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## Outcomes of deceased donor liver transplantation from elderly donors

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**Introduction :** Favorable outcomes achieved after deceased donor liver transplantation (DDLT) suggest that use of elderly donors may be an effective way to expand donor pool.

**Methods :** This was a retrospective analysis of adult DDLT using elderly donors. It was a double-arm study that compared posttransplant outcomes to ascertain whether use of elderly donors (aged  $\geq 76$  years) has adverse effects on outcome of DDLT. The elderly study group included 14 donors aged  $\geq 76$  years and the elderly control group comprised 39 donors aged 66–75 years.

**Results :** Mean age of the elderly and control groups was  $78.2 \pm 3.1$  years and  $68.9 \pm 2.7$  years, respectively ( $p < 0.001$ ). Other clinical parameters were comparable between these two groups. The 1-, 3-, and 5-year graft survival rates in the elderly study group were 83.6%, 59.7%, and 59.7%, respectively, and those in the elderly control group were 79.4%, 68.1%, and 59.6%, respectively ( $p = 0.97$ ). The overall 1-, 3-, and 5-year survival rates after donation from the elderly study group were 83.6%, 59.7%, and 59.7%, respectively, and those after donation from the control group were 79.3%, 72.1%, and 64.1%, respectively ( $p = 0.74$ ). Regarding overall patient survival, univariate analysis identified pretransplant requirement for ventilator support ( $p = 0.021$ ) and pretransplant renal replacement therapy ( $p = 0.025$ ) as statistically significant risk factors; however, neither was significant on multivariate analysis.

**Conclusions :** The data suggest that organs from elderly donors do not worsen posttransplant outcomes; thus, advanced age should not be an exclusion criteria criterion. Indeed, using such donors could be the key to increasing the supply of liver grafts.

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