ABSTRACT

Living donor liver transplant predisposes both the donor and the recipient to high risk of small residual liver volume (in donor) and small-for-size graft syndrome (in recipient) (1). Both of these risks can be overcome by using two grafts from two different donors; this procedure is called „Living donor liver transplant using dual grafts” (2). We present a video case-report of a „Living donor liver transplant using dual grafts” performed in a 51 yo female recipient for VHB+VHD cirrhosis, MELD score 22. She received two liver grafts, a left hemiliver (Donor 2 in the video) and a left lateral section (Donor 1 in the video). The combined GRWR was 1.05 (0.71 + 0.34). For a better understanding of the technique, both donation and back-table procedures were combined in the same split-screen, being followed by the left lateral section (Donor 1) and left hemiliver (donor 2) implantations. Both donors had no post-operative complications. After 12 months of follow-up, both donors and the recipient are alive, with normal liver function. Dual-graft Living donor liver transplant is a feasible option to achieve the required liver volume using two suboptimal liver grafts.

Key words: living donor liver transplant, dual graft, dual transplant, liver transplant
Living Donor Liver Transplant Using Dual Grafts

Donor 2
S 2-3-4 Volume = 445 cc (24%)
Right Liv. Vol. = 1350 cc (76%)

Donor 1
S 2-3-4 = 402 cc / S 2-3 = 205 cc
Right Liv. Vol. = 728 cc
LHA from LGA
Seg 5-6 Artery
from SMA
Seg 4 and 6-7 from CT
D2 (S 2-3-4) + D1 (S 2-3) = 650 cc

Recipient
HBV + HDV Liver Cirrhosis
60 kg bodyweight
Conflict of interest

All authors declare that they have no conflict of interest.

REFERENCES