Fakultät für Medizin

Dokumenttyp: journal article

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Titel des Beitrags:
Reperfusion of liver graft during transplantation: techniques used in transplant centres within Eurotransplant and meta-analysis of the literature.

Abstract:
It remains unclear which liver graft reperfusion technique leads to the best outcome following transplantation. An online survey was sent to all transplant centres (n = 37) within Eurotransplant (ET) to collect information on their technique used for reperfusion of liver grafts. Furthermore, a systematic review of all literature was performed and a meta-analysis was conducted based on patients’ mortality, number of retransplantations and incidence of biliary complications, depending on the technique used. Of the 28 evaluated centres, 11 (39%) reported performing simultaneous reperfusion (SIMR), 13 (46%) perform initial portal vein reperfusion (IPR), 1 (4%) performs an initial hepatic artery reperfusion (IAR) and 3 (11%) perform retrograde reperfusion (RETR). In 21 centres (75%), one reperfusion
technique is used as a standard, but in only one centre is this decision based on available literature. Twenty centres (71%) said they would agree to participate in randomized controlled trials (RCT) if required. For meta-analysis, IAR vs. IPR, SIMR vs. IPR and RETR vs. IPR were compared. There was no difference between any of the techniques compared. There is no consensus on a preferable reperfusion technique. Available evidence does not help in the decision-making process. There is thus an urgent need for multicentric RCTs.

Zeitschriftentitel / Abkürzung:
Transpl Int

Jahr:
2013

Band:
26

Heft / Issue:
5

Seiten:
508-16

Sprache:
eng

Pubmed:

Print-ISSN:
0934-0874

TUM Einrichtung:
Chirurgische Klinik und Poliklinik

Occurences:
- Einrichtungen > Fakultäten > Fakultät für Medizin > Kliniken und Institute > Chirurgische Klinik und Poliklinik > 2013

entries: