

Submission No.: CS02-5401

Session : Concurrent Symposium 2 (Liver)

Date & Time, Place : November 18 (Fri), 10:30-12:00, Room 5F-1

Session Title : How to Improve Long-Term Outcome After LT

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## Recurrence of Original Disease after LT - Focus What?

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Recurrence of original diseases has significant negative impacts on outcomes of liver transplantation. Prevention and early intervention are important to improve lives of recipients and to reduce medical cost.

In prevention of hepatitis B, nucleoside-analogue monotherapy has been challenged. Although there were variations in conclusions depending on choice of evaluation scale such as HBV DNA or HBs antigen, combination of HBIG and nucleoside-analogue is safe for recipients with positive HBs antigen.

Regarding recurrence of HCC, selection of immunosuppression, management of HCC recurrence, and impact of HCV treatment are issues. Minimizing calcineurin inhibitors and steroid and compensation with mTOR inhibitor might be a choice.

Identifying patients at risk of recurrence of NAFLD through genotypic and phenotypic characteristics at transplant will help early intervention directed toward prevention of recurrence of NAFLD. Weight control and treating comorbidity are keys.

Recurrence of PSC had significant negative impact on both graft and patient survival both in deceased donor and living donor liver transplantation and could be reduced by maintenance of adequate immunosuppression. Recurrence of PBC rarely contributes to graft loss as far as 10 years after transplantation.