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## Sequential Engraftment In Dual Donor Liver Transplantation : A Faster And Easier Procedure

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**Background** : Dual grafts living donor liver transplantation(DGLDLT) is one of the best alternative methods to overcome the small for size donor. For the indications of DGLDLT for recipient are complete same with single graft transplantation without exception. And its results are also comparable with classic transplantation. But DGLDLT is not frequently performed due to its too complicated procedures with long operation time and lack of operation resources. So we started technically simpler and easier methods to reduce operatory stress and time

**Methods** : We started sequential engraftment and reperfusion of two grafts one by one.. After diseased liver removal each hepatic vein stumps were clamped separately while retrohepatic IVC kept patent through whole procedure. So, we did not apply biopump and IVC cross- clamp procedure. Right side graft hepatic and portal veins were anastomosed and reperused first, then left side veins anastomosis and reperfusion was completed sequentially, without hemodynamic unstability. Secondly, we dissected recipient bileducts as long as possible to ensure duct to duct anastomosis

**Results** : From January 2019 to December 2021, we performed 81 cases of DGLDLT. 60 cases were done by conventional method and 21 case were done by this simple procedure. Operation time was dramatically reduced from 951.7 minutes for conventional cases to 786.8 minutes for this simple method. Thought the postoperative course and complication were similar in both group, patients applied simple procedure are more stable hemodynamically during anhepatic and post reperfusion period, caused by patent IVC fluid and also reduce vascular volume supply or inotropic drug usage.

**Conclusions** : By using this method, sequential engraft and perfusion and duct to duct bileduct anastomosis both grafts, DGLDLT can make easier and simpler than previous method. And this method may contribute to increase the feasibility of DGLDLT.

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