A new abstract has been submitted for the upcoming Annual Meeting:

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Topic:
Liver & Intestine
Abstract titel:
IMPACT OF PRESERVATION SOLUTION ON LIVER TRANSPLANTATION OUTCOME: COMPARATIVE ANALYSIS OF HTK AND IGL1
Abstract body:
Type of preservation solutions (PS) used for organ procurement and static cold storage before liver transplantation (LT) changed over time and are currently mostly HTK and IGL1. Large registries analysis showed a shorter graft survival with the use of HTK. Aim: compare LT outcomes according to PS used. Patients undergoing primary LT between 2013 and 2018 with grafts preserved with HTK or IGL-1 solutions were retrospectively reviewed analysing postoperative short and long-term outcomes. 190 patients underwent a first LT, using IGL-1 (n=107) or HTK (n=83). Recipients baseline characteristics were similar between both groups whereas HTK group had significantly more national allocation and higher median DRI and ET-DRI scores compared to IGL1 group. HTK had significantly higher rates of early allograft dysfunction (EAD) compared to IGL1 according to Olthoff (66 vs 55% p=0,033), Dhillon (35 vs 21% p=0,046) and MEAF>7 (18 vs 9% p=0,058) definitions. HTK had a significantly higher rate of non-anastomotic biliary strictures (NAS) compared to IGL, respectively 21% and 9% (p=0,042). The 3-year graft survival was higher in IGL-1 group (83% vs 69%, p=0.025). At multivariate analysis, male gender, DCD donors, HTK solution and CIT >600 minutes were independent risk factors associated with NAS. Independent risk factors of graft loss were Donor age > 65 years and HTK use. The analysis after propensity score matching showed the same results than in the global cohort of patients. Conclusions: HTK showed to be an independent risk factor of NAS and graft loss compared to IGL1 PS after primary LT