

**EP 045****Incidence, Mortality, And Risk Factors Associated With Carbapenem-resistant Acinetobacter Baumannii Bacteremia Within 30 Days After Liver Transplantation**Deok-Gie KIM*, Jae Geun LEE, Dong Jin JOO, Myoung Soo KIM, Hwa-Hee KOH, Minyu KANG

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Background : Carbapenem-resistant Acinetobacter baumannii bacteremia (CRAB-B) is a fatal infectious complication of liver transplantation (LT). This study investigated the incidence, effects, and risk factors associated with CRAB-B during the early post-LT period.

Methods : We performed a retrospective observational study using single centric data of 1,051 eligible LT recipients. Patients with CRAB-B (n=29) and 1:5 matched controls (n=145) by nested-case control design, at the corresponding time to blood culture positivity (index date). Risk factors for CRAB-B were analyzed with multivariable logistic regression.

Results : Total 29 patients experienced CRAB-B within 30 days of LT with 2.7% cumulative incidence. In the patients with CRAB-B (n=29) and matched controls (n=145) by nested-case control design, the cumulative incidence of death on days 5, 10, and 30 from index date was 58.6%, 65.5%, and 65.5% and 2.1%, 2.8%, and 4.2%, respectively ($p < 0.001$). Pre-transplant MELD (OR 1.11, 95% confidence interval [CI] 1.04-1.18, $p = 0.001$), severe encephalopathy (OR 3.83, 95% CI 1.08-14.2, $p = 0.039$), donor body mass index (OR 0.61, 95% CI 0.42-0.75, $p < 0.001$), and cold ischemic time (OR 1.18, 95% CI 1.03-1.41, per 60 min, $p = 0.048$) were independent risk factors for 30-day CRAB-B.

Conclusions : CRAB-B showed extremely high mortality within 30 days after LT, especially within 5 days after its occurrence. Therefore, notification of risk factors and early detection of CRAB, followed by proper treatment, are necessary to control CRAB-B after LT.

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