Baskent University long-term outcomes of liver transplant living donors

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Introductions: Living donor liver transplant (LDLT) is a life-saving surgical innovation. On the other hand exhaustive medical and psychological evaluations and a precise anatomical study of the liver should be performed to the safety of the donor and to provide good results for the recipient. The aim of this study was to evaluate the long-term results of living donors selected according to our criteria.

Methods: Since 1988, we have performed 692 liver transplants (480 LDLT and 212 deceased donor liver transplant) at our centers. Donors who could not come to our centers were asked questions about their demographic and current medical conditions. All donors who came to our centers, obtaining detailed anamnesis, physical examinations, laboratory tests and thoracoabdominal computer tomography (CT) scan with iv opaque were performed. All findings were compared with the pre-hepatectomy period.

Results: We reached 210 of these donors by phone. Sixty-five donors admitted to our centers for examination. Mean follow-up period was 10.99 years. In the postoperative early period, minor moderate and severe complications developed in 31, 19, and 1 donors, respectively. All donors' laboratory test results were in the normal range. In the control CT we saw that, the current total liver volume reached 97.3% of the volume before hepatectomy. In CT scan images, only two donors had minimal dilatation in the intrahepatic bile ducts, and two had incisional hernia.

Conclusions: LDLT can be safely performed in cases where the recipient does not have time to wait for a deceased donor, such as fulminant hepatic failure. However, considering the early or late complications that may develop after donor hepatectomy, it is absolutely necessary for the donors to be relatives with the recipient.

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