

LIVER TRANSPLANTATION IN JEHOVAH'S WITNESSES

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Background: For religious reasons most of the Jehovah's witnesses (JW) refuse infusions of any blood product, including autologous or homologous predonated blood, platelets, fresh frozen plasma, coagulation factor concentrates, or human albumin. However they may accept solid organ transplantation.

Material and Methods: The authors report their experience of liver transplantation (LT) in JW. Since 1998, 11 JW patients (6 males, 5 females), mean age: 48 years (6-70) were evaluated for LT. Causes of liver failure were HCV with (2) or without (2) hepatocarcinoma, HBV, chronic Wilson's disease, PSC, antitrypsin deficiency, PBC (2), and giant cavernous hemangioma. A hematocrit of 45% and a platelet level of 75.000 /mm³ were considered as the minimal acceptable levels for LT. All patients received iron supplementation and erythropoietin. One patient had percutaneous spleen embolisation to increase platelet level. Aprotinin was given during LT to limit fibrinolysis and meticulous surgical haemostasis was achieved using argon beam coagulation. Continuous circuit cell salvage and reinfusion whereby scavenged blood was maintained in continuity with the patient's circulation, was used. Venovenous bypass was avoided during LT to minimize the coagulation disorders.

Results: The giant hemangioma was resected, one patient with multifocal hepatocarcinoma was rejected, and the other 9 patients were accepted for transplantation. Two patients died from upper digestive tract hemorrhage while they were in administrative and medical preparation for LT. They had been looking for a center accepting to transplant them since more than 6 months. Three patients were successfully transplanted (1 Child C and 2 Child B at LT), two are listed and two are in medical preparation for LT.

Conclusion: LT may be successful in selected and prepared JW patients who should not be a priori excluded from this life saving procedure.