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## Hepatic Arterial Reconstruction Using Saphenous Vein Graft Interposition For Living Donor Liver Transplantation

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**Background** : Nowadays in Mongolia, performing number of living donor liver transplantation (LDLT) is increasing, and we are facing different complications during the operation, postoperation days. One of the cases we faced is recipient's native hepatic arteries are not suitable for reconstruction in LDLT. Great saphenous vein (GSV) conduits donor's liver right hepatic vein and aorta.

**Methods** : 22 years old, female patient with NBNC (non-B, non-C) liver cirrhosis, CTP B(8), MELD8, EV3st, SM. After arterial anastomosis, which donor's right hepatic artery to recipient's right hepatic artery was checked by Doppler-ultrasound, however there was not detected signs of arterial follow. We had done 2 more anastomosis between donor's right hepatic artery to recipient's left gastric artery, and left gastroduodenalis artery, the results was absence of hepatic arterial flow Doppler signal during the operation time.

**Results** : GSV was used by through reverse flow for arterial reconstruction from aorta to donor's right hepatic artery, which checked by Doppler-ultrasound examination. The reconstruction of hepatic artery Doppler waveforms were good enough. Postoperative day 1, the reconstruction of hepatic artery was occluded. We had done thrombolytic therapy (alteplase), however there was acute bleeding from the arterial anastomosis area.

**Conclusions** : : GSV could be excellent choice for arterial reconstruction, however it could have high risk of thrombosis.

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