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RECURRENCE OF PRIMARY BILIARY CHOLANGITIS AFTER LIVER TRANSPLANTATION: A SINGLE CENTER EXPERIENCE

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Background: Recurrent form (rPBC) of primary biliary cholangitis (PBC) appears in significant proportion of patients after orthotopic liver transplantation (OLT) and is usually characterized by mild clinical course. The aim of this study was to evaluate outcome of OLT for PBC in our center and to identify recipient risk factors for rPBC. Methods: A total number of 82 OLTs for PBC were performed in our center between 1995-2017. We retrospectively analyzed all relevant medical records. Survival ratio was determined from Kaplan-Meier curves. Pearson's chi-squared test and Fisher's exact test were used to assess potential risk factors for rPBC. Results: Out of 82 patients with median 158 (23-261) months of follow-up, 73 (89%) were female and 9 (11%) were male with median age of 56.9 (36-71) at the time of OLT. 3/82 (3.7%) had hepatocellular carcinoma (HCC) in the liver explant. 1-, 3-, 5-years patient (graft) survival was 92.7% (91.7%), while 10-years survival was 84.6% (83.7%). 2 (2.4%) patients received re-transplant for rPBC. Out of 74 analyzed patients, 45 (54.9%) developed rPBC after median time of 46 (11-239) months. None of the potential risk factors (age, sex, type of immunosuppression, features of AIH, AMA and ANA positivity) were significantly associated with rPBC ($p > 0.1$). However, the rate of rPBC had statistical tendency to be higher in patients who had HCC in their explants ($p = 0.056$). Conclusion: Recurrent PBC is frequent but usually not serious clinical condition. In our cohort, rPBC rate was relatively high, presumably due to long median follow-up after OLT.