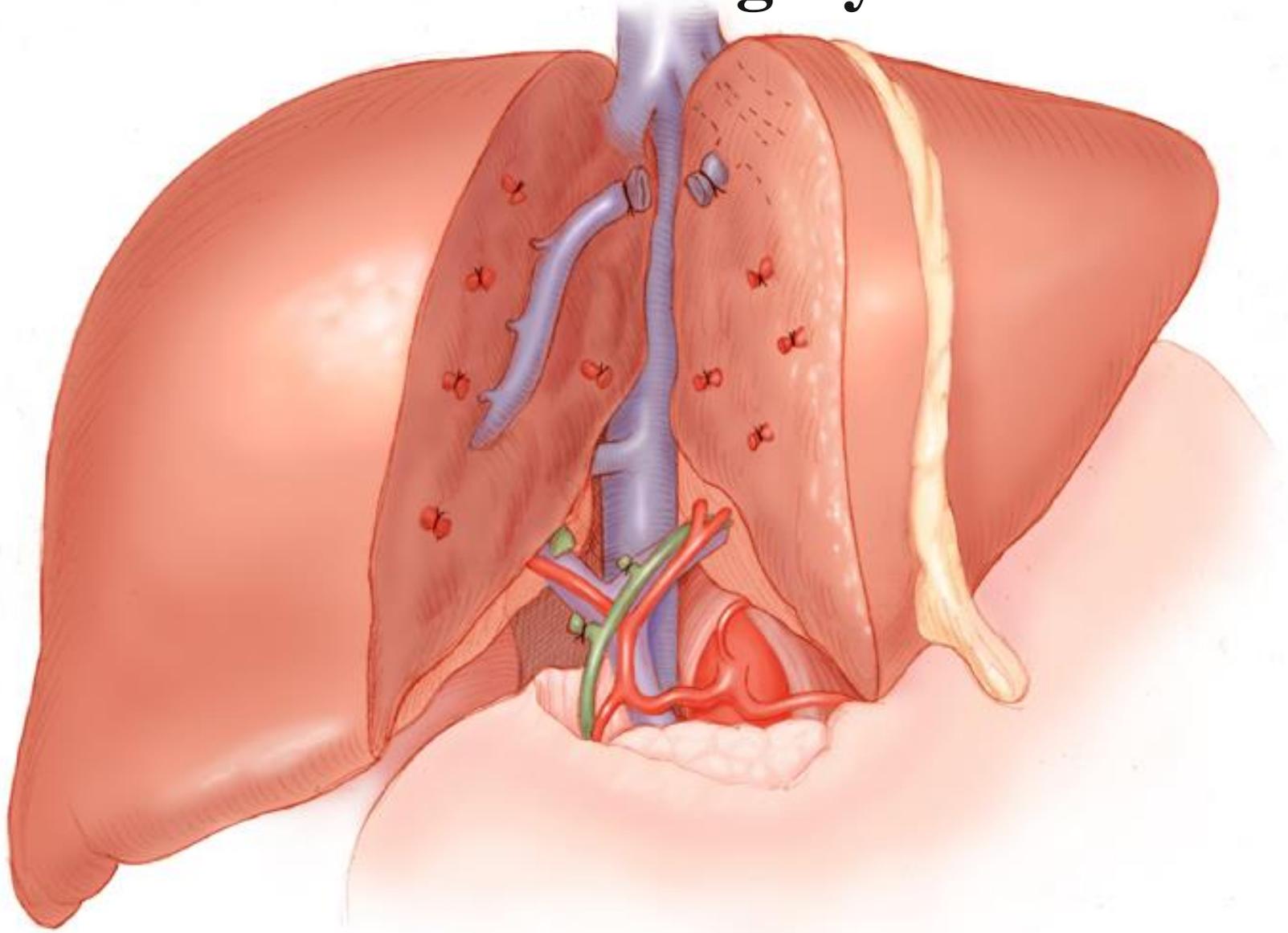


Donor Surgery

Hilar dissection



Donor Surgery

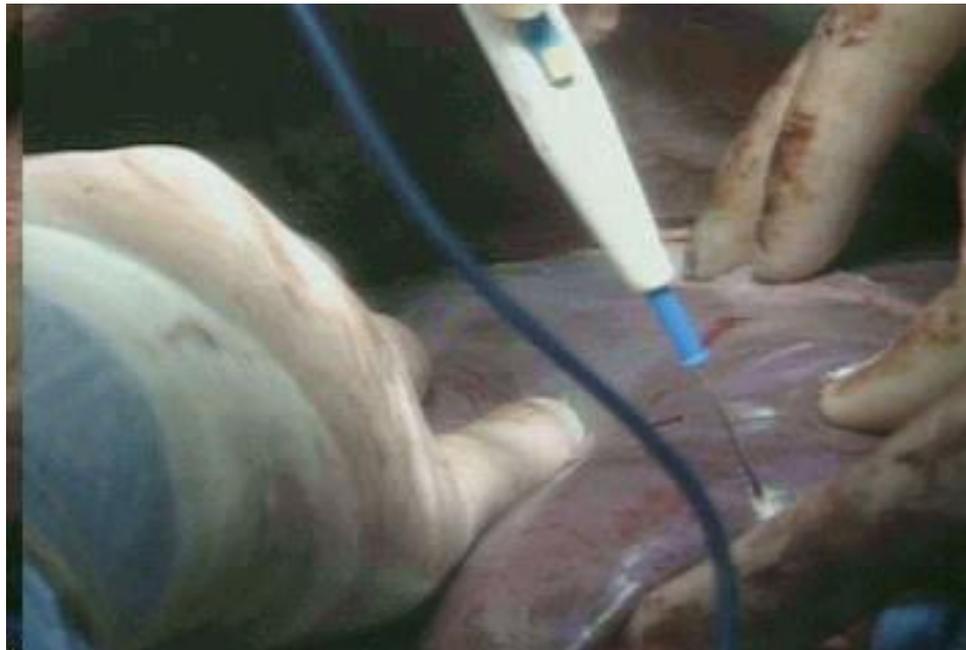


Parenchymal dissection

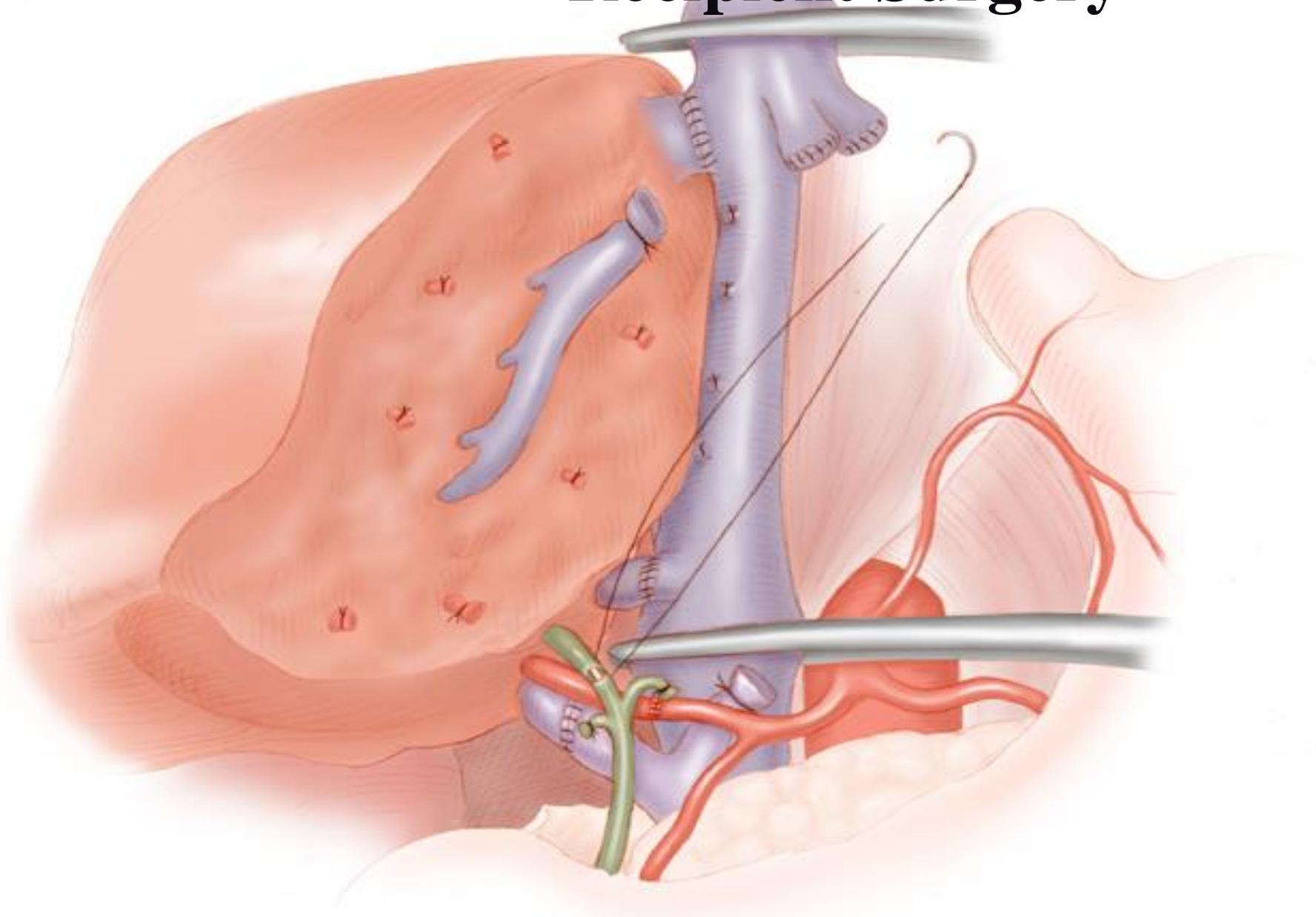


Donor Surgery

Parenchymal dissection

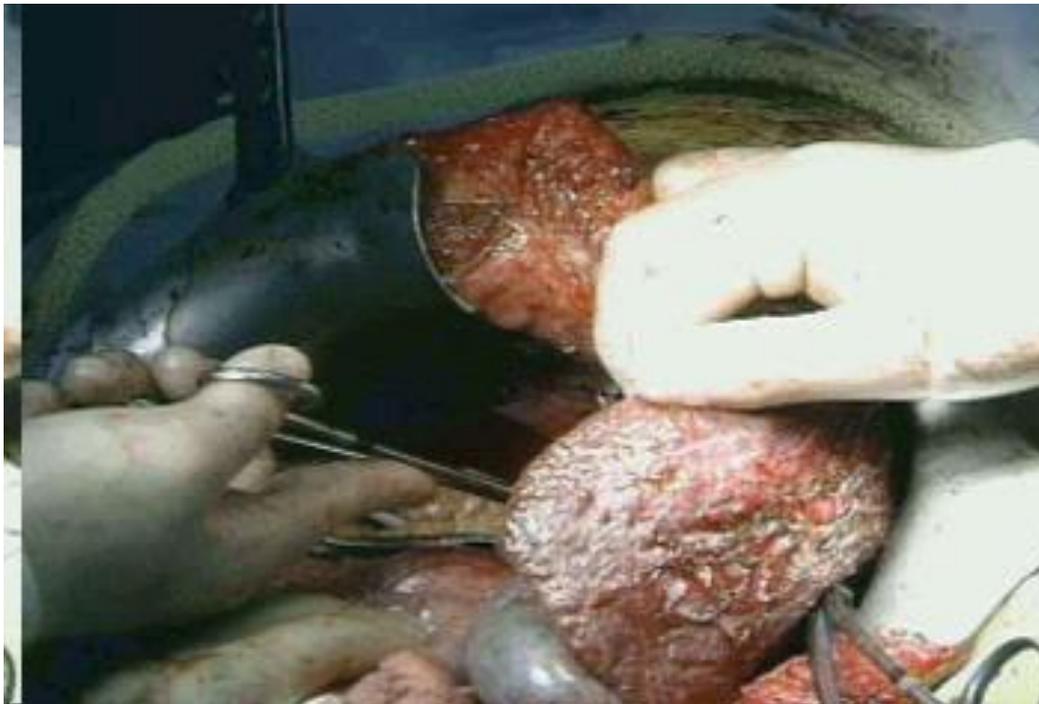


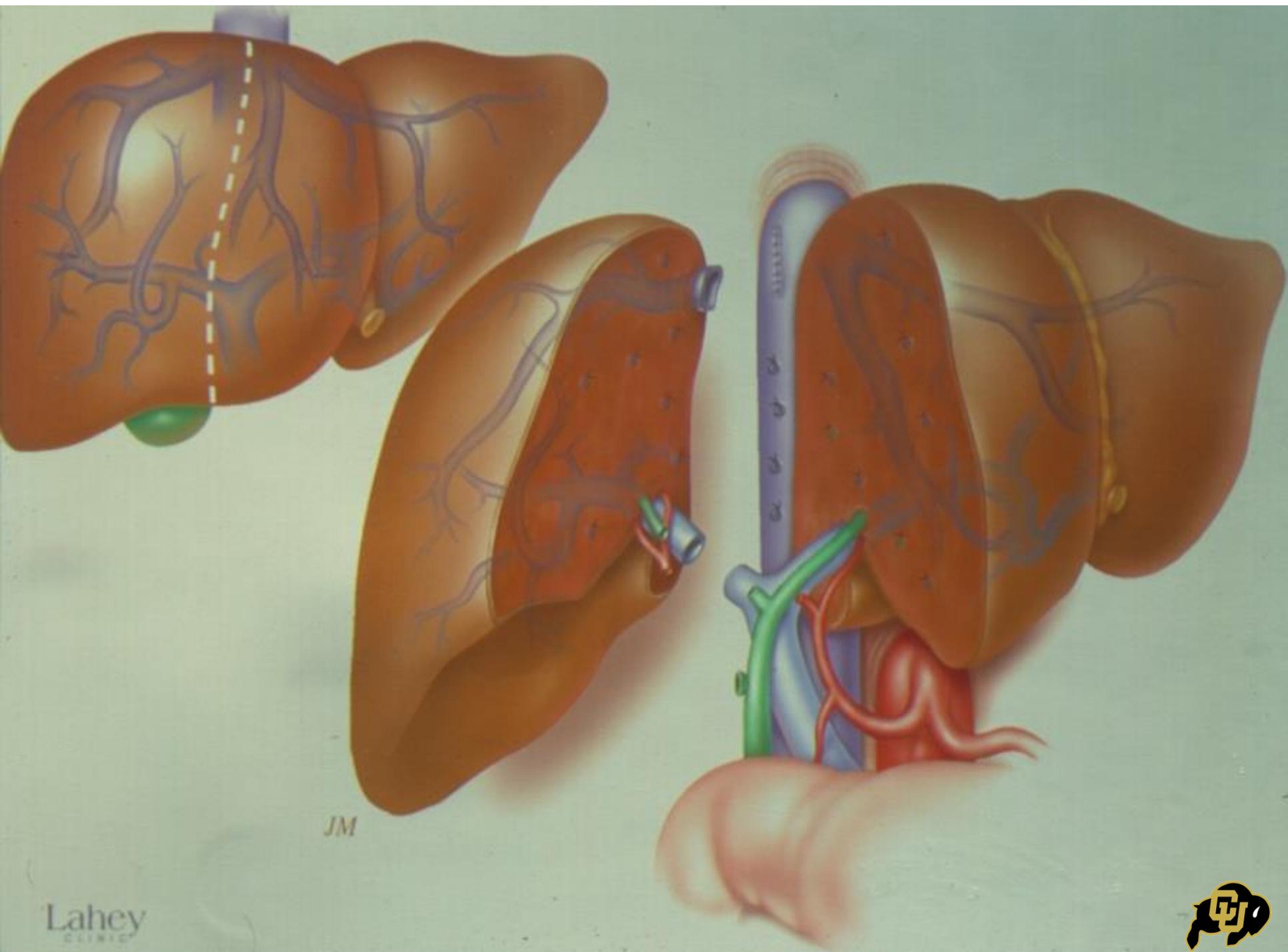
Recipient Surgery



Recipient Surgery-LDLT

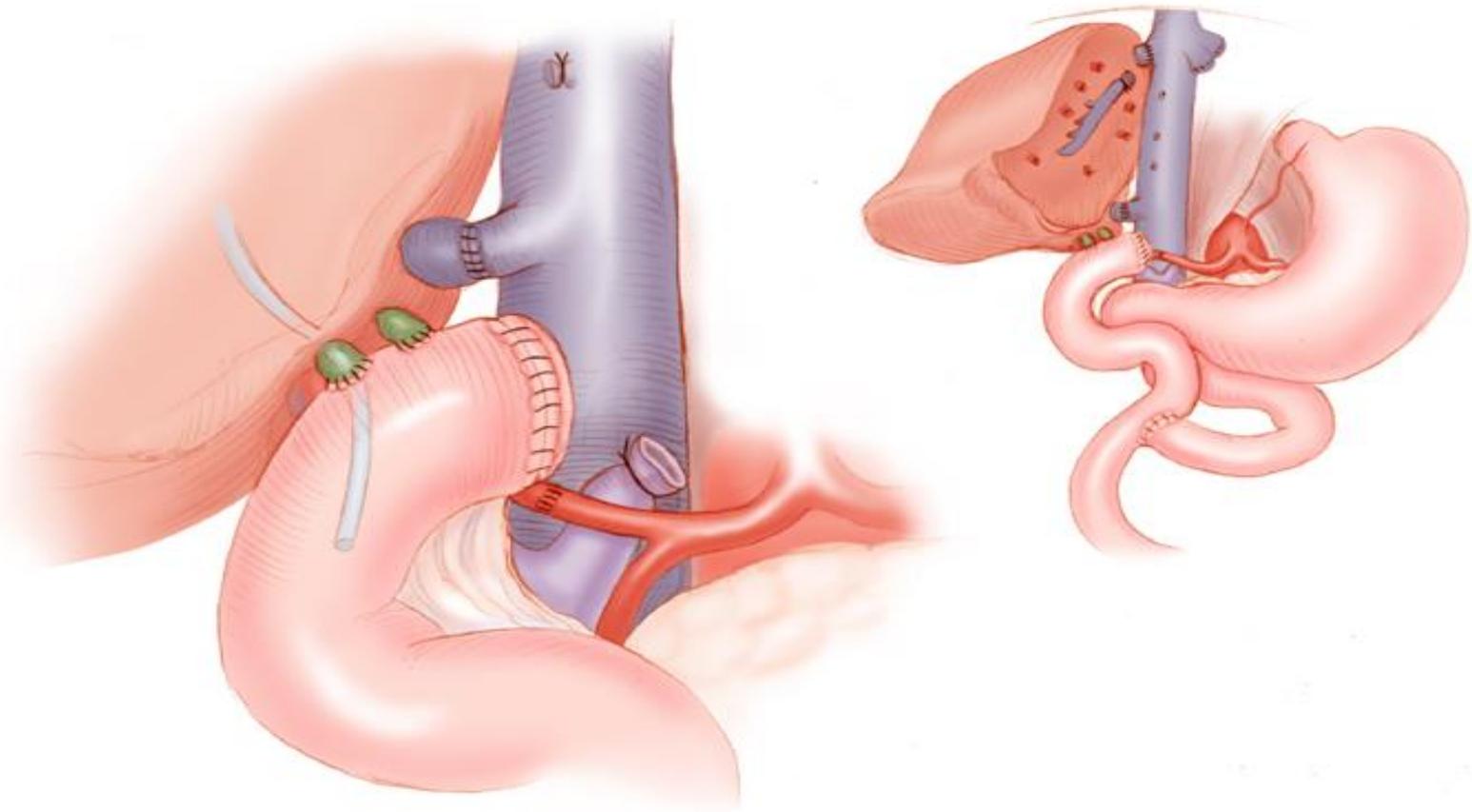
- Recipient hepatectomy
- Vascular anastomoses
- Bile duct anastomoses

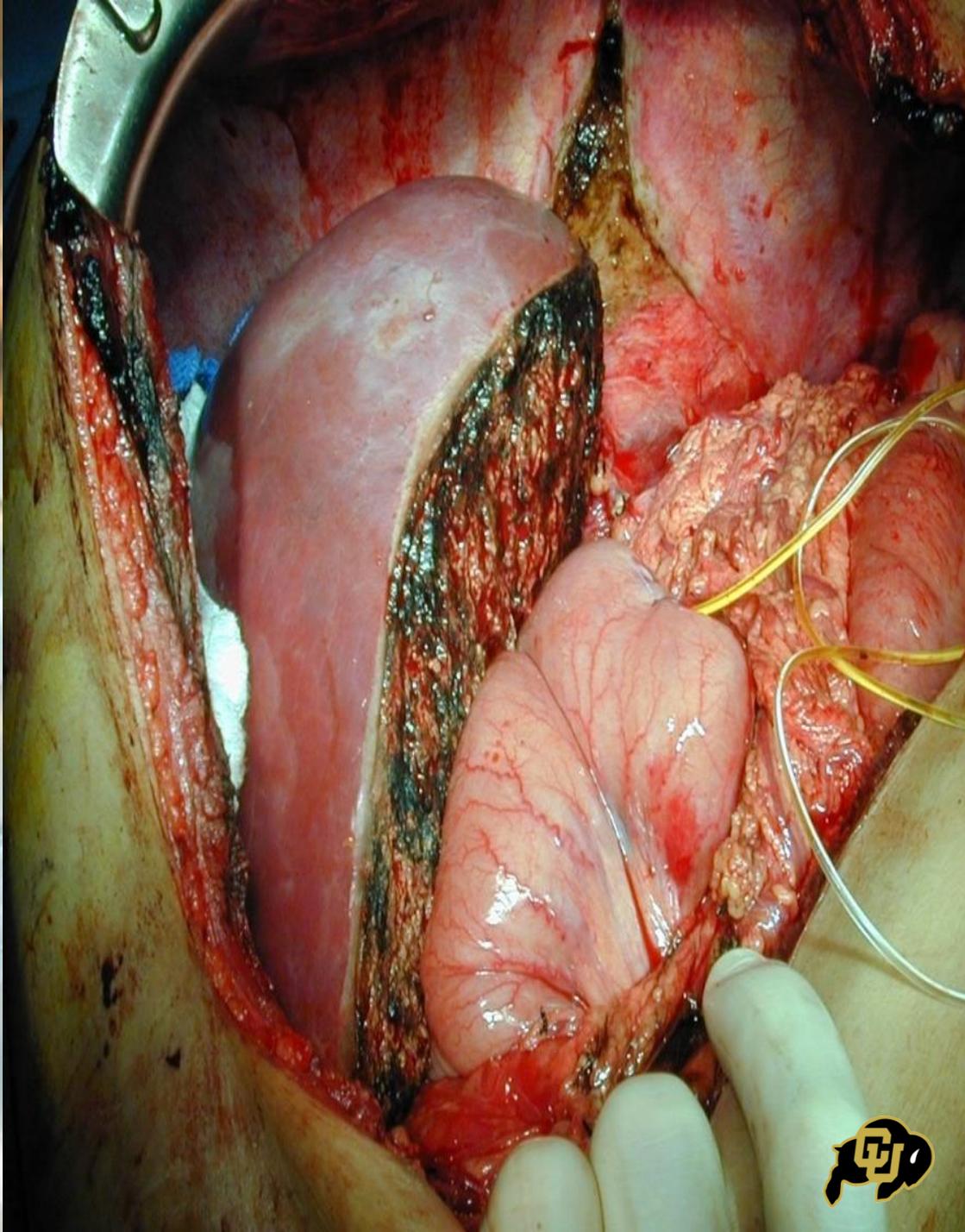




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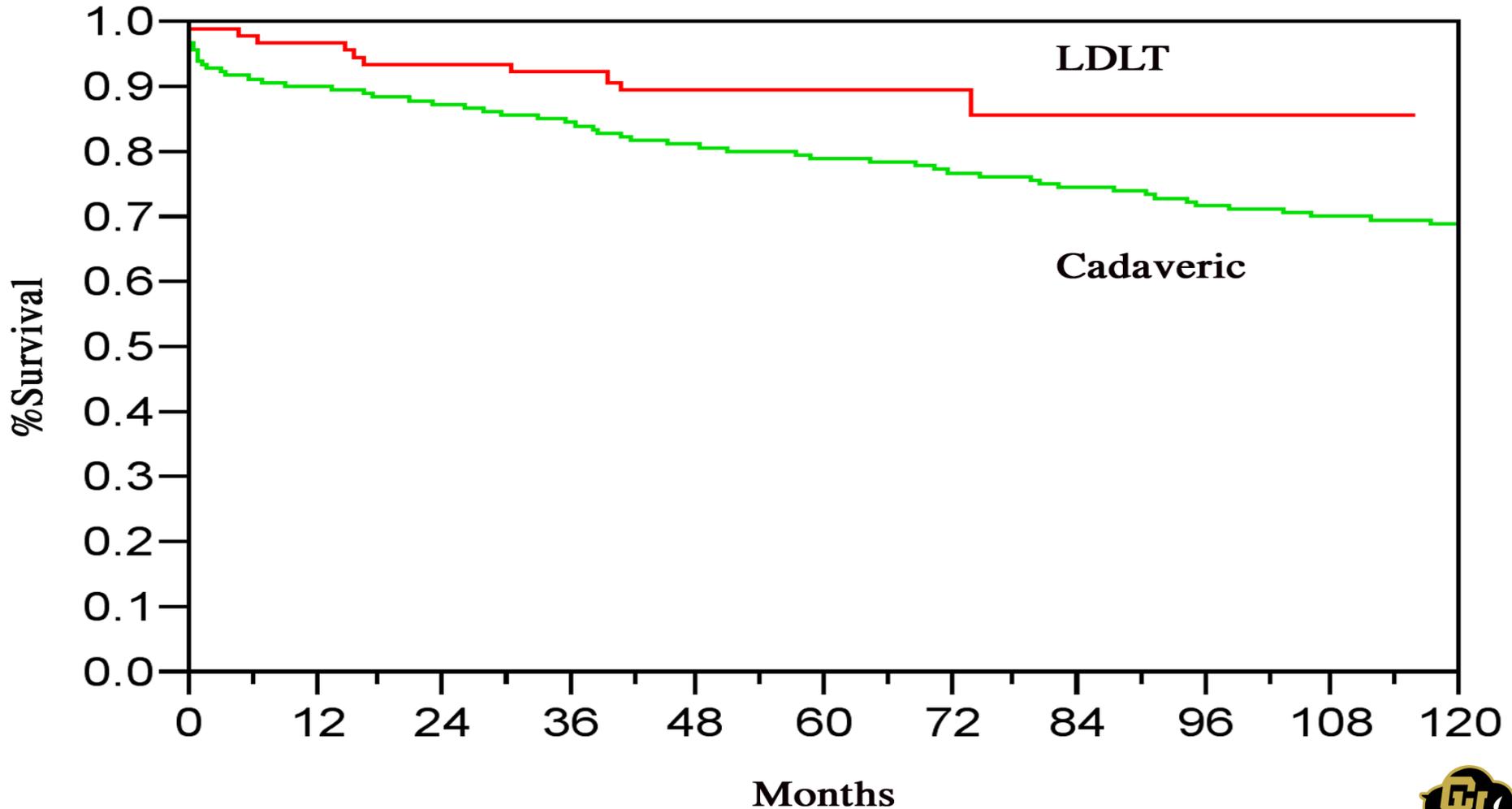
Hepatico Jejunostomy





A New Beginning – New Era

Overall Survival by Graft Type



BILIARY RECONSTRUCTION

World J Surg (2009) 33:1022–1025
DOI 10.1007/s00268-008-9885-1



Choledochoduodenostomy is a Safe Alternative to Roux-en-Y Choledochojejunostomy for Biliary Reconstruction in Liver Transplantation

William Bennet · Michael A. Zimmerman ·
Jeffrey Campsen · Mercedes Susan Mandell ·
Tom Bak · Michael Wachs · Igal Kam

Published online: 16 January 2009
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Choledocho-Duodenostomy in Liver Transplant

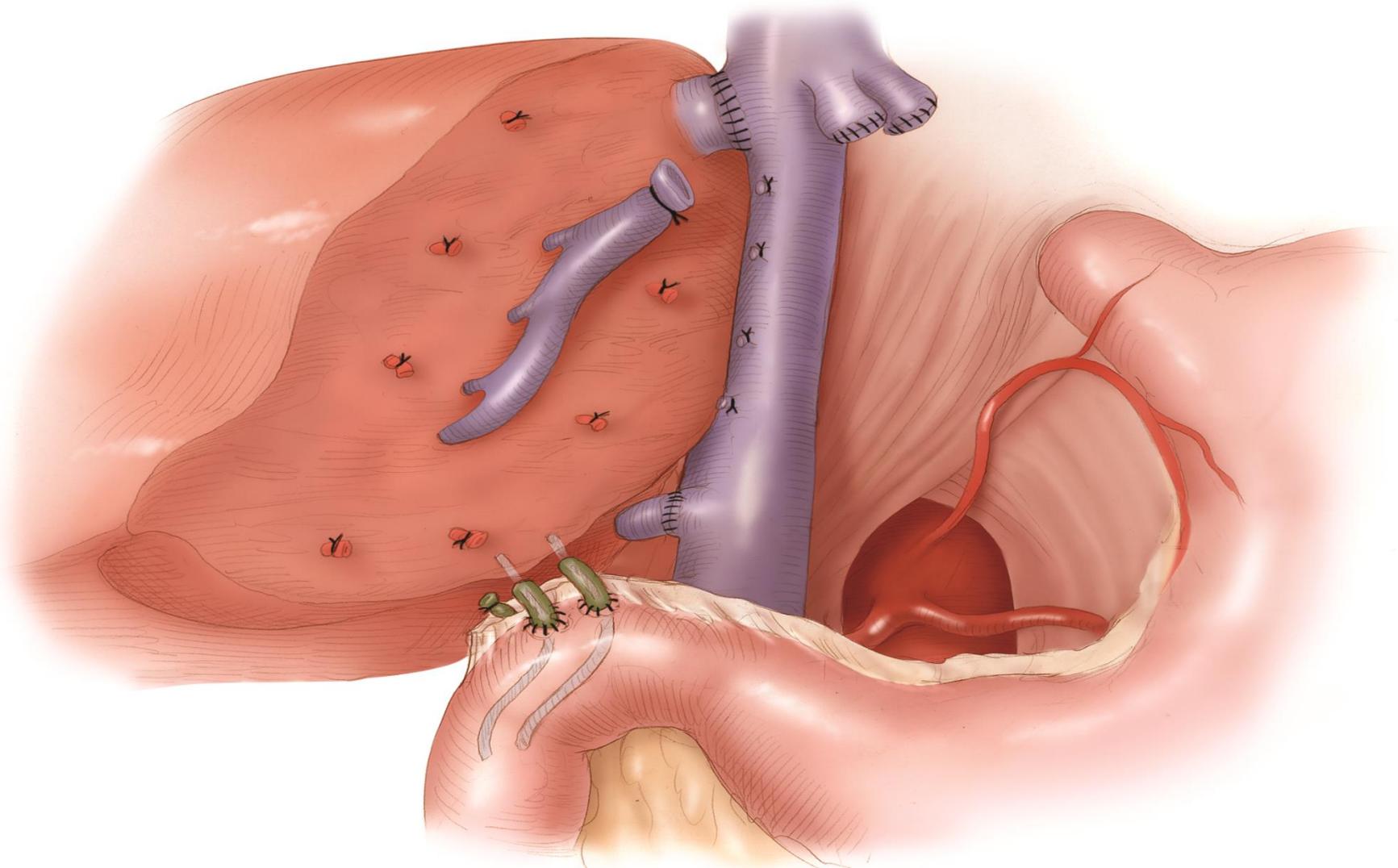
Technical

- **2000-2009: 25 recipients Received CDD vs 85 recipients received CDJ**
- **No difference in mortality, graft survival, or complications**
- **Accessible biliary tree**

Bennet, et al. World J Surg, 2009



Hepatico Duodenostomy



CONCLUSIONS

- PSC IS AN EXCELLENT INDICATION FOR TRANSPLANT
- LIVE DONATION PLAYS AN IMPORTANT ROLE
- PATIENTS CAN ENJOY AN EXCELLENT QUALITY OF LIFE POST TRANSPLANT



SALT LAKE 2002
Olympic rings logo



OLYMPICS

On July 28, 2000

I had a liver transplant at The University Hospital in Denver, Colorado. I was diagnosed nine years ago with PSC (Primary Sclerosing Cholangitis), a rare, degenerative bile duct condition which required a transplant. Dr. Greg Everson took great care of me leading up to the transplant. Dr. Igal Kam performed a perfect surgery and I was back doing what I loved to do less than two months later. I'm so grateful to all of the professionals at Denver's University Hospital!

It was a miracle

I'm lucky to be alive today. It was truly an amazing experience for me and for my family. To receive the gift of life is a humbling experience. I will forever be grateful for my second chance. Everyday, I thank God and I thank the individual's family for the decision to donate.

