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The Impact Of The Multiple Bile Ducts On Postoperative Biliary Complications In Patient Underwent Living Donor Liver Transplantation

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Background: The multiple bile ducts in a living donor graft are a long standing troublesome. However, there have been many mixed reviews about the impact of multiple bile ducts on biliary complications. This study aimed to investigate correlations between the number of bile duct and biliary complications in patients undergoing living donor liver transplantation (LDLT).

Methods: We reviewed all LDLT patients in our hospital between July 2008 and December 2020. The patients were divided into 2 groups according to the number of bile duct in living donor graft (SD; single duct, MD; multiple duct). Complications related to bile duct were defined by endoscopic, radiologic-interventional or surgical treatment. Collected data included demographics of donor and recipient, surgical data including bile duct reconstruction (duct-to-duct, hepatico-jejunostomy, and con-joined), perioperative and postoperative outcomes.

Results: All 70 patients were represented SD (n=48) and MD (n=22). Complications related to bile duct occurred in 27 (38.6%) patients and were more common in MD group (54.5% vs 31.3%, Odds ratio 2.4). MD patients revealed longer operation time ($1052 \pm 251 \text{ vs } 910 \pm 215 \text{ minutes}$, p=0.019) and higher percentage of hepatico-jejunostomy (31.8% vs 8.3%, p=0.012). Donor age, graft-recipient weight ratio, cold ischemic time and amount of transfusion were not different between the two groups. Twenty-one patients (77.7%) were fully recovered from complications related to bile duct but three patients (4.3%) resulted in liver graft failure.

Conclusions: Complications related to bile duct were common problems in LDLT patients despite overall good results. Multiple bile ducts could be a potent risk factor of postoperative biliary complications.

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