

● 论著

背驮式肝移植成功19例报告▲

广西医科大学第一附属医院肝胆血管外科(南宁 530021)

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【摘要】目的 总结背驮式肝移植成功的经验。方法 从1996年6月26日开始施行首例肝移植至2004年6月为19例患者终末期肝病的受者施行了背驮式肝移植20次。19例受者中,原发性胆汁性肝硬化1例,硬化性胆管炎1例,肝炎后肝硬化6例,原发性肝癌并肝硬化9例(<5cm 4例,晚期肝癌2例),多发性肝囊肿并肾囊肿2例(其中1例施行了肝肾联合移植,另1例先施行了背驮式肝移植,因慢性排斥反应,3个月后施行肝肾联合移植)。16例17次供肝流出道采用受体的肝右肝中肝左静脉成形为一个口与供体的肝上下腔静脉端端吻合,3例供肝流出道采用受体的肝中肝左静脉、下腔静脉前壁成形为一个口与供体的肝上下腔静脉端端吻合。在胆道重建时,11例12次为胆总管端-端间断吻合T管引流,8例胆总管端-端间断吻合无T管引流。结果 手术全部获得成功,存活14例,4年6个月1例,1~3年以上7例,6个月以上3例,3例不足两个月,出院的患者都恢复工作。死亡5例中第1例术后49天死于霉菌性败血症,2例多发性肝囊肿并肾囊肿施行肝肾联合移植分别于术后31天和3个月死于移植肾无功能。2例晚期肝癌于术后3个月和5个月死于肝癌复发。结论 背驮式肝移植术可以作为一个常规术式应用。

【关键词】肝移植;背驮式**【中图分类号】** 657.3**Piggy-back orthotopic liver transplantation(A report of 19 cases)**

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【Abstract】 Objective To summarize the experiences on piggy-back orthotopic liver transplantation(POTL). Methods The first piggy-back orthotopic liver transplantation was performed in our hospital on June 26, 1996. Since then all together 19 consecutive cases have been successfully treated by POTL, including 6 cases cirrhosis, 9 cases hepatocellular carcinoma, 2 cases polycystic liver disease with polycystic renal disease, 1 case sclerosing cholangitis and 1 case biliary cirrhosis. 16 cases were treated by conventional POTL for 17 times and 3 cases were done by modified POTL. 11 of their common bile ducts were builded by end to end anastomosis with T tube, 8 cases' common bile ducts were builded by end to end anastomosis without T tube. Results 14 cases are surviving well, including one being alive for 4 and half year, 7 cases for 1~3 years, 3 cases for 6~12 months and 3 cases for 1~2 months. 5 cases died. Conclusion Piggy-back orthotopic liver transplantation(POTL) can be employed for the recipients with end-stage liver disease as a conventional surgery. The benign end-stage liver diseases are the best indication for orthotopic liver transplantation.

【Key words】 liver transplantation; Piggy - back

1996年6月26日作者在广西医科大学第一附属医院施行本区首例背驮式肝移植以来,至今年连续施行了背驮式肝移植19例18次,手术全部获得成功,无手术死亡,最长者已有4年6个月而且已恢复工作。现总结报道如下。

1 临床资料

1.1 一般资料 19例肝移植患者男性14例,女5例,年龄31~68岁,中位年龄42岁。其中原发性胆汁性肝硬化2例,肝炎后肝硬化6例,原发性肝癌9例,肝囊肿并肾囊肿2例(见表1)。

1.2 手术方式^[1] 本组病人19例20次行背驮式同种原位

肝移植,2例肝囊肿并肾肝囊肿在行肝肾联合移植,其中的1例因慢性排斥而行再次背驮式同种原位肝移植。3例行改良背驮式同种原位肝移植,即供肝下腔静脉与受体的肝中、肝左静脉、下腔静脉吻合。所有的受者胆道重建均行胆总管端-端间断吻合,前11例12次肝移植采用T管支撑外引流,T管均在术后3个月拔除。后8例肝移植不放置T管支撑外引流。供肝均为男性尸体供肝,供受体间ABO血型相符,采取多器官联合灌洗快速切取。受体的病肝切除及供体植入的技术方法已报道^[1]。供肝热缺血时间为0~5min,冷缺血时间为(10.4±3.2)h,无肝期为55~110min。肝上下腔静脉吻合时间20~55min,门静脉吻合时间10~20min,肝动脉吻合时间

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