



Liver Transplant- what you should know

What is Liver Transplant?

It's a process by which the liver which is not functioning was removed and another liver was placed in place to take over the function. Once new liver starts functioning, the problems due to disease liver recovers and the person can have a normal life as before except with few medication to continue life long. The medications are life long to keep the liver received by you from a donor working properly. It's one of the major surgery and needs great technical expertise. Coordinated multidisciplinary approach is needed including physician, surgeon, anaesthetics, critical care, physiotherapist, nutritionist, psychologist and dedicated transplant coordinator.

Type of Liver Transplant

It's of two types as below

What is Living Donation in Liver Transplant (LDLT)?

It is the process of organ donation by person while alive to his near one suffering from liver disease. The decision to donate should be completely voluntary and free of pressure or guilt. Living donors should be in good overall physical and mental health and older than 18 years of age and upper limit 50 (upto 60 years Centre wise). Some medical conditions could prevent an individual from being a living donor. The donor surgery is highly demanding technical procedure and also not without risk. The major complications may be one in 200 and the minor complications may be in 5-10% cases. In absence of complications the outcome as far as normal activities, married life and pregnancy is not an issue. You can enjoy as before. The scar of surgery in right part of upper abdomen is a cosmetic issue.

Living donors must be made aware of the physical and psychological risks involved before they consent to donate an organ. Please discuss all feelings, questions and concerns with a transplant professional and/or social worker.

What is deceased donor liver transplant (DDLT)

After the disease beyond control, liver transplant is the only treatment to improve survival. In India 200,000 people need a new kidney every year and 100,000 need a new liver, only 2% to 3% of the demand for new organs is met. The organ donation is very dismal in country i.e less than 5 per thousand death in comparison to >15 to 20 in developed countries. Finding a donor match is difficult and often people with advanced liver disease die to lack of a donor for this life saving liver transplant. In india every year about 5 lakh people die due to this but at the same time road traffic accidents death or brain stoke (those are eligible for organ donation) is much higher. But as per our belief, lack of awareness, poor support system for how, when to whom donate- nothing happened. Life can go after death. Death is not the end for you, because with organ donation you can save someone's life. The main problem is awareness. The first challenge is that it is often difficult for family members to accept their loved one is brain dead. Even if the family is ready to donate organs, religious superstitions become impediments. So let join hand to spread the organ donation awareness, enforce the agencies to come with a strong support system to save people at distress at no cost but with a noble understanding i.e. Donate organ and Save life.

Liver transplant FAQs

FAQ-1: Typically what's the progress of a liver disease? At what stage would a transplant be needed?

Liver diseases progress through several stages before the liver burns out and reach a stage of end stage liver disease commonly known as cirrhosis. This may take several years. Prior to cirrhosis, the liver disease goes through increasing stages of fibrosis and regeneration which are partially reversible if the inciting factor can be controlled. Once the stage of cirrhosis is reached, it is irreversible and as the cirrhosis advances one reaches the stage where liver transplant becomes imperative. It is very important to identify the cause of the liver disease which may be viral illnesses, fatty infiltration, metabolic causes, genetic causes, birth defects or malignancies. Sometimes however, the liver may be effected acutely by some viral illness like hepatitis A or E, idiosyncratic drug reactions etc to come to a stage of acute liver failure which may develop within days to weeks of getting the illness. Acute liver failure is a medical emergency in which transplant may be required in about 50

percent of the patients.

FAQ-2: Can liver related disorders be caught early and a course correction be done to avoid damage and eventual need for a transplant?

Yes, the liver disease if identified early, can be controlled and progress to a stage of cirrhosis can be avoided. In patients with Viral illnesses like hepatitis B and C, very effective drugs are available which can control and even cure the viral illness and halt the progression of liver disease. The progression to development of liver cancers can also be prevented. Similarly fatty liver disease progression and alcohol induced liver damage can be improved with lifestyle modifications and abstinence respectively.

FAQ-3: What's the typical age of a liver transplant patient?

Amongst the children, usual age is between 6 months to 2 years, when transplant is indicated. Any adult age group can be taken, cases in 70 years also. This depend upon problems related to heart, lungs and general body condition.

FAQ-4: Are young adults also suffering from serious liver problems? If so, why? How can they check it?

Amongst the youngsters, alcohol and fatty liver disease are the two most common factors responsible for serious liver problems. More awareness needs to be spread amongst the young about the seriousness of the problem. Life style modifications and abstinence from Alcohol can check the problem in its infancy Amongst those with viral illnesses or metabolic liver disease, regular checkup and medications would go a long way in

controlling the progression of the liver disease.

FAQ-5: How successful are liver transplants. Can people undergo multiple transplants?

Living donor liver transplant is one of the most complex surgeries which exist at present times. The donor surgery requires a lot of experience and careful planning to carry it out safely and successfully. Yes a part of liver is donated and it does regenerate both in the donor and the recipient quite fast. But not all people are suitable for donation and hence a careful selection is required. This surgery is quite successful with success rates reported above 90 percent. Liver transplant is usually offered when the chances of the patient with chronic liver disease to survive without a transplant are less than a year. With successful transplant these very patients can live a very active and productive life for years together

FAQ-6: Do individuals who have received a transplanted liver have to take medicines to treat or prevent rejection for the rest of their lives?

Yes, in general that is true, although every patient who has been involved with liver transplantation has often heard of that special case of someone who was able to stop the medication. Importantly, almost all patients who have to take these medicines long term can also undergo dose reduction as the body adjusts to the transplanted liver and the amount of medicine needed to control or prevent rejection is reduced.

FAQ-7: How frequent is the medical follow-up of a patient after liver transplantation?

Routine follow-up after the few months from the time of liver transplantation consists of monthly blood tests and hepatology appointments. These tests include a check of blood pressure and a local

exam by physicians to allow you to look for and prevent complications of liver transplantation.

FAQ-8: Are patients who have received a transplanted liver more susceptible to other infections?

Individuals, who have received a liver transplant, need to avoid exposure to infections as their immune system is suppressed. Also, they need to report illnesses to their doctor immediately, especially fevers, and take over-the-counter medications or prescription medications only under their doctor's direct supervision.

FAQ-9: What is rejection and will I get it?

Rejection is when the donor liver is "attacked" by your body's immune system. Anti-rejection tablets prevent this from happening. About 40% of patients experience some acute (early) rejection. This often happens whilst still in hospital following your transplant, and is treatable.

FAQ-10: Can individuals have physical activity after receiving a new liver as well as the Sexual activity?

We encourage you to get out of bed as soon as you can after your transplant and move and walk around your room in the first few days. Most patients can return to a normal or near-normal existence and participate in fairly vigorous physical exercise six to 12 months after successful liver transplant. Often we let patients drive as little as 2 to 3 months after liver transplantation. As with other physical activities, sexual activity may be resumed when desired.

FAQ-11: From the description, patients with successful liver transplants seem very healthy. How long can this good health last?

The newness of liver transplantation makes this question difficult to answer. There is every indication that those who are well one year after a liver transplant have an excellent chance at long term survival. Patients should not smoke or drink alcohol after liver transplantation.

FAQ-12: How long does it take to recover from liver transplantation?

Recovery after liver transplantation depends in part on how ill the patient was prior to surgery. Most patients need to count on spending a few days in the hospital in the intensive care unit and another few days on the ward; about a minimum of 15 days in the hospital is our estimate . The range of days spent in the hospitalization is from five days to maybe even six weeks.

FAQ-13: How long will my new liver last?

There is no time limit on how long your liver can last. Transplanted livers have been known to last for more than 30 years, and surgical techniques and anti-rejection medication are constantly being developed and improved.

FAQ-14: Do I need a special diet after my transplant?

You must avoid grapefruit and grapefruit juice as this affects the levels of your anti-rejection medication. Some patients need a low-sugar diet or a low-potassium diet due to side effects of their medication.

