

PO-16. EVALUATION FOR LIVER TRANSPLANTATION (OLT) IN HIV-INFECTED CIRRHOTIC PATIENTS WITH END-STAGE LIVER DISEASE (ESLD): A 2009 GESIDA/FIPSE SURVEY

M.L. Montes Ramirez¹, J.M. Miro², M. Lopez-Dieguez², F.X. Zamora Vargas¹, C. Quereda³, C. Tural⁴, M.A. von Wichmann⁵, J. Berenguers, F. Pulido⁷, E. Ortega⁸, A. Arranz⁹ and J. Gonzalez-Garcia¹
¹Hospital Universitario La Paz, Madrid. ²Hospital Clínic/IDIBAPS, Barcelona. ³Hospital Ramón y Cajal, Madrid. ⁴Hospital Germans Trias i Pujol, Barcelona. ⁵Hospital Virgen de Aranzazu, Donostia. ⁶Hospital General Universitario Gregorio Marañón, Madrid. ⁷Hospital 12 de Octubre, Madrid. ⁸Hospital General Universitario de Valencia, Valencia. ⁹Hospital Príncipe de Asturias, Madrid.

Background: HIV-infected patients have hepatic comorbidities which lead to liver cirrhosis and ESLD. Currently OLT is not contraindicated in these patients. The aim was: Whether HIV-infected patients with ESLD are evaluated for OLT; reasons for including or excluding these patients in the OLT waiting list.

Methods: patients with B or C Child-Turcotte-Pugh stage from the 380 HIV-infected patients included in the GESIDA cirrhosis-HIV prospective cohort. HIV exclusion criteria for OLT were: active opportunistic disease, previous CDC C3 excepting esophageal candidiasis, PCP, tuberculosis; CD4+ < 100 cells/ml; uncontrolled HIV-infection; active drug abuse. The survey was carried out in 2009 among the HIV-physicians in charge of these patients.

Results: 87 patients (23%) were included. 67 patients (67%) were not evaluated for OLT, 20 (33%) were considered candidates for OLT. Psychosocial criteria were the fundamental reason for not being evaluated (48%), mainly because of active drug abuse (56%) and/or psychiatric disease (50%). HIV-infection exclusion criteria and the liver disease stage were the cause in a third of the patients: low CD4 (84%), lack of control of HIV infection (48%) and/or too advanced cirrhosis (36%) led to the majority of the exclusions. Conversely, among 20 patients evaluated, 13 (65%) were accepted, seven (35%) rejected. Main reasons for rejection were associated comorbidities with high surgical risk. Among the accepted patients only one (8%) underwent OLT at the time of the survey; three (23%) remained on the waiting list, two (15%) were removed, seven (54%) died while waiting due to liver disease progression.

Conclusion: In Spain the majority of HIV cirrhotic patients with ESLD were not considered candidates for OLT due to psychosocial reasons.