

Assessment of early complications afterwards liver transplantation.

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Introduction: Liver transplantation is currently the first priority treatment for patients with advanced chronic liver failure. Early complications are those within the first 6 months after surgery.

Keywords: liver transplant, early complications.

Aim: To evaluate early technical complications (arterial, biliary), medical (cardiovascular, respiratory, neurological, renal and infections) and liver graft complications in transplant patients.

Materials and Methods: A descriptive, retrospective cohort clinical study was performed in the period 2013-2020 within the transplant program in the Republic of Moldova, 57 liver transplant interventions were performed. The study selected 53 transplant patients, in whom 55 liver transplants were performed (2 retransplanted patients), 16 - from a living donor, 39 - from a brain-dead donor, aged > 18 years

Results: Early technical complications were determined in 19% (10/53) patients, hepatic artery thrombosis, in 6/53 patients (11%). Early medical complications were detected in 43 patients (81%), neurological complications 33/53 (62%) and respiratory complications 31/53 (58.5%), caused by immunosuppressive treatment. After liver transplantation, liver transplantation was impaired in 2/53 patients (4%), both of whom died.

Conclusions: The risk of developing early post-surgical complications is associated with the patient's perioperative conditions, the quality of the donated liver, the quality of the surgical procedure performed on both the donor and the recipient.

