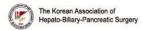
& The 54th Annual Congress of the Korean Association of HBP Surgery

MARCH 25-27, 2021 GRAND WALKERHILL HOTEL, SEOUL, KOREA www.khbps.org



EP071

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 ≥ 76 years) has adverse effects on outcome of DDLT. The elderly study group included 14 donors aged ≥ 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 ± 3.1 years and 68.9 ± 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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