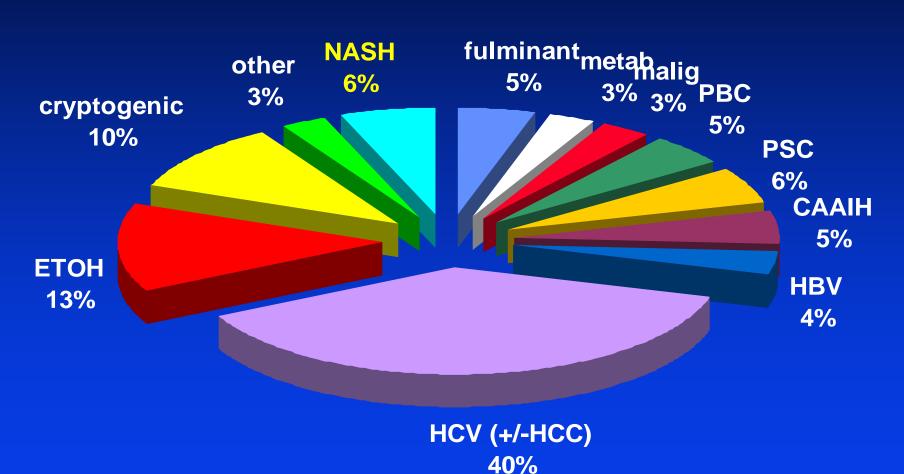
Life after Liver Transplant for PSC

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Indications for Liver Transplantation 2008 (UNOS Registry)





Patient survival by disease

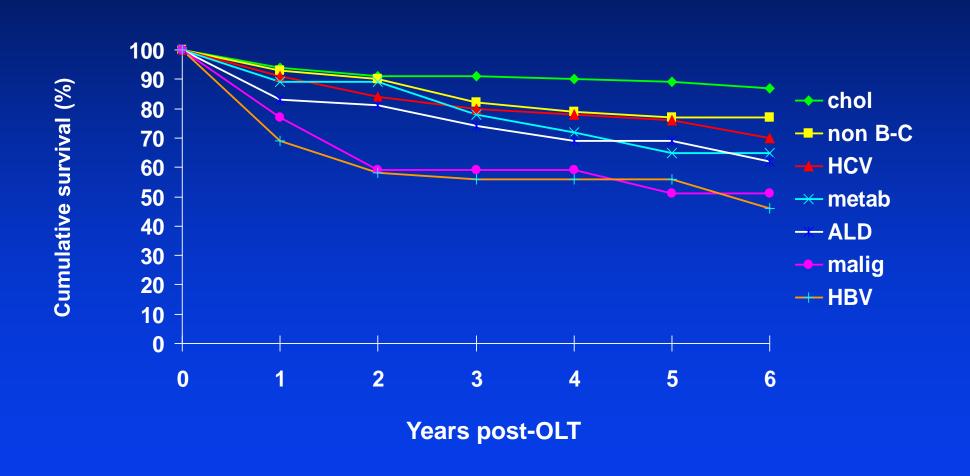
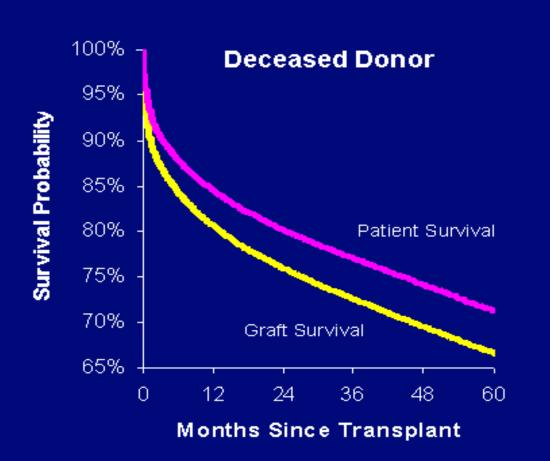
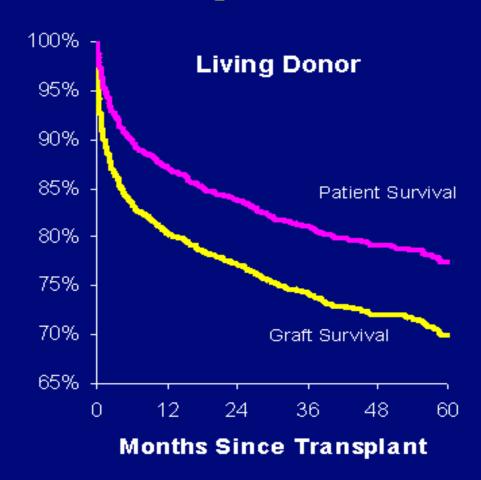


Figure V-16. Unadjusted Patient and Graft Survival of Liver Recipients, by Deceased and Living Donor





Includes all liver transplants from 1/1/96 through 12/31/05. Source: SRTR Analysis, November 2006.



LIVER TRANSPLANTATION

A "TYPICAL" OPERATION

Patient age 40 - 55 years

Anesthesia time 4 - 6 hours

Operative time 3 - 5 hours

ICU stay .5- 1 days

Total hospital stay 7 - 9 days

Outpatient stay 1 month

Mayo Clinic Rochester Protocol Year 1

- Hospitalization for about 1 week after LT
- Twice weekly outpatient clinic visits for 21 days
 - Blood tests, tacrolimus level before visits
- Discharge to home with weekly blood tests
- Return visit at 4 months after LT, then annually
 - Cellcept stopped at 2-4 months
 - Prednisone stopped by 4 ½ months
- Sooner if problems and/or labs become abnormal

Mayo Clinic Rochester Protocol > Year 1

- Blood tests every 3 months
- Only on tacrolimus or cyclosporine
- No restrictions in terms of physical activity
- No restrictions in terms of travel
- Generally no restrictions on occupation type
 - Can be overseas
 - Best to avoid increased exposure to infections

Potential Complications following LT for PSC

- Increased posttransplant complications
 - 1) Acute Cellular Rejection (20%) most within 7 days
 - 2) Chronic Ductopenic Rejection (2%)
 - 3) Hepatic Artery Thrombosis (5%)
 - 3) Bile Duct Stricturing (10-15%)
- •Recurrent PSC 20-25% over 10 yrs
- •CUC pouchitis, disease flare, neoplasia

Epidemiology of Recurrent PSC

Center	n	%	Radiology	Histo	Risk Factor
UCSF	33	13	X		
Pittsburgh	32	25	X		
Baylor	100	16	X		CMV
UCLA	127	9	X	X	
Mayo	150	20	X	X	
Birmingham	152	37	X	X	Colon
Colorado	71	21	X	X	OKT3
Lahey	42	14	X	X	Sex mismatch

Health Related Quality of Life after LT for PSC

- 157 adult patients with PBC or PSC
- HRQOL following LT was better
 - Emotional, physical, social, overall
- Patients 10 or more years after LT generally have a good QOL, although physical functioning is reduced
 - Age > 60 and post-LT complications associated with reduced PF

--- Thank you! ---

