Nutritional Support Team Approach Decreases In-Hospital Mortality After Deceased Donor Liver Transplantation

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ABSTRACT

Background. Many patients were died after deceased donor liver transplantation (DDLT) because of poor nutritional status by end-stage liver disease. Purpose of present study is to compare the mortality in the period without nutritional support (NST) and that in the period with NST.

Methods. Forty-six patient underwent DDLT in Samsung Medical Center at the 2016. All recipients routinely underwent enteral feeding after liver transplantation. NST consist of transplant surgeon, hepatologist, rehabilitation doctor, dietitian, pharmacist, and nurse. NST has cared for twenty-one patients after September 2016.

Results. There were no statistically significant differences in baseline and perioperative characteristics between the two groups. The median MELD scores are 36 (range, 21-40) in the period without NST group and 36 (range, 23-40) in the period with NST group, respectively ($P = 0.596$). The incidence of in-hospital mortality in the period without NST group was 24.0% (6/25), but that in the period of NST group was 4.8% (1/20), respectively. In-hospital mortality in the period with NST group was lower than that in the period without NST group, but there was no statistically significant between the groups ($P = 0.070$).

Conclusion. Present study suggests that NST approach in the DDLT patients with high MELD score should be required for preventing in-hospital mortality.

Keywords: Nutritional support team, multidisciplinary approach, deceased donor liver transplantation, malnutrition, mortality

Figure 1. In hospital mortality
Figure 2. Post-operative Body mass index (BMI) change