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The Results Of A Living Donor Liver Transplant For Hepatocellular Cancer Following Loco-regional Treatment: A Single-center Retrospective Study

Tae Beom LEE, Jae Ryong SHIM, Byung Hyun CHOI, Kwangho YANG, Je Ho RYU*

Hepato-Biliary-Pancreatic And Transplantation Surgery, Pusan National University Yangsan Hospital, REPUBLIC OF KOREA

Background : In the last ten years, there has been a significant increase in loco-regional treatments (LRTs) for hepatocellular carcinoma (HCC), which help patients on the liver transplant waiting list get through the waiting time or move to a lower stage. The purpose of this study was to look into the outcomes of LRTs done on HCC patients following a living-donor liver transplant.

Methods : From May 2010 to December 2019, 143 people with HCC at Pusan National University Yangsan Hospital got liver transplants from living donors. Preoperative LRTs were performed on 29 patients. Before liver transplantation (LT), the number of patients who were successfully downstaged, the methods used, the length of follow-up, and the results of those patients' LT were all reported.

Results : Nine out of 29 were within Milan. The mean size of the HCCs was 3.23 1.65 (range, 0.9–7.7) cm, and the mean number of the HCCs was 5.28 6.73 (range, 1–30). 1-, 3-, and 5-year overall cumulative survival rates were 93.1%, 86.2%, and 82.1%, respectively, and the corresponding cumulative disease-free survival rates were 89.4%, 82.2%, and 73.6%, Seven out of 29 patients recurred, and the locations are as follows: lung (4), bone (1), pleural (1), and intrahepatic (1).

Conclusions : These outcomes suggested tumor bridging or downstaging as a potential therapeutic approach for HCC patients who did not meet traditional LT criteria. Additional research involving many more patients is required.

Corresponding Author : **Je Ho RYU** (ryujhhim@hanmai.net)