Standard framework and experience of living donor liver transplantation for overseas non-Korean patients at Asan Medical Center

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Background: Liver transplantation (LT) for foreign patients is a sensitive issue because of the possibility of transplant tourism and the difficulty in follow-up. This study describes the standard framework and experience of living donor LT (LDLT) for overseas non-Korean patients in a Korean high-volume LDLT center.

Methods: The framework and experience of LDLT for 105 non-Korean patients from 2010 to 2019 were retrospectively investigated.

Results: Only 3.1% of patients who underwent LDLT were overseas non-Koreans; of these, 83.8% were from the United Arab Emirates and Mongolia. Selection criteria for recipients and donors were the same as for Korean citizens. Of the 105 recipients, 95 (90.5%) were adults. The most common reasons for transplantation were hepatitis B or C virus-associated liver cirrhosis. Of the 95 adults, 78 (82.1%) received right liver grafts, and 16 (16.8%) received dual grafts. The most frequent donors for adult recipients were sons and daughters, whereas the most frequent donors for pediatric recipients were parents. Of the 10 pediatric patients, eight were from the United Arab Emirates; their common primary diseases were biliary atresia, acute liver failure, hepatoblastoma, and genetic metabolic diseases. The 1-, 3-, and 5-year posttransplant overall patient survival rates in all patients were 96.2%, 92.4%, and 92.4%, respectively. The 5-year overall patient survival rates were 91.8% in adult recipients and 100% in pediatric recipients ($P=0.47$).

Conclusions: LDLT at Korean high-volume LT centers including our institution is safe and effective for non-Korean patients with end-stage liver disease seeking alternatives not available in their own countries.

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