肝脏移植10年120例经验回顾

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【摘要】目的 总结近年来我院肝移植的临床经验。方法 我院自1993年至今连续实施的120例人体肝脏移植病例，其中1993年第一阶段（3例），1994年为第二阶段（15例），2000年1月—2002年9月为第三阶段（103例），对手术适应证、外科技术、围术期处理以及术后并发症等方面的经验进行了回顾性总结。结果 肝脏恶性病变在第一阶段两例受体均为恶性肿瘤。第一阶段为53例（B/B），第二阶段为34例（B/B），第三阶段为103例（B/B）。受体中男性能病率高于恶性病者，肝脏恶性肿瘤患者则多死于癌复发与转移，第三阶段恶性病变患者年生存率为83.1%，恶性疾病患者术后近期疗效较好，余者未见生存率为81%。第一阶段无静脉移植技术的开展已显示其优越性；移植后血管并发症发病率逐年下降，其发生率从20%下降到4.9%。静脉管并发症是长期存活患者的主要问题。结论 手术技术的完善与提高，术后并发症的及时合理处理，对受体严格筛选以及肝癌复发的防治是进一步提高我国肝脏移植疗效的努力方向。

【关键词】 肝移植；并发症；肝癌；乙型肝炎

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【Abstract】Objective To sum up the clinical experience in recent 10 years in our organ transplantation center. Methods We retrospectively reviewed clinical data of 120 patients receiving liver transplantation from April 1993 to October 2002. The patients’ clinical characteristics, surgical techniques, complications and survival rates were compared between the periods of 1993 – 1997 (phase I), 1998 (phase II), and 2000 – 2002 (phase III). Results Malignant liver diseases were major indications for liver transplantation in phase I (100%) and II (53%) and III (34%), respectively. The survival rate of recipients with benign liver diseases in phase III significantly improved with the 3-month, 6-month and 1-year survival rates of 86%, 85% and 83.1%, respectively. For patients with malignant liver diseases, the 3-month, 6-month and 1-year survival rates were 87%, 81% and 46%, respectively. The recurrence of hepatitis B was 24% in 12 months after transplantation. The incidence of posttransplantation vascular complications decreased significantly from 29% in phase I and II to 4.9% in phase III. Biliary complications remained one of the major problems for long-term survival. No veno-venous bypass was applied in phase III. Conclusion Strict selection of candidate recipients, technical refinement, appropriate management of vascular and biliary complications, and prevention of recurrence of hepatitis B and malignant liver diseases are important for long-term survival.

【Key words】 liver transplantation; Complications; Liver carcinoma; Hepatitis B