

LIVER TRANSPLANTATION FROM A BRAIN-DEAD DONOR

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Introduction: Liver transplantation from a brain-dead donor is a vital procedure, often the only solution for patients with terminal liver diseases. Evaluating its outcomes will involve analyzing demographic data, postoperative results, and medical indications for transplantation.

Material and Methods. A retrospective analysis was conducted on 21 medical records of patients aged 38–61 years who underwent liver transplantation in the Republic of Moldova between August 2017 and February 2024. Data on medical indications, postoperative outcomes, and complications were collected, using standard selection criteria. Descriptive statistical analysis was applied.

Results. Of the 21 patients, 12 were men (57.1%) and 9 were women (42.9%), with ages ranging from 38 to 61 years. The indications for transplant were: viral hepatitis B and D-related cirrhosis—10 patients (47.6%), hepatocellular carcinoma—6 patients (28.6%), chronic liver graft rejection—2 patients (9.5%), mi

xed viral hepatitis C and metabolic cirrhosis—1 patient (4.8%), and viral hepatitis B-related cirrhosis—1 patient (4.8%). Postoperative recovery was achieved in 17 patients (81%), of whom 11 were men (64.7%) and 6 were women (35.3%). Postoperative complications included chronic rejection (1 case, resolved through reintervention) and postoperative mortality, recorded in 4 patients (19%)—3 women and 1 man. Mortality was associated with severe complications, including sepsis and multiple organ dysfunction syndrome.

Conclusions. Liver transplantation from brain-dead donors has an 81% success rate but a 19% mortality rate, highlighting the need for better patient selection and postoperative care.

Keywords. liver transplant, brain death, donor, complications.