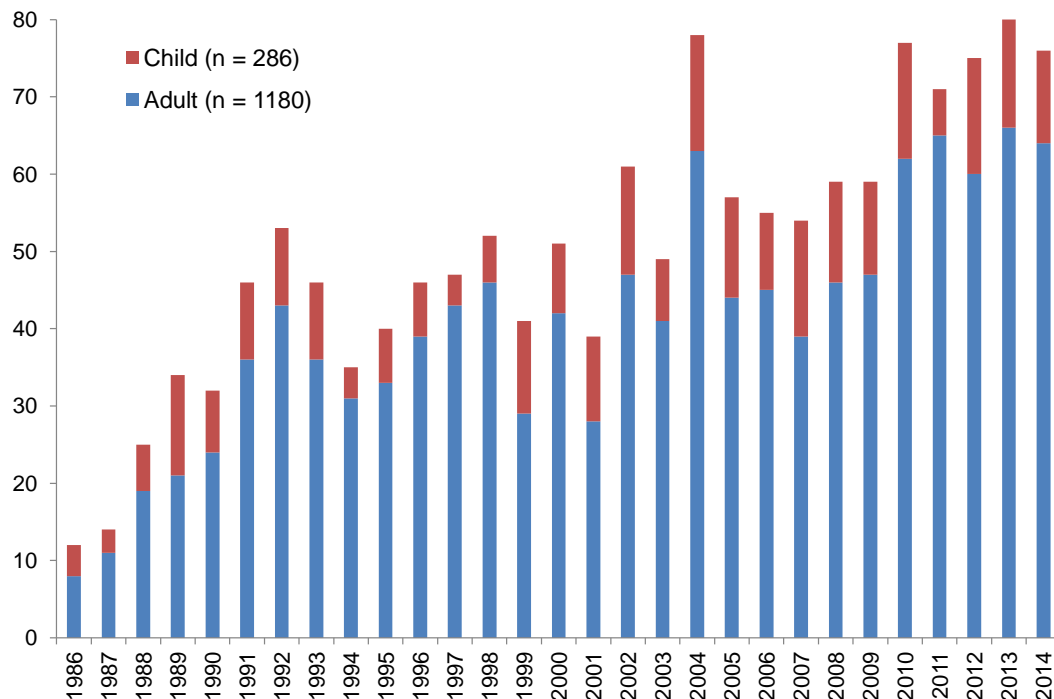


Australian National Liver Transplantation Unit



Data to 31 December 2014



The University of Sydney



The Australian National Liver Transplantation Unit, Royal Prince Alfred Hospital, Sydney, Australia is a combined facility of Sydney Local Health District, The University of Sydney and The Children's Hospital at Westmead

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Preface

In 2014, 73 new and 3 secondary orthotopic liver transplant procedures were performed within the ANLTU (12 – The Children’s Hospital at Westmead; 64 – Royal Prince Alfred Hospital). This included the ongoing usage of split liver allograft and the use of extended criteria donor liver allograft, which maximise the limited donor resources available.

The staff within the ANLTU would like to thank the members of the departments within Royal Prince Alfred Hospital and Sydney Local Health Network who have helped contribute to the success of the program in the past year. This includes Haematology, Biochemistry, other Laboratory services, Blood Bank, Department of Pathology, Department of Renal Medicine, Intensive Care Unit, Operating Room, Department of Psychiatry, Department of Cardiology, Department of Respiratory Medicine, Dietetic Department, Department of Social work, Department of Anaesthesia, the Casemix unit and all the other people who have not been specifically mentioned.

We would also like to thank the other departments within the Children’s Hospital at Westmead, who have helped contribute to the success of the paediatric programme. These include the membership of Department of Anaesthesia, the Intensive Care Unit, Laboratory services staff, Department of Social Work, Department of Nutrition and other medical departments.

The staff of the Australian Red Cross Blood Service are also acknowledged for their assistance during the year.

Finally, without the generosity of the deceased organ donors and their families, liver transplantation would not be able to proceed at this level. Hence we give our thanks to them as well as to the team at Donate Life NSW, Kogarah.

Professor Geoff McCaughan
Dr Deborah Verran
Dr Michael Crawford
Pamela Dilworth
Gavin Lackey
Bessie Berberovic

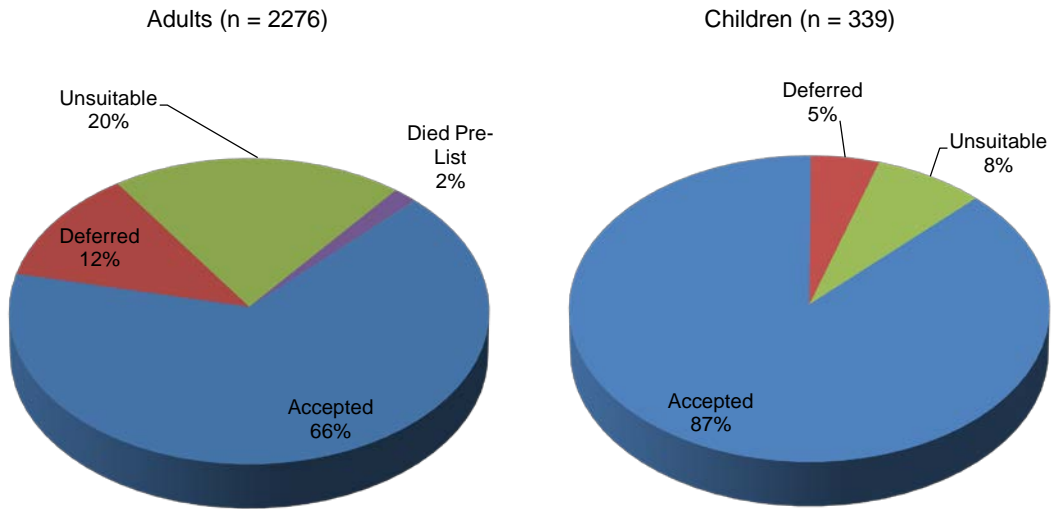
Summary

There are several key issues to report.

1. In 2014, 73 new and 3 secondary orthotopic liver transplant procedures were performed, 12 of which were Paediatric and 64 were Adult.
2. Between January 1986 to December 2014, 1466 liver transplants were performed on 1351 patients, of which 1104 and 247 recipients were adults and children, respectively.
3. The number of transplants per year continues to be related to the deceased donor rate.
4. In 2014, 20 patients (12%) on the waiting list were subsequently withdrawn due to advanced and/or extra-hepatic disease. Four (2%) patients improved whilst on the waiting list.
5. The movement of patients on and off the waiting list continues to be dynamic.
6. The average waiting time for adults in all blood groups remains variable depending on blood group.
7. The median deceased donor age has increased from 29 years (1986 – 1994) to 44 years (2005 – 2014). In 2014 there were nine deceased donors over the age of 70 years. This is the highest number of donors from this age group whose livers have been used for transplant.
8. The median age for adult recipients has increased from 45.4 years (1986 – 1994) to now stand at 51.9 years. The median age for child recipients has decreased from 4.4 years (1986 – 1994) and now stands at 2.0 years.
9. HCV infection has been an increasing primary and secondary indication for liver transplantation in adults. In the period 1986 – 1994 9% of adults had this diagnosis compared to 38% in 2005 – 2014. In 2014, 34% of adults transplanted had Chronic HCV.
10. Hepatocellular carcinoma has also become an increasingly common primary and secondary indication for liver transplantation, with 28% of the adult recipients having a diagnosis of HCC in the five year period 2010 – 2014.
11. The overall patient survival rate over the past 2 years was 98% at one year.

ASSESSMENT INFORMATION

Allocation of Patients Accepted for Assessment



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Data to 31 December 2014

Patients Considered Unsuitable for Transplantation

2276 Adults have been assessed since 1985

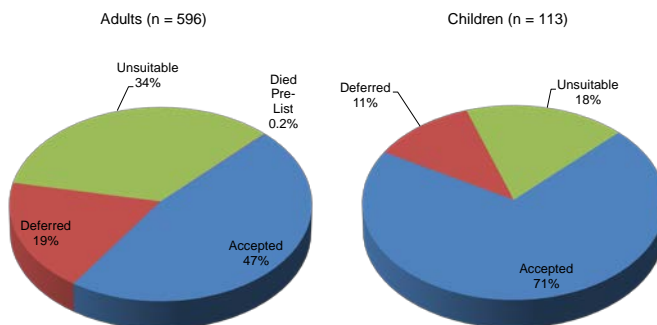
Reason	Adults	
Too Advanced + extra-hepatic disease	169	37%
Tumour Progression + Tumour (extra-hepatic spread)	74	15%
Good prognosis	65	14%
Psychological	59	13%
Alcohol	56	12%
Patient's (Parent's) wish	24	5%
Alternative therapy	7	2%
Age	5	1%
Condition improved	1	<1%
Logistics	1	<1%
Total	461	100%

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Comparison Over Time of Patients Assessed

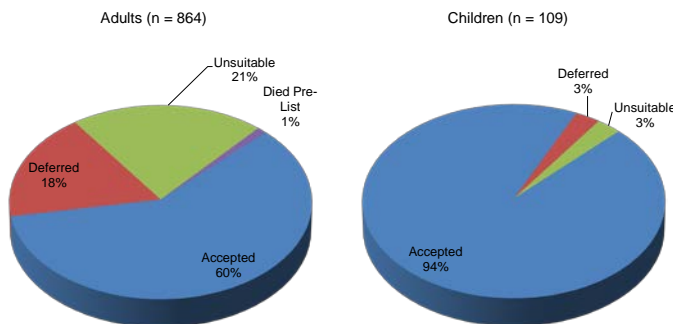
1985 - 1994



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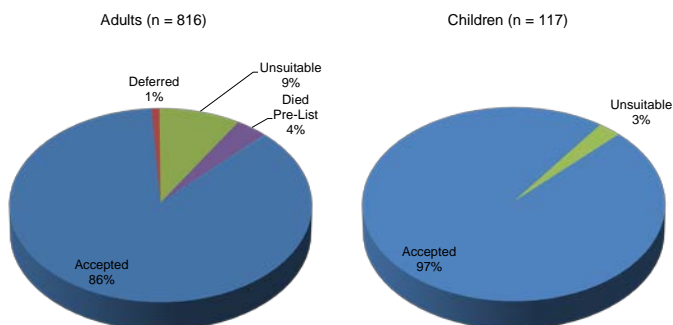
1995 - 2004



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2005 - 2014



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Data to 31 December 2014

Adult patient acceptance rate has increased from 47% in the period of 1985 – 1994 to 86% in 2005 – 2014.
 Child patient acceptance rate has increased from 71% in the period of 1985 – 1994 to 97% in 2005 – 2014.

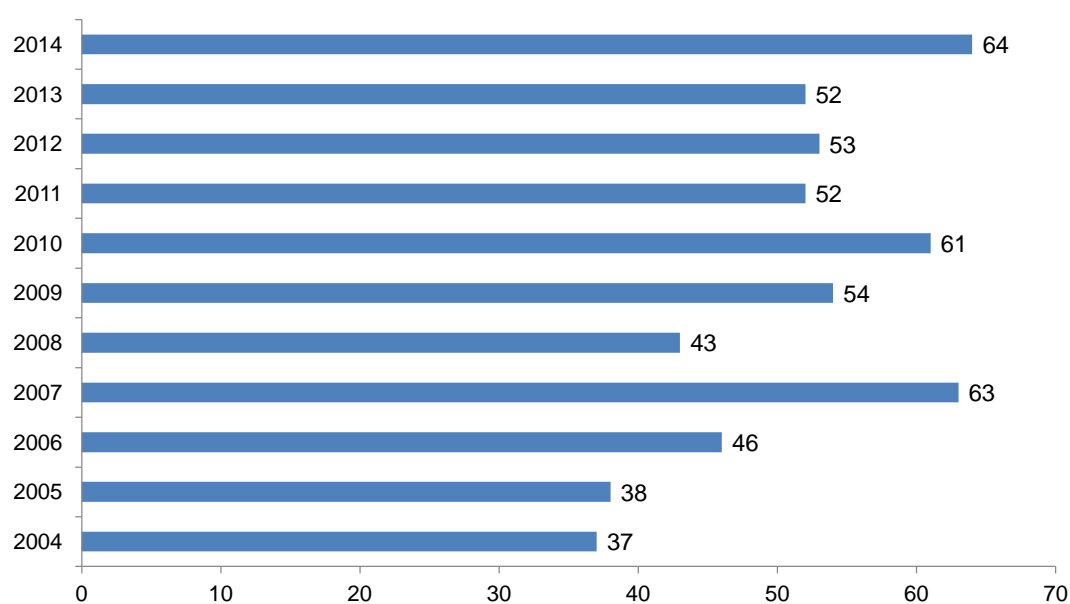
Waiting List Activity

Year		Listed at Start of Year	New Listings	Total	Tx	Died Pre Tx	Withdrawn		Total Withdrawn/ Mortality	Improved	Listed at End of Year
							Tumour Progressed	Other			
2005	n	37	83	120	54	10	1	6	17	3	38
	%				45	8.3	0.8	5	14	2.5	
2006	n	38	83	121	55	6	3	0	9	6	46
	%				45	5	2.5	0	7.4	5	
2007	n	46	95	141	54	19	2	2	23	2	63
	%				38	13	1	1	16	1	
2008	n	63	76	139	59	25	2	5	32	5	43
	%				42	18	1	3.5	23	3.5	
2009	n	43	97	140	59	11	3	5	19	8	54
	%				42	8	2	3.5	13.6	5.7	
2010	n	54	98	152	77	6	4	2	12	2	61
	%				51	4	3	1	8	1	
2011	n	61	82	143	71	9	5	2	16	4	52
	%				50	6	3	1	11	3	
2012	n	52	104	156	75	15	2	9	26	2	53
	%				48	10	1.3	6	17	1.3	
2013	n	53	113	166	80	15	5	11	31	3	52
	%				48	9	3	7	19	2	
2014	n	52	112	164	76	5	1	14	20	4	64
	%				46	3	0.6	9	12	2	

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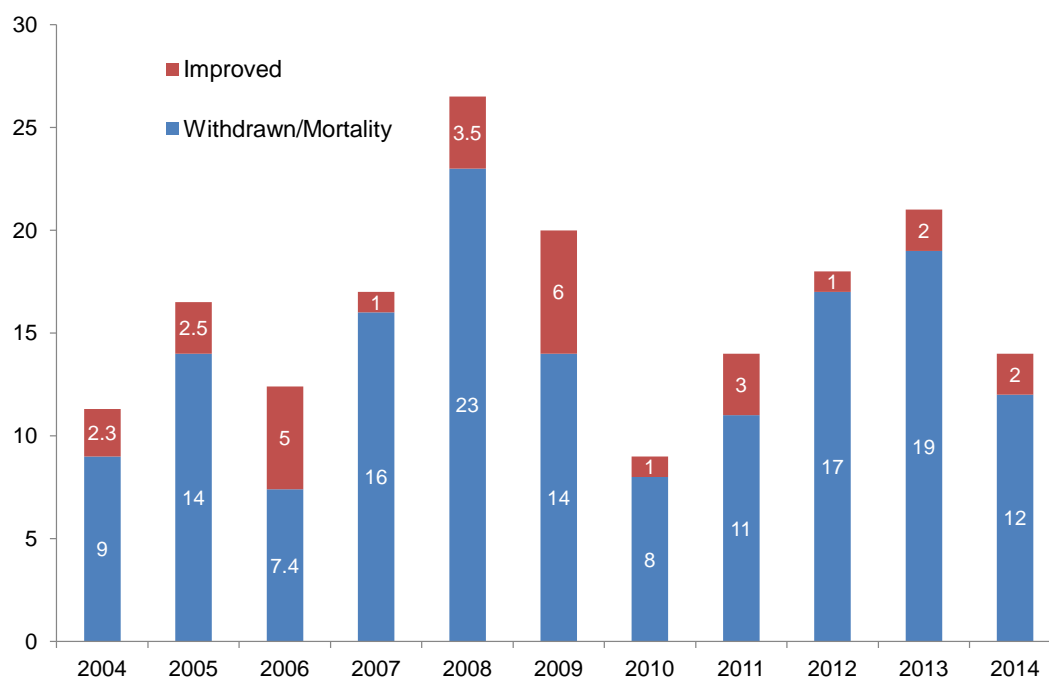
Patients on Waiting List at the end of Calendar Year



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Data to 31 December 2014

% Patients Withdrawn from Waiting List



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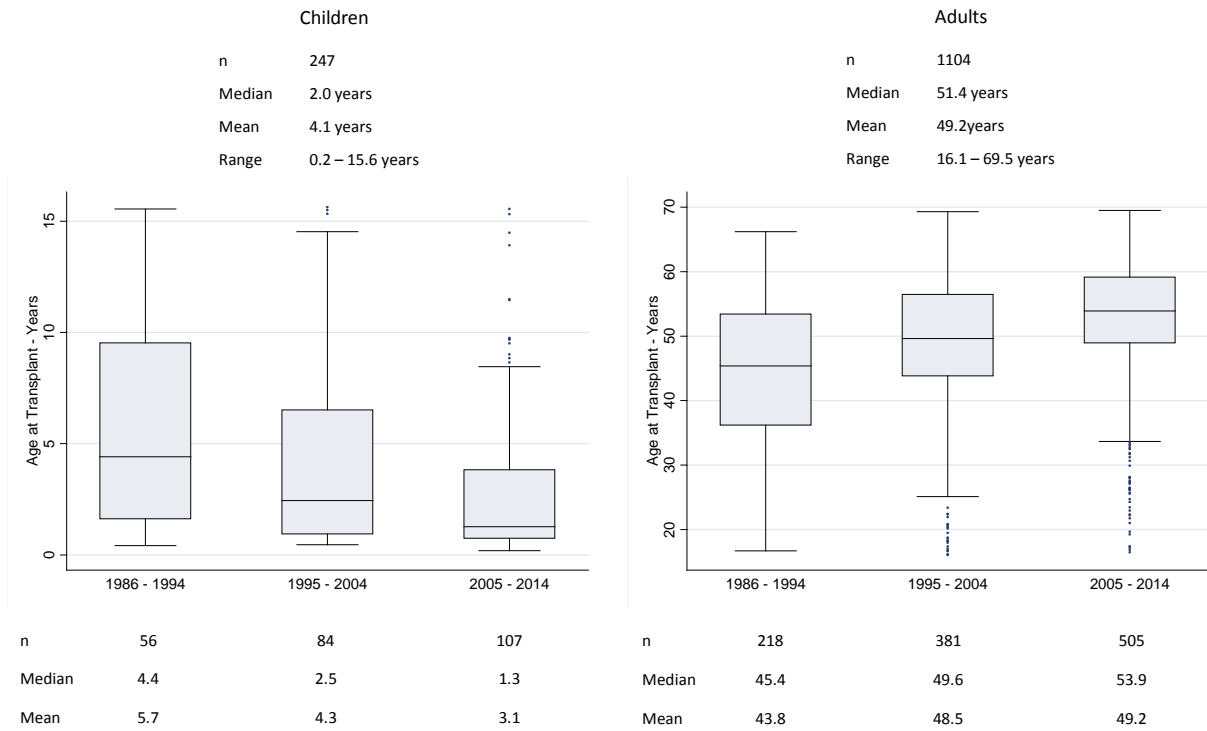
Urgent Listings 2014

Number of Patients Listed as Urgent	Cat 1	Cat 2	Total
Transplanted	4	5	9
Delisted	1	1	2
Total			11

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Data to 31 December 2014

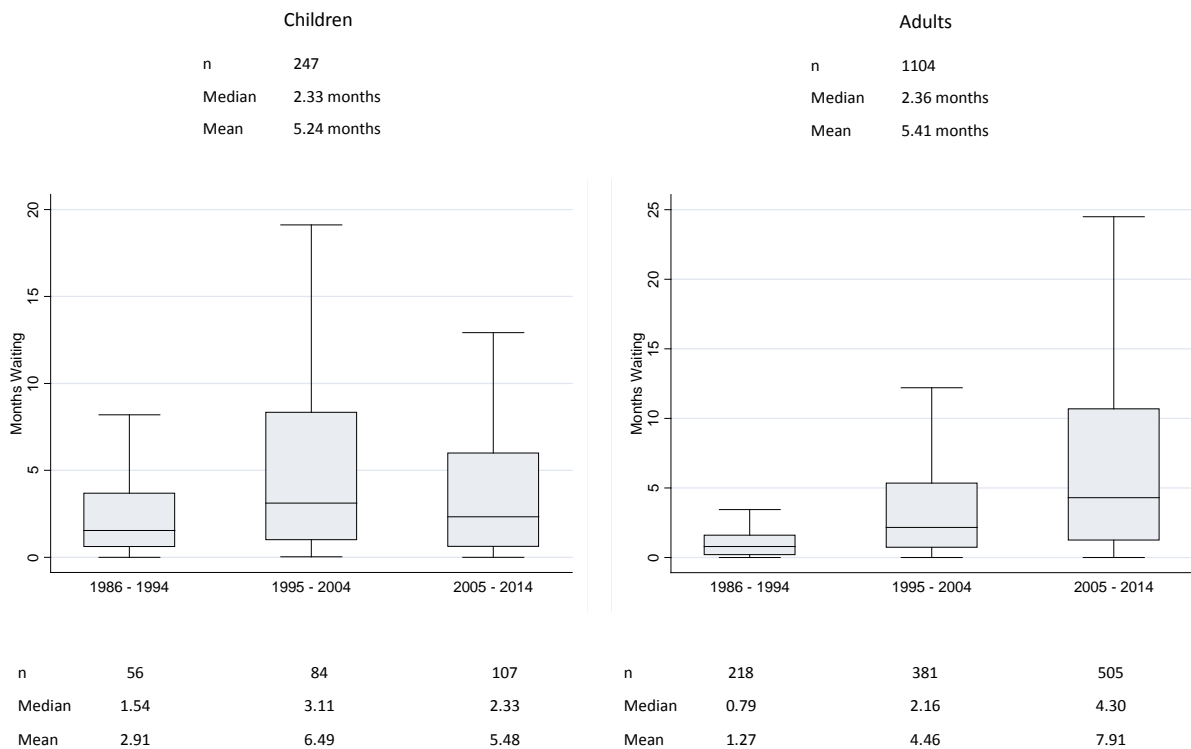
Age of Transplant Recipients (Primary Grafts)



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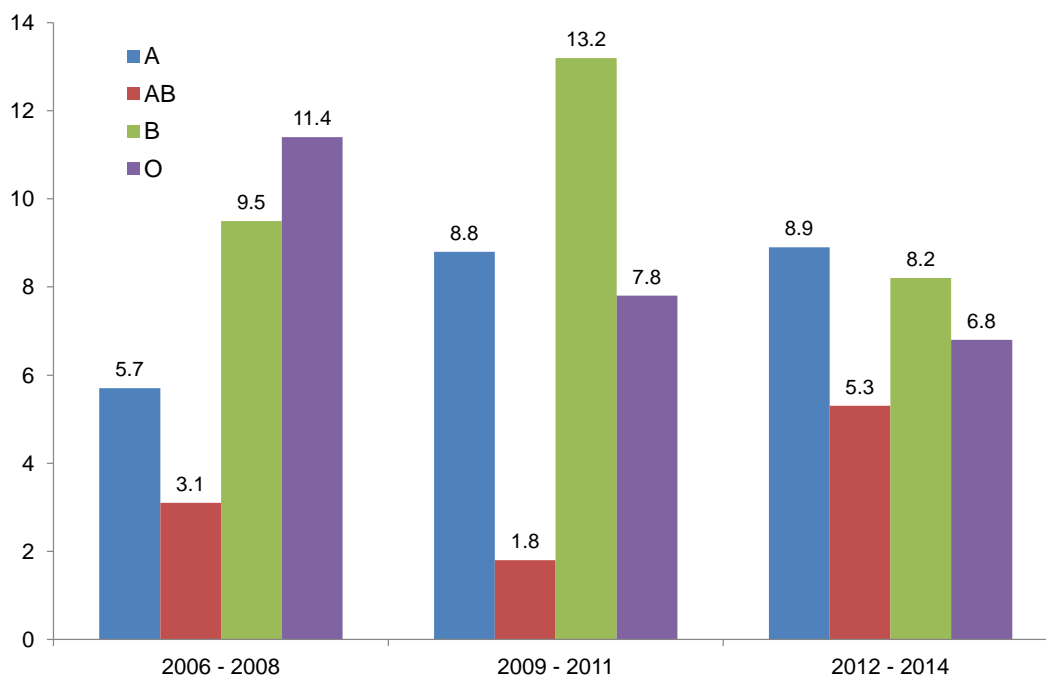
Waiting Time of Transplant Recipients (Primary Grafts)



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Data to 31 December 2014

Adult Mean Months Waiting Primary Liver Transplantation vs ABO (2006 – 2014)



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Data to 31 December 2014

Adult Mean Months Waiting Primary Liver Transplantation vs ABO (2006 – 2014)

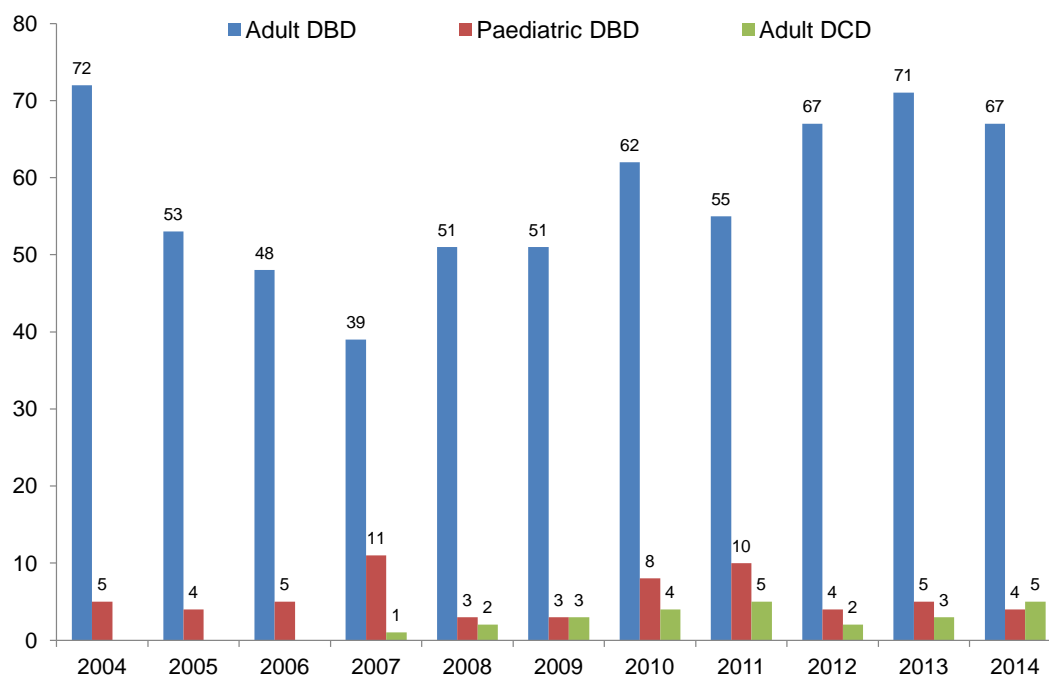
	2006 – 2008	2009 – 2011	2012 – 2014	Overall
A	5.7	8.8	8.9	8.1
AB	3.1	1.8	5.3	3.4
B	9.5	13.2	8.2	9.7
O	11.4	7.8	6.8	8.4
Mean	8.4	8.7	7.8	8.2

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Data to 31 December 2014

DONOR INFORMATION

Deceased Adult and Paediatric Donor Organs Used by Year



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Data to 31 December 2014

Since 2000, 89.7% of liver donors were adults (>=18yrs) and 10.3% were paediatric donors.

Deceased Donor Offers to NSW 2006 - 2014

Donor Type	State	2006 – 2008	2009 – 2011	2012	2013	2014	Total
DBD	ACT	9	18	9	5	9	50
	NSW	139	177	71	88	63	538
	NT	3	2	1	1	1	8
	NZ	13	10	3	1	5	32
	QLD	20	17	5	5	7	54
	SA	17	12	2	7	5	43
	TAS	6	1		1	1	9
	VIC	23	22	11	7	3	66
	WA	9	13	5	6	8	41
Total BDD Offers		239	272	107	121	102	841
BDD Used		137	170	64	68	66	505
DCD	ACT	3	8	1		1	13
	NSW	19	65	23	15	15	137
	QLD	0	0		1	1	2
	VIC	0	8		1		9
	SA/WA	0	0	2		3	5
Total DCD Offers		22	81	26	17	20	166
DCD Used		3	17	2	3	5	30
Total Offers		261	357	133	138	122	1011
Total Used		140	187	66	71	71	535

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DBD Donor Offers Declined 2014 36/102 (35.2%)

	Declined at Offer	Declined at Hepatectomy
Abnormal LFTs	4	
Cirrhosis		1
Donor arrest prior to retrieval	1	
Donor history *	3	
Donor malignancy - extrahepatic		1
High risk donor for tumour or infection		1
Impaired perfusion/ischaemia		2
Interstate donor not suitable for directed recipient (Urgent Case)	1	
Liver fibrosis		3
No suitable ABO compatible recipient	4	
Offer waived **	1	
Offer waived for urgent Tx elsewhere	4	
Steatosis		7
Other ***	2	1
TOTAL	20	16

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Data to 31 December 2014

DBD Donor Offers Declined 2014 36/102 (35.2%)

- * Donor history
 - 1 ITP risk of transmission, steatosis .
 - 2 ITP risk of transmission.
 - 3 Heavy drinker & smoker.

- ** Offer waived
 - 1 Offer accepted however during coordination interstate team requested to keep liver locally.

- *** Other
 - 1 Long downtime.
 - 2 Long ischaemic time for marginal donor.
 - 3 Biopsy showed chronic inflammation, low no of bile ducts, suspect undiagnosed bile duct disorder.

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DCD Donor Offers Declined 2014 14/17 (73.7%)

	Declined at Offer	Declined at Hepatectomy
Abnormal LFTs	1	
DCD did not proceed to hepatectomy		3
Donor history *	1	
Impaired perfusion/ischaemia		1
Liver fibrosis		1
Outside DCD acceptance criteria	2	
Steatosis		2
Unstable	1	
Other **	1	1
TOTAL	6	8

* Donor history 1 High risk hx for drugs and sexual activity

** Other 1 Interstate DCD, would need cut down, expect long CIT
2 Delayed time to perfusion

Enquiries Declined 2014

	Declined at Enquiry
Donor age	1
Donor history *	3
High risk donor for tumour or infection	10
Interstate donor not suitable for directed recipient (Urgent Case)	2
No suitable recipient	2
Outside DCD acceptance criteria	5
Unstable	2
Other **	8
TOTAL	35

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Data to 31 December 2014

Enquiries Declined 2014

- * Donor history

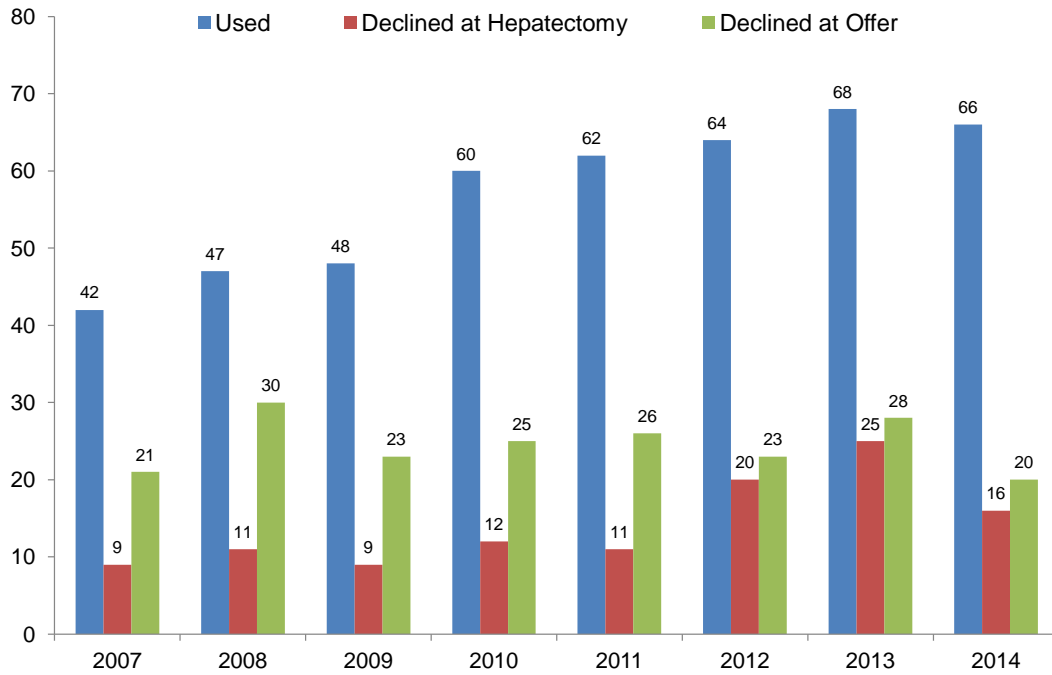
 - 1 Hx Heavy smoker, HT, hypercholesterolaemia, strong FHx multiple cancers, elevated LFTs, expected long ischaemia. Provisional offer only.
 - 2 HCV pos donor. Lived in bush. Unknown medical and behavioural history.
 - 3 Small, ventilation issues since birth, diagnosed Alveolar Capillary Dysplasia, been on ECMO for 4 days, concern re adequacy of liver perfusion.
- ** Other

 - 1 Clotting disorder - had DVT & PE few days post toe sx.
 - 3 Asked for suitability of pursuing this donor when they were admitted to the ED. Would have been DBD, nil medical history. Never made to full referral, reason unclear.
 - 4 Elevated LFTs. Asked to observe trend. Never heard any further from DonateLife.
 - 5 Expect long cold ischaemic time and lack of vessels.
 - 6 Extensive history. Enquiry as to whether we would be interested if progressed. We were interested but did not proceed to donation.
 - 7 Long downtime (1.5hrs) and high transaminases (3000-6000). Genetic mutation. Seizures. Proceeded to donate heart/lungs/kidneys.
 - 8 Offer withdrawn- donor not pursued as low probability of dying within time frame.
 - 9 Treatment withdrawn on donor prior to referral. High risk donor- IVDU, bacterial sepsis from likely abdominal fistula, long down time, abnormal LFTs.

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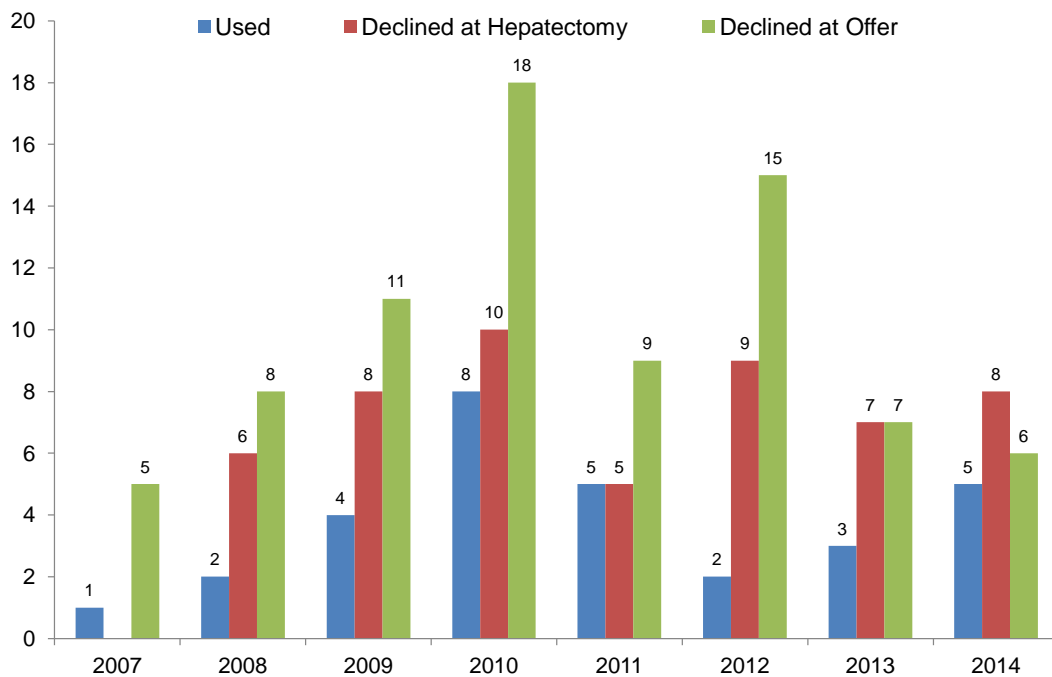
DBD Donor Offers to NSW



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DCD Donor Offers to NSW



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Data to 31 December 2014

Allocation of Accepted and Utilised Deceased Donor Livers

1st Recipient Allocation		Total
DBD	Highest prioritised patient suitable for this type of graft	43
	Size of graft not suitable for higher priority patient(s)	8
	No prioritised patient in this ABO suitable for Split Graft	4
	Higher priority patient(s) medically unfit	3
	No prioritised patient in this ABO suitable for ECD Graft	2
	No prioritised patient in this ABO suitable	1
	Positive donor virology	1
	Other *	3
DCD	Highest prioritised patient suitable for this type of graft	5
Total		70

2nd Recipient Allocation		Total
DBD	Highest prioritised patient suitable for this type of graft	5
	Size of graft not suitable for higher priority patient(s)	1
Total		6

- * Other Required combined liver/kidney tx
 Donor age – prefer closer age match for 19yo patient
 Left lateral segment offered

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Data to 31 December 2014

Living Donor Procedures – Paediatric and Adult

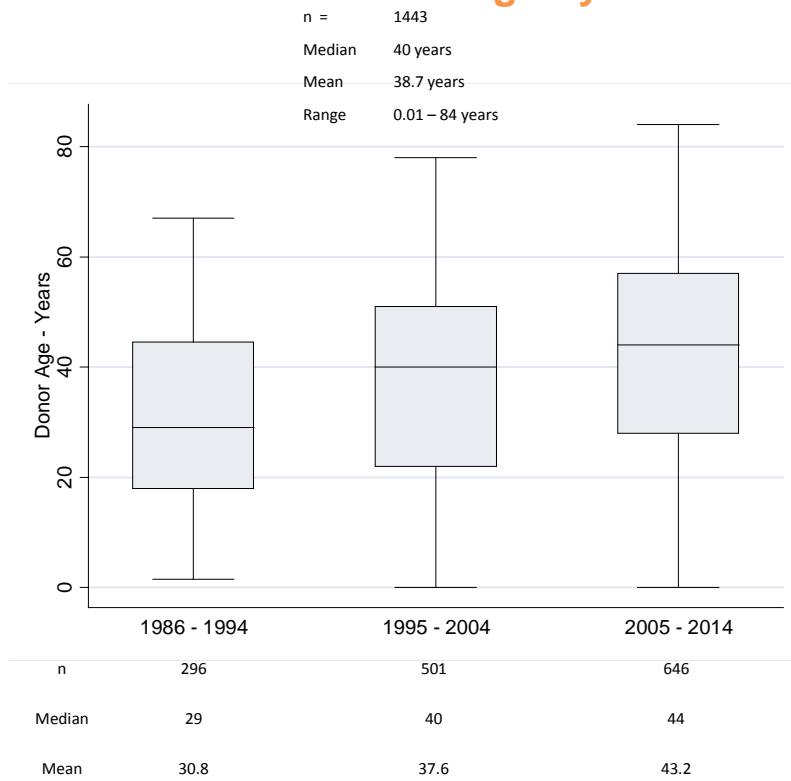
Year	1990	2002	2003	2004	2006	2007	2008	2009	2010	2011	2012	2013	2014	Total
Type	LRD	LRD	LUD *	LRD	LRD	LRD	LRD	LRD	LRD	LUD **	LRD	LUD *		
Total	1	1	1	1	2	3	3	2	3	1	2	1	0	21

- * The Living Unrelated Donor Procedures in 2003 and 2013 were adult domino transplants.
 ** The Living Unrelated Donor Procedure in 2011 was Husband to Wife.

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Deceased Donor Age by Era

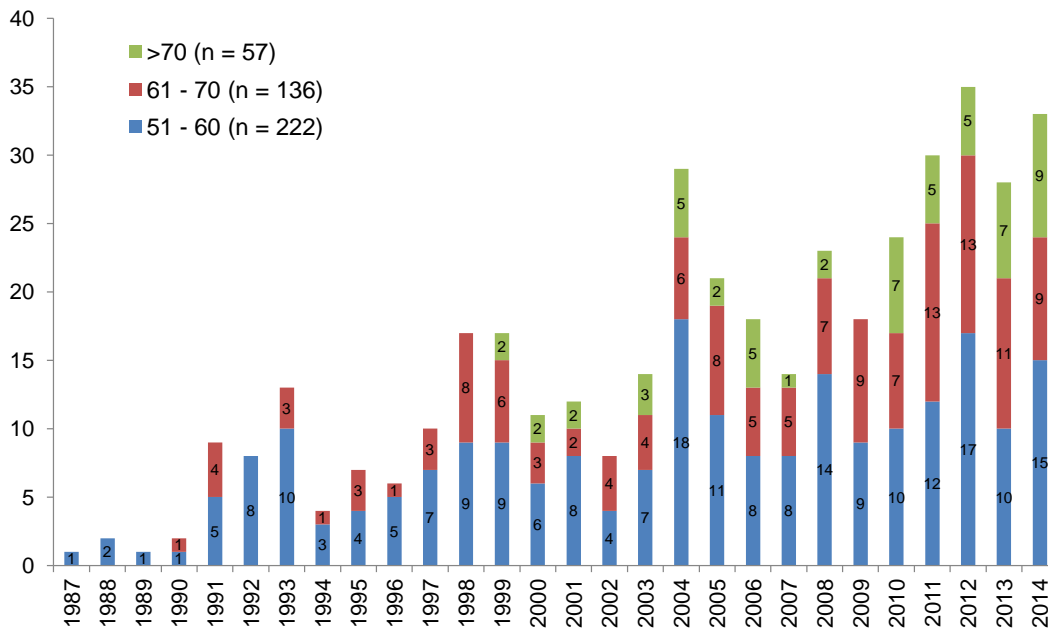


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The donor age ranged from 0 to 84 years, with a mean value of 38.7 years.

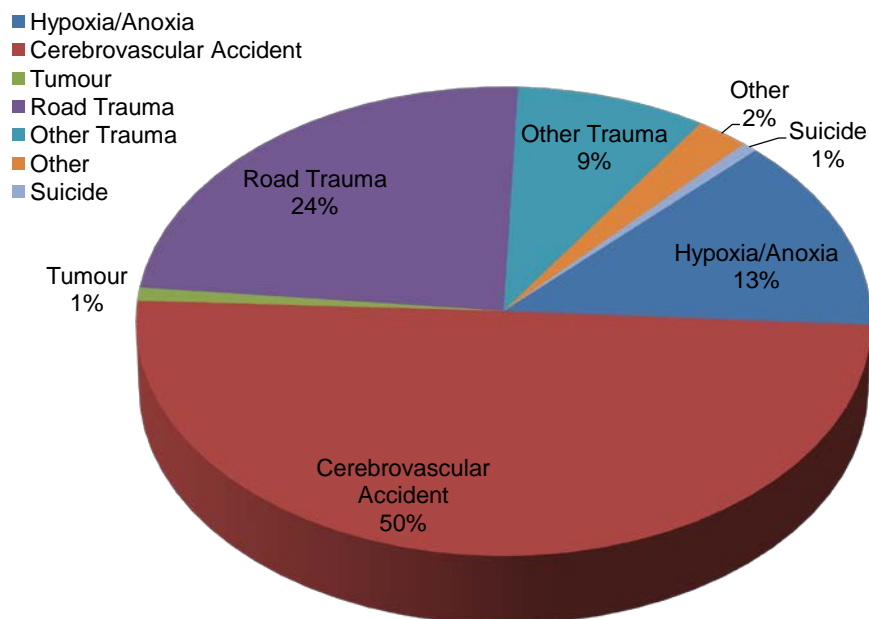
Deceased Donors Over 50 Years (n = 415)



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Deceased Donor Cause of Death (n = 1443)

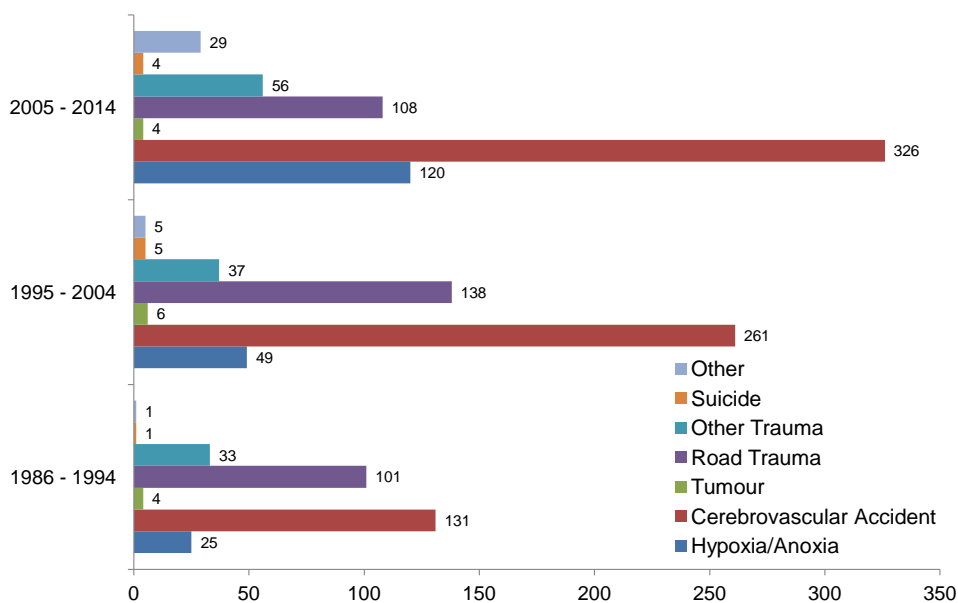


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Data to 31 December 2014

718 (50%) donors died due to cerebral haemorrhage, 473 (33%) died due to trauma.

Deceased Donor Cause of Death by Era

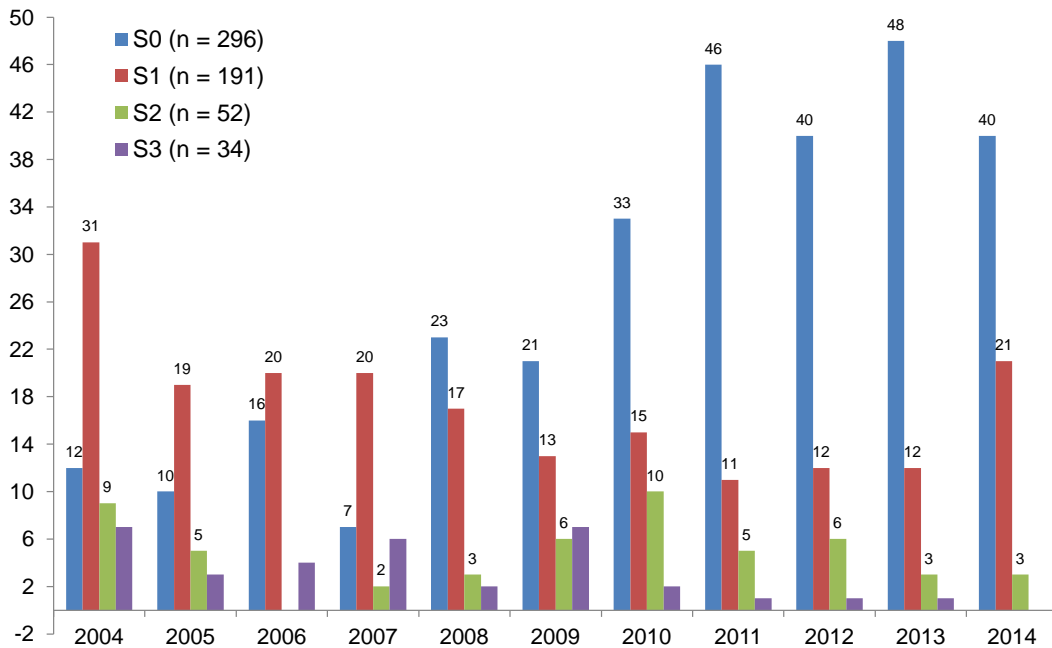


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Data to 31 December 2014

Deaths due to trauma were 44% (1986 – 1994), 36% (1995 – 2004) and 25% (2005 – 2014). In these same time periods, deaths due to cerebral causes were 45%, 51% and 50%.

Adult Graft Steatosis 2004 - 2014



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Data to 31 December 2014

Steatosis Scoring:

S0 less than 5% steatosis in biopsy (either macro or micro)

S1 Ma/Mi 5 – 29% Macrovesicular steatosis on biopsy combined with varying degrees of Micro

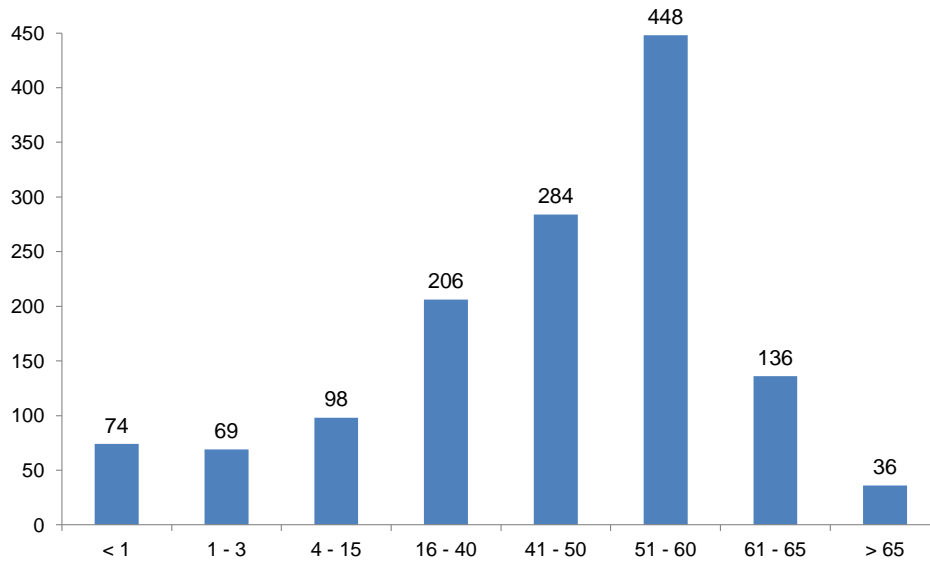
S2 Ma/Mi 30 < 60% Macrovesicular steatosis on biopsy combined with varying degrees of Micro

S3 Ma/Mi 60 +% Macrovesicular steatosis on biopsy combined with varying degrees of Micro

There are 56 cases (7.8%) where post reperfusion biopsy was not performed.

RECIPIENT DEMOGRAPHICS

Breakdown of Patient Age at Primary Transplant (n = 1351)

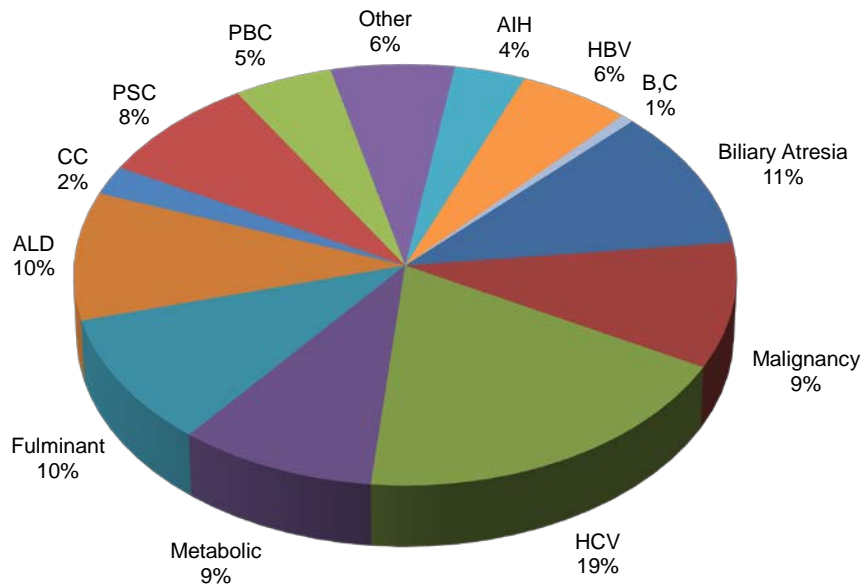


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Data to 31 December 2014

The modal group was in the age range 51 – 60 years (33.1%).

Primary Disease – All Patients (n = 1351)

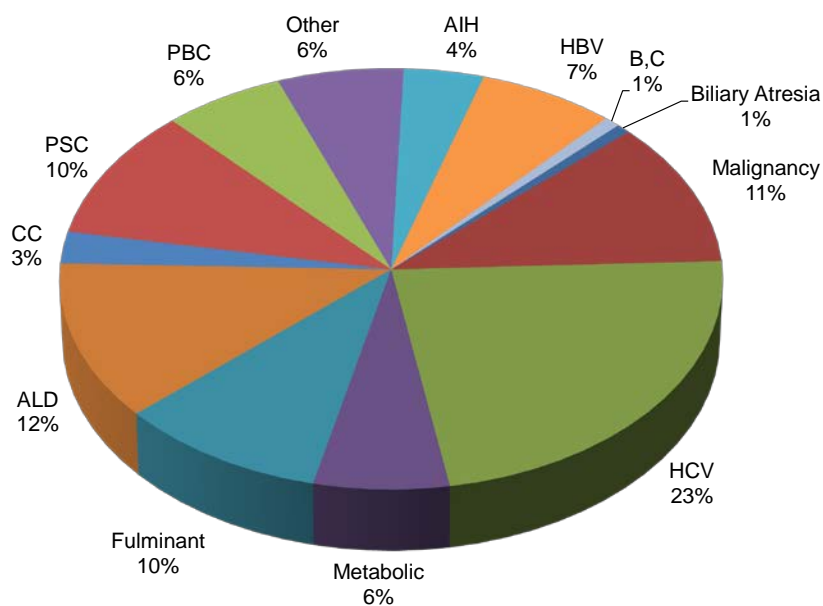


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The most common primary indications for transplantation are Chronic Hepatitis C (253, 19%), Biliary Atresia (145, 11%), Fulminant Liver Failure (135, 10%) and Alcoholic Disease (133, 10%).

Primary Disease – Adults (n = 1104)

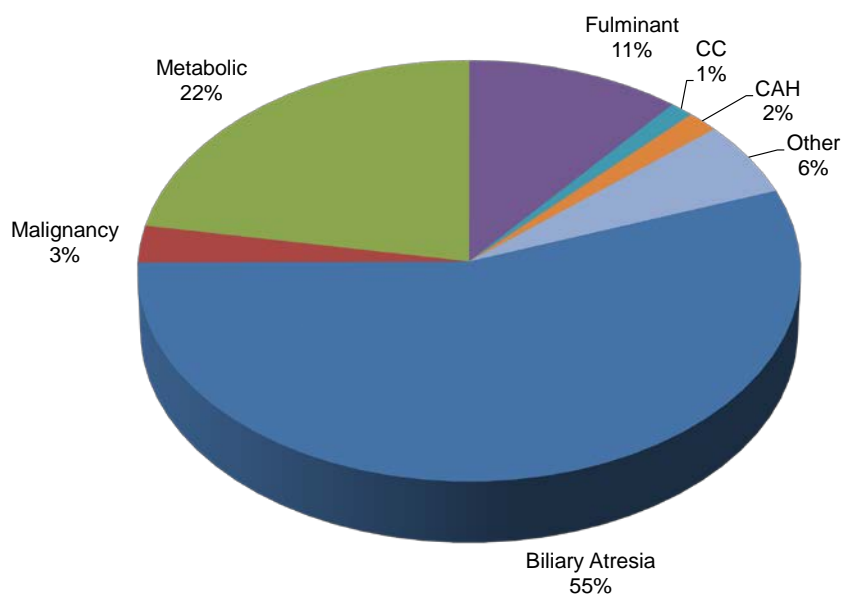


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Data to 31 December 2014

Hepatitis C was the most common indication of transplantation in adults (253, 23%), followed by Alcoholic Liver Disease (ALD 133, 12%), Malignancy (123, 11%), Primary Sclerosing Cholangitis (PSC 112, 10%), Fulminant Hepatic Failure (108, 10%), and Hepatitis B (77, 7%).

Primary Disease – Children (n = 247)

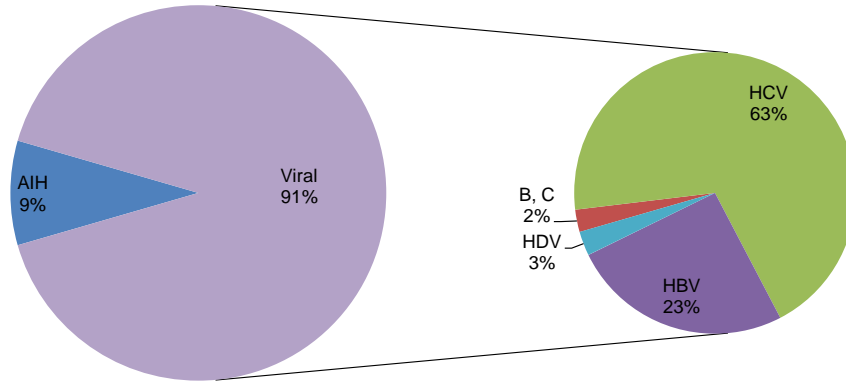


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Data to 31 December 2014

The most common indication for transplantation in children was Biliary Atresia (137, 55%), followed by Metabolic disease (55, 22%) and Fulminant Hepatic Failure (27, 18%).

Chronic Viral and Auto-Immune Hepatitis Primary and Secondary n = 514 (46.6% of all Adults)

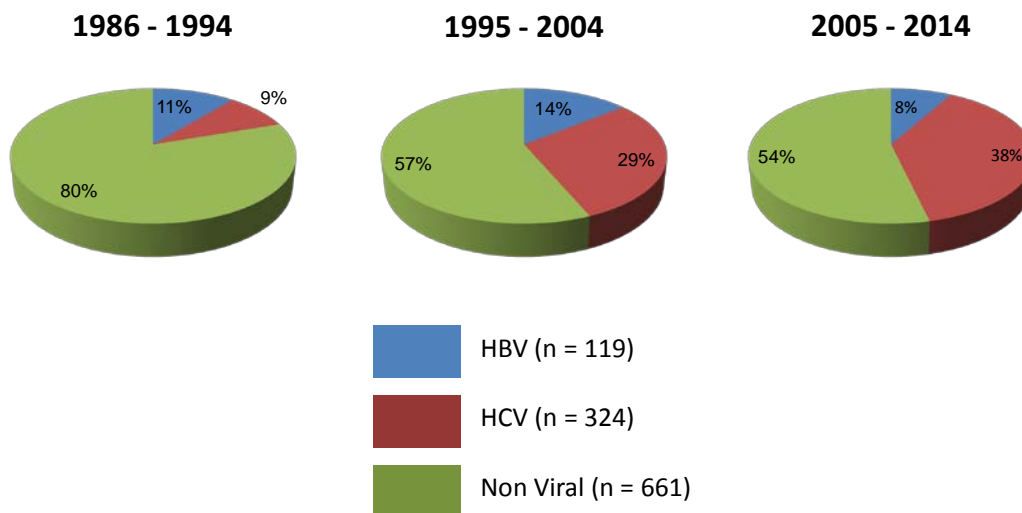


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Data to 31 December 2014

Auto-Immune Hepatitis (AIH) comprised 9% of cases, the remainder (91%) being viral in origin (CVH). Of the cases of viral hepatitis, the most common is Hepatitis C (HCV, 63%), followed by Hepatitis B (HBV, 23%) and HBV/HCV co-infection (2%).

Chronic Viral (Primary and Secondary) Adults by Era

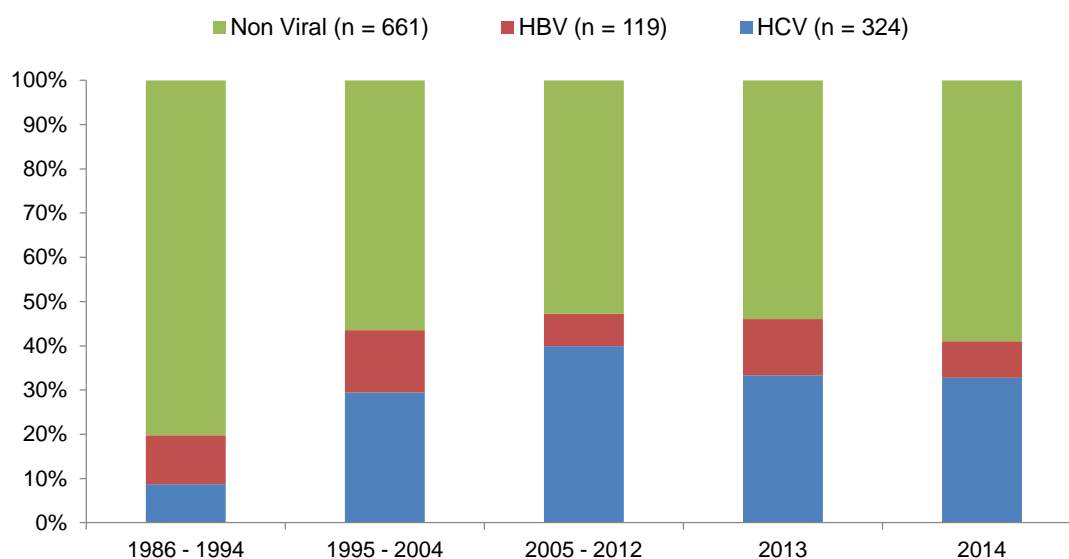


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Data to 31 December 2014

The number of patients requiring transplantation due to HCV has steadily increased over the three time periods, whereas the number of patients requiring transplantation for HBV has now decreased.

% Adults with Chronic HBV or HCV (Primary and Secondary)



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Data to 31 December 2014

Chronic HCV infection comprises 29.3% of adults transplanted, and is expected to continue to rise in the future.

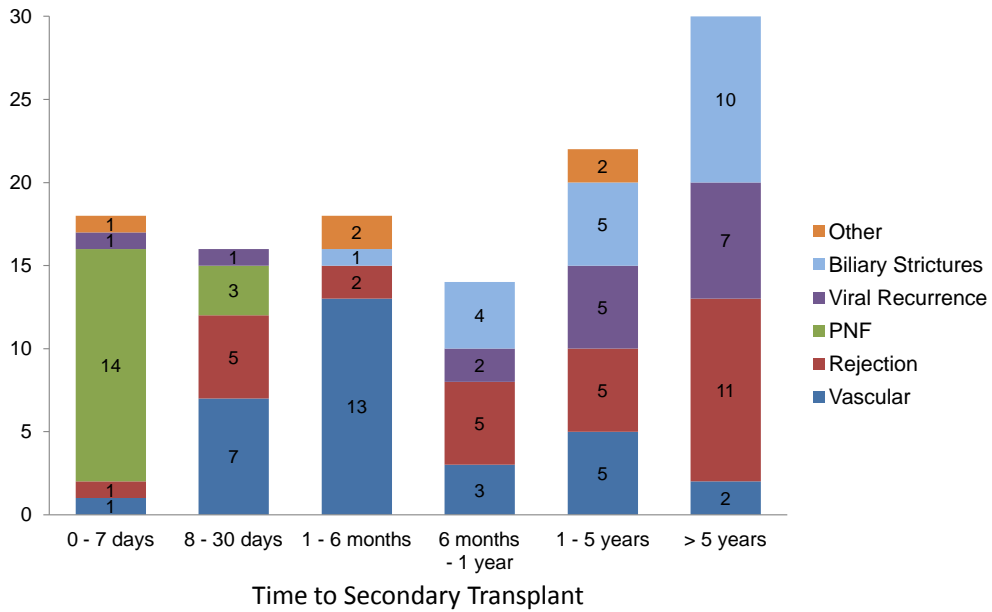
Fulminant Hepatic Failure As Primary Indication Treated by Liver Transplantation

Aetiology	No of Patients	No of Tx	Outcome	
			Alive	Dead
Idiopathic	51	56	32	19
Drug Induced	22	23	16	6
Wilson's Disease	14	16	12	2
Viral Hepatitis				
Hep B	30	31	19	11
Hep C	1	1	1	0
Hep A	3	3	0	3
Hep E	1	1	0	1
Autoimmune Hepatitis	3	4	1	2
Budd-Chiari	1	1	0	1
Other	9	9	8	1
Totals	135	145	89 (66% pts)	46 (34% pts)

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Data to 31 December 2014

Indication for Secondary Transplantation (n = 122)

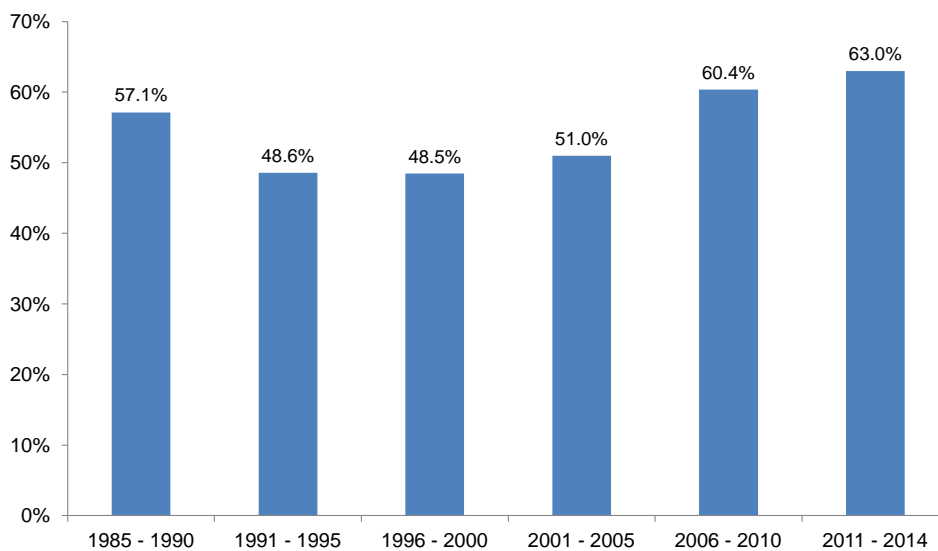


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Data to 31 December 2014

Primary non function (PNF) is the major indication for re-transplantation in the first 7 days. Rejection and vascular indications are prominent indications for re-transplantation in all other time periods.

Percentage of Children Transplanted for Biliary Atresia (n = 137; 55.5% of all Children)

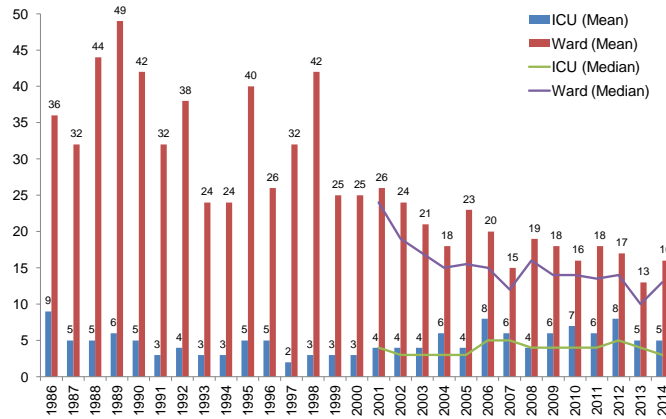


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Data to 31 December 2014

PERIOPERATIVE DATA

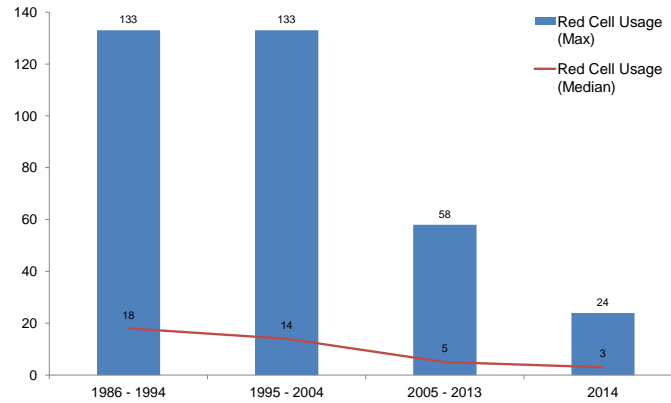
Hospital Stay (Mean & Median Days) Adults Only



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Data to 31 December 2014

Red Cell Usage (Units of Packed Cells)



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Data to 31 December 2014

Graft Ischaemic Time, Operation Duration And Red Cell Utilisation

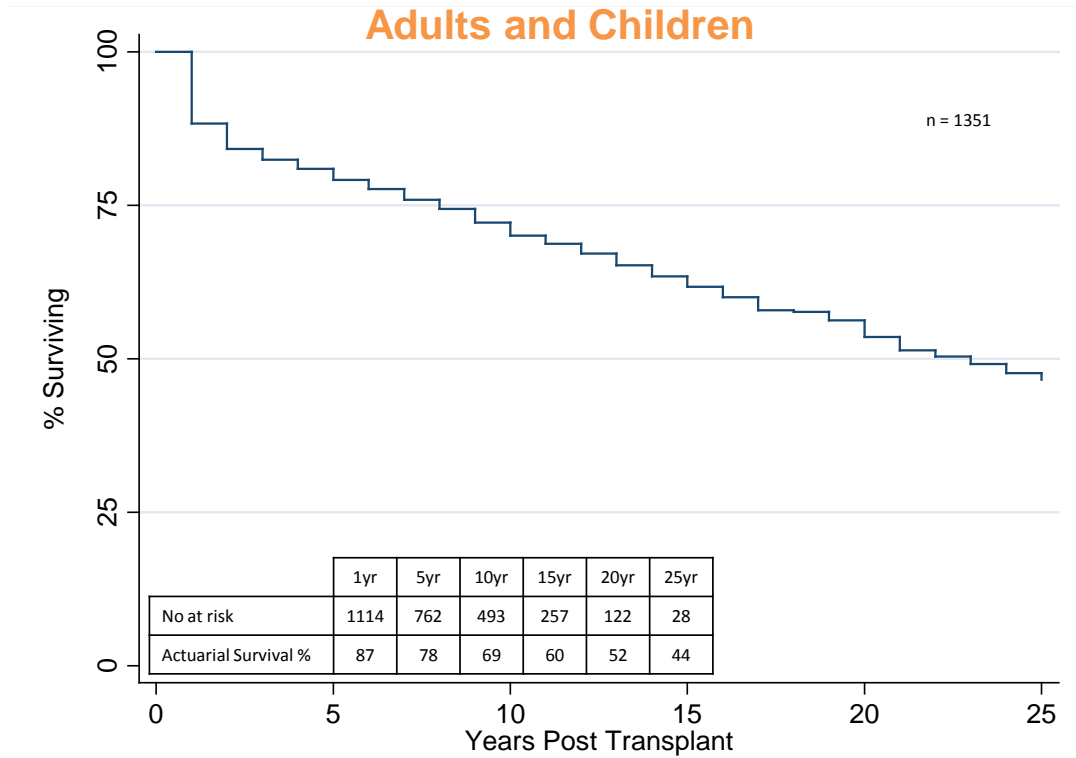
	1986 – 1994	1995 – 2004	2005 – 2014
Mean Graft Ischaemic Time	9 hr 12 min	9 hr 16 min	8 hr 27 min
Mean Operation Time	7 hr 51 min	7 hr 43 min	7 hr 29 min
No. Of Packed Cells Utilised	1 – 133 Mean = 20.6; Median = 16	0 – 133 Mean = 16.0; Median = 12	0 – 58 Mean = 6.8; Median = 5

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Data to 31 December 2014

OUTCOME DATA

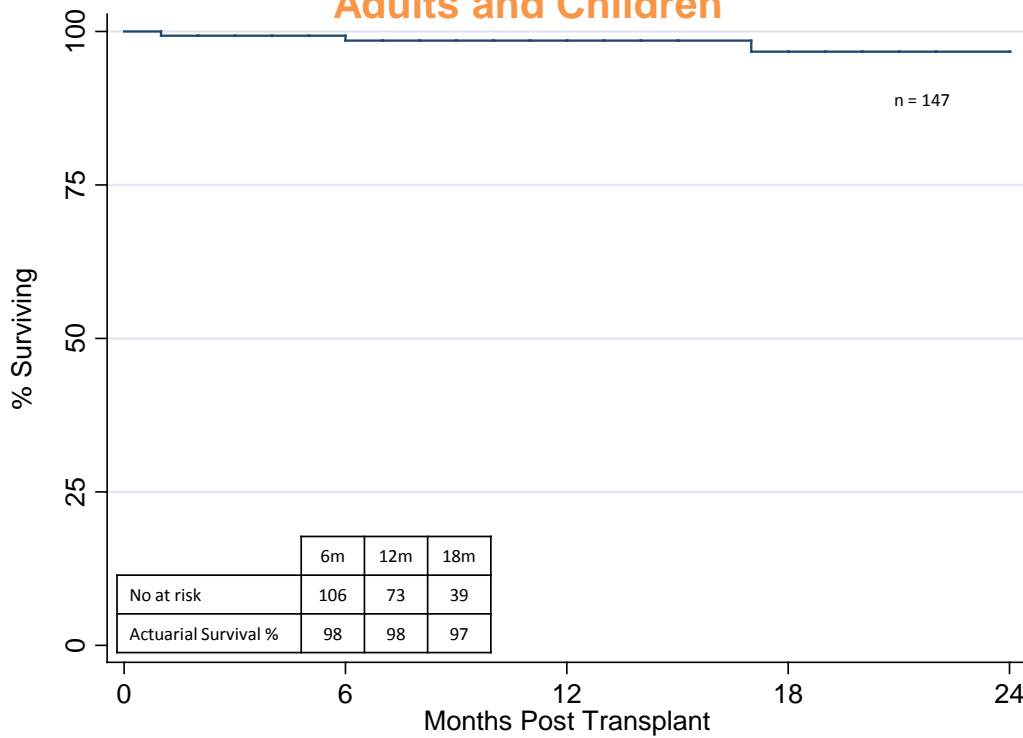
Overall Patient Survival 1986 - 2014 Adults and Children



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Data to 31 December 2014

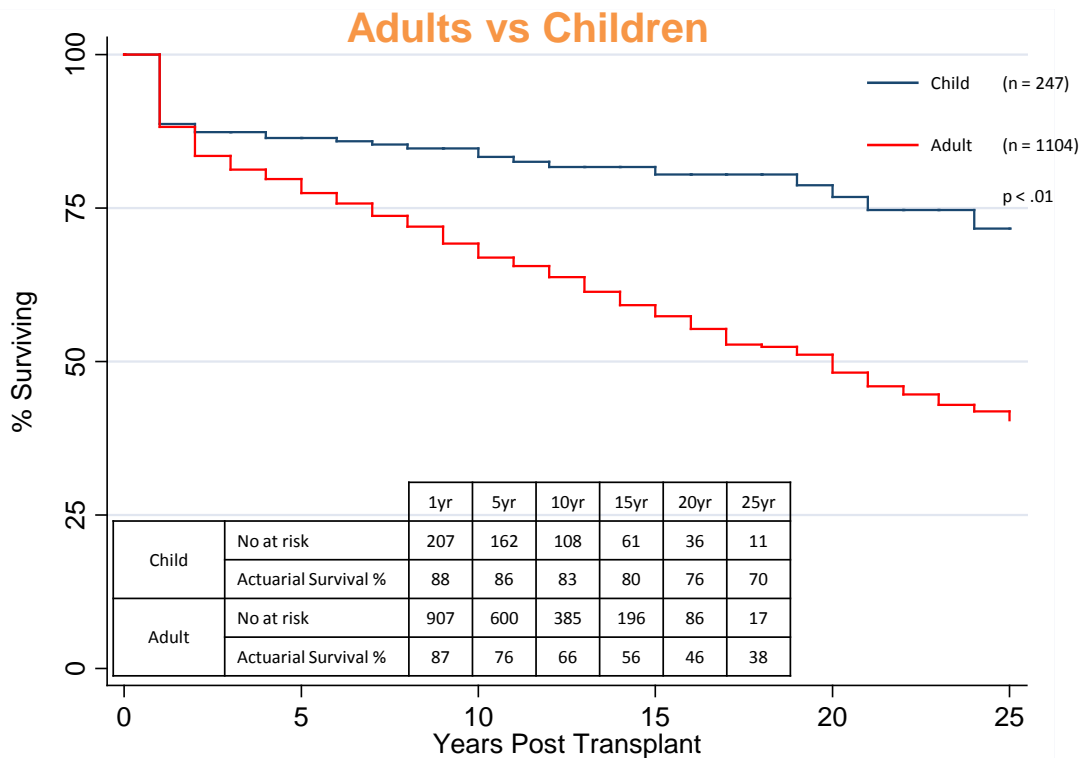
Patient Survival 2013 - 2014 Adults and Children



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Data to 31 December 2014

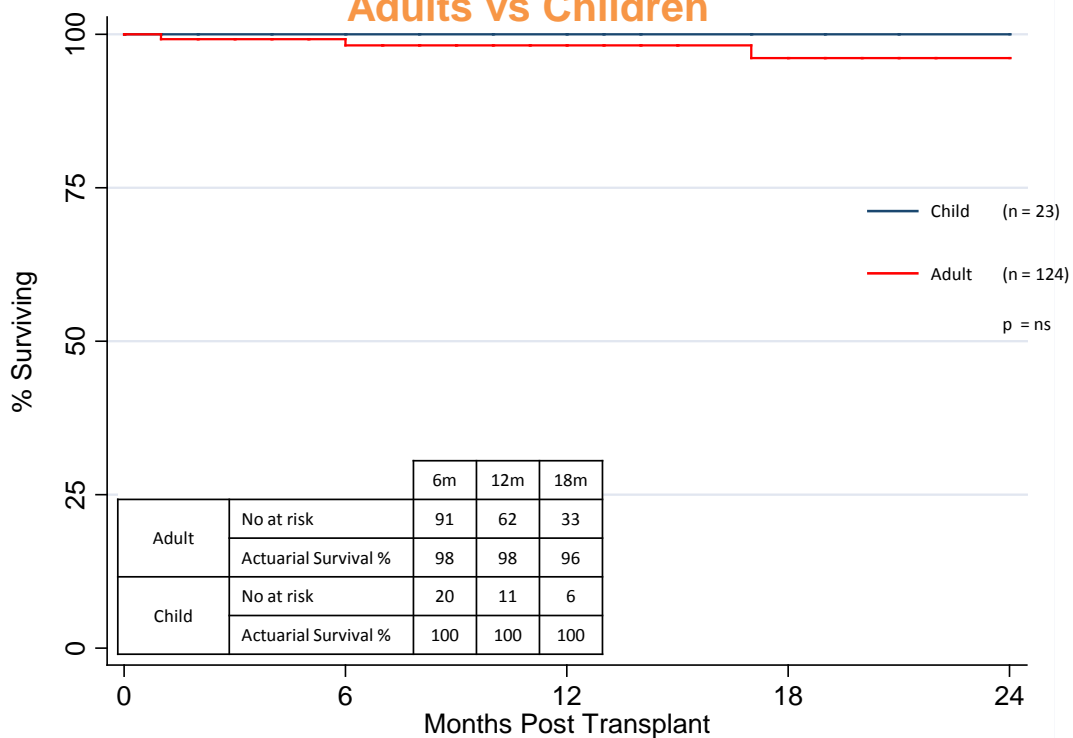
Patient Survival 1986 – 2014 Adults vs Children



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Data to 31 December 2014

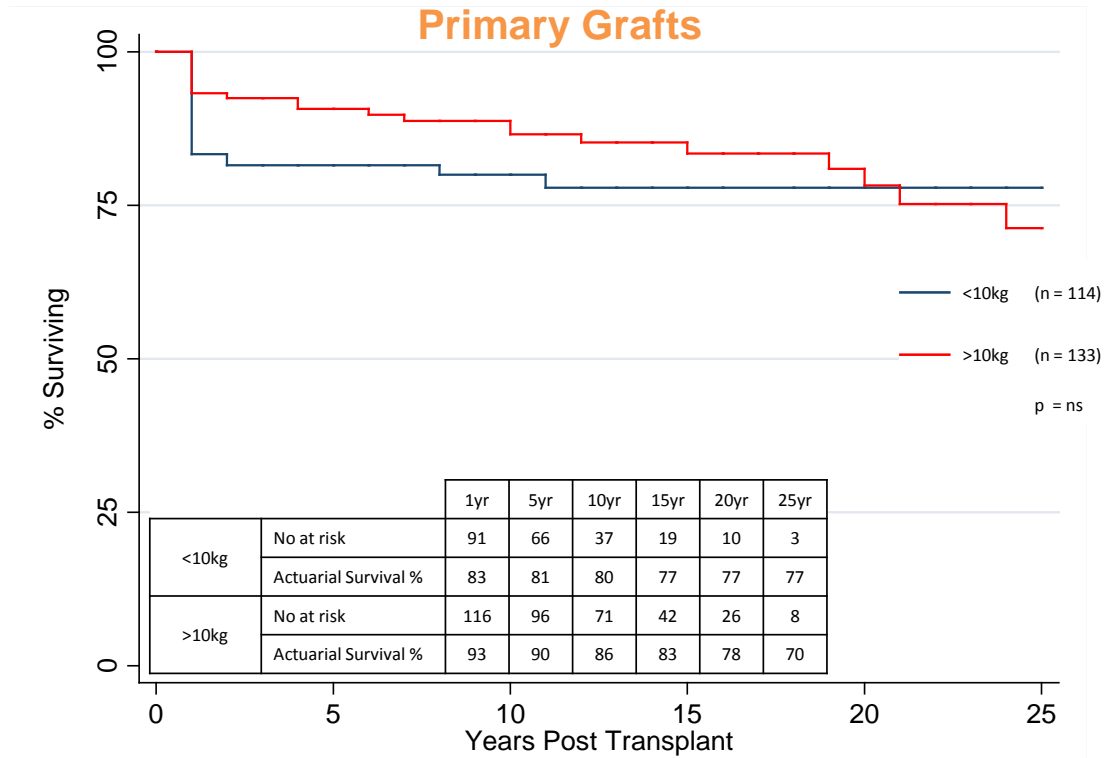
Patient Survival 2013 - 2014 Adults vs Children



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Data to 31 December 2014

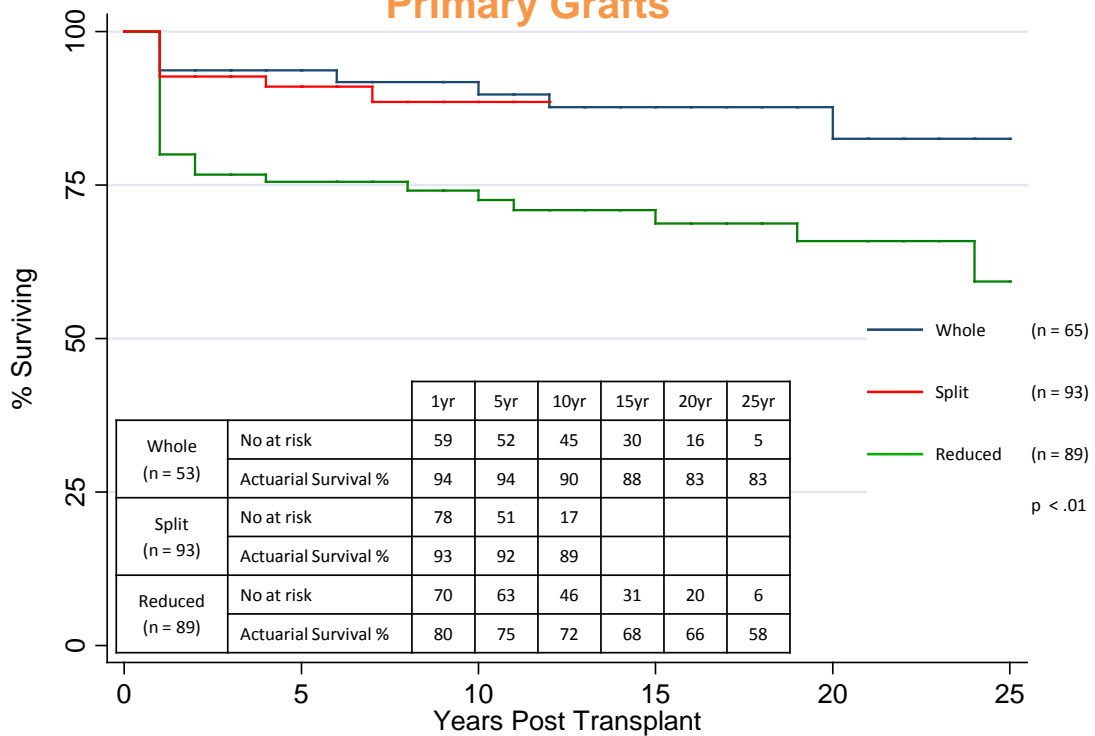
Children – Weight vs Outcome Primary Grafts



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Data to 31 December 2014

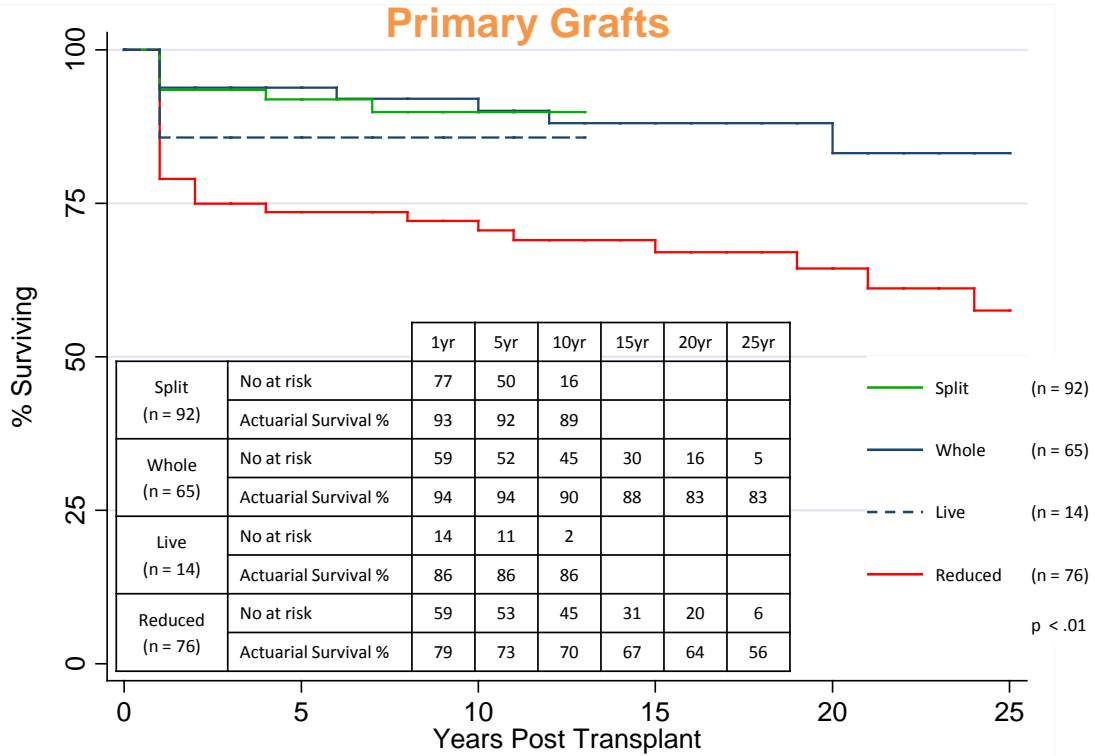
Children – Type of Transplant vs Outcome Primary Grafts



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Data to 31 December 2014

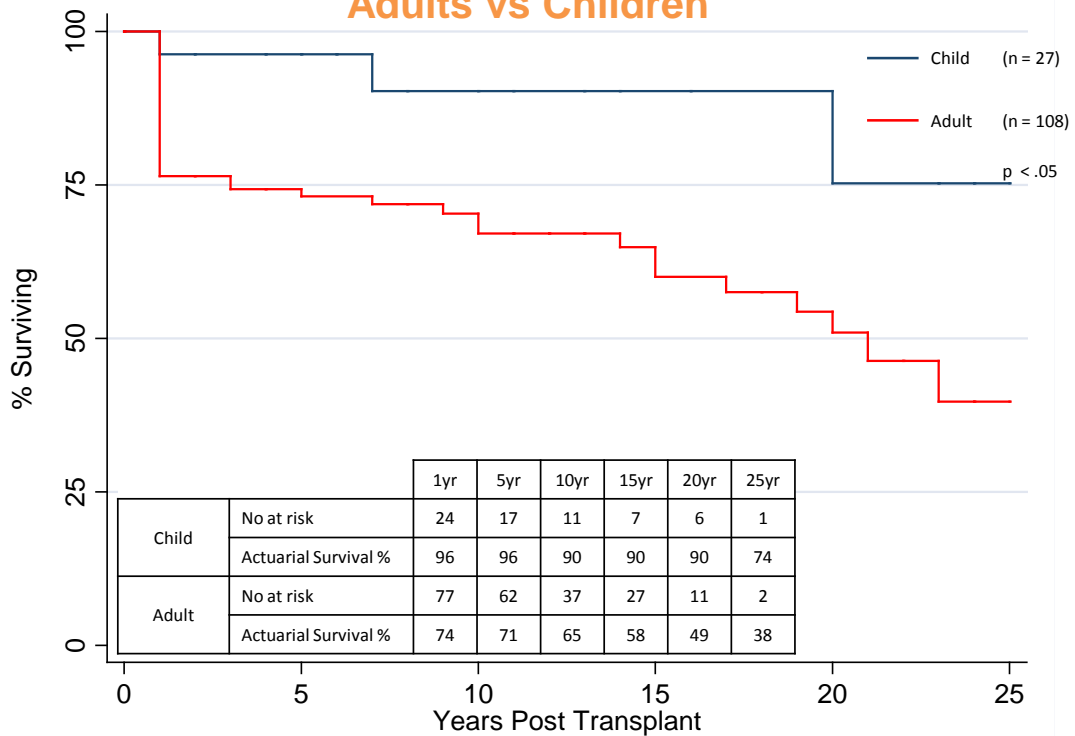
Children – Donor Type Primary Grafts



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Data to 31 December 2014

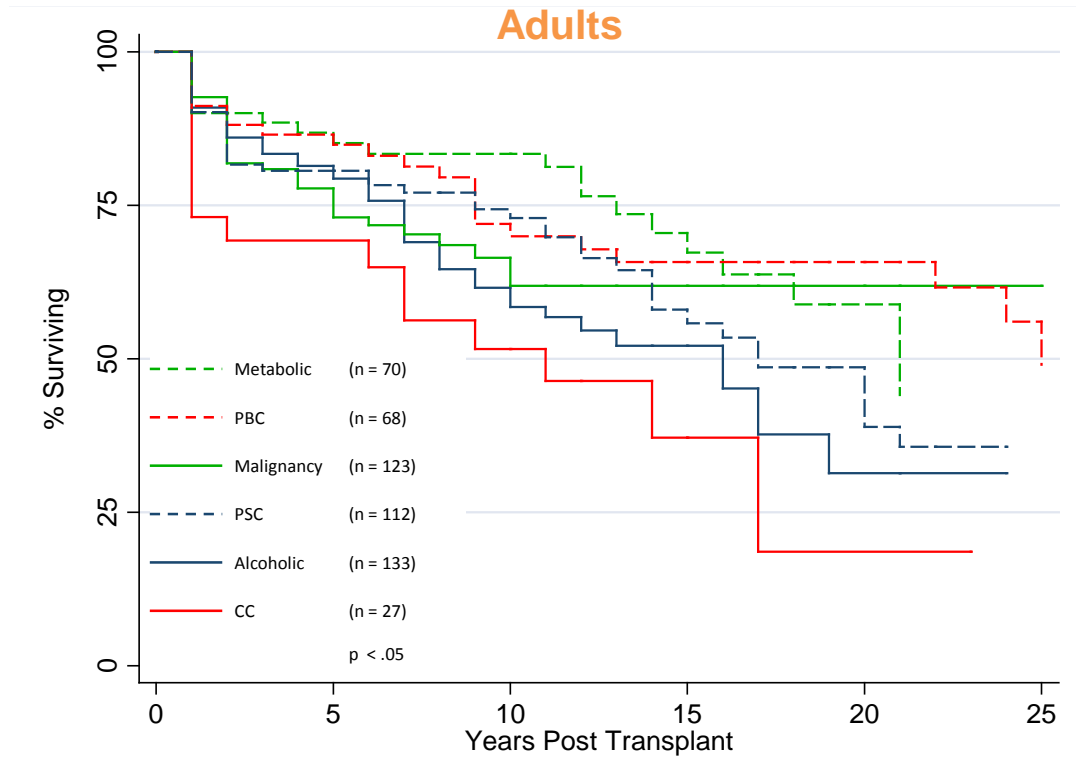
Fulminant Disease vs Outcome Adults vs Children



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Data to 31 December 2014

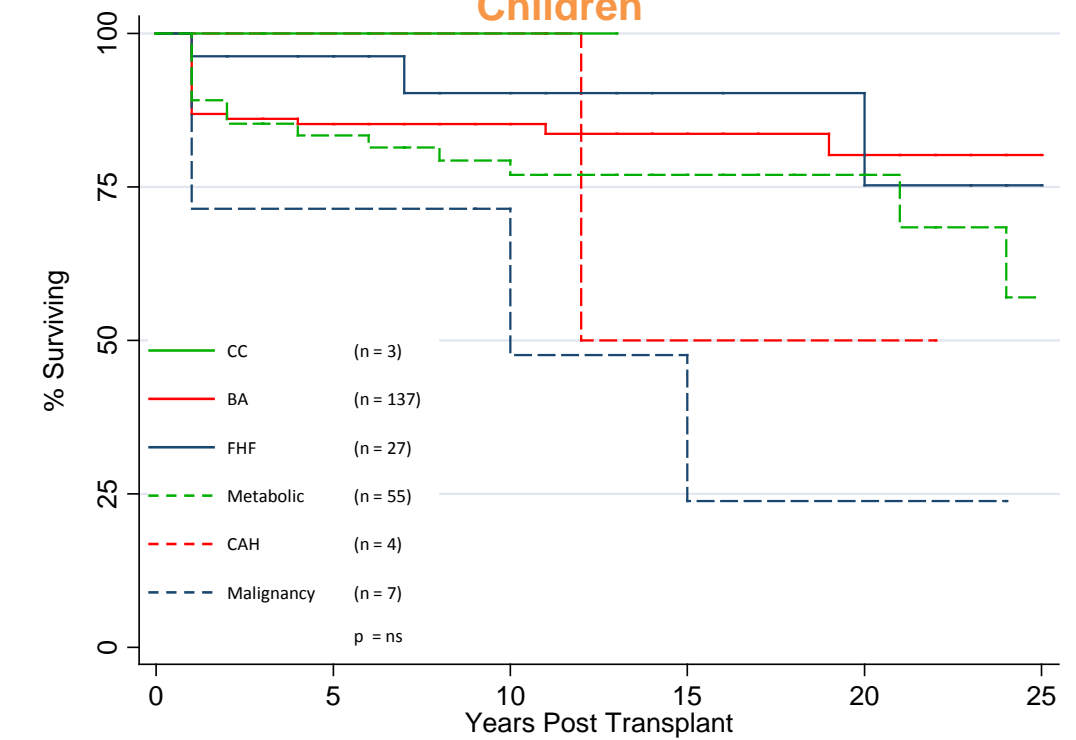
Primary Disease vs Outcome Adults



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Data to 31 December 2014

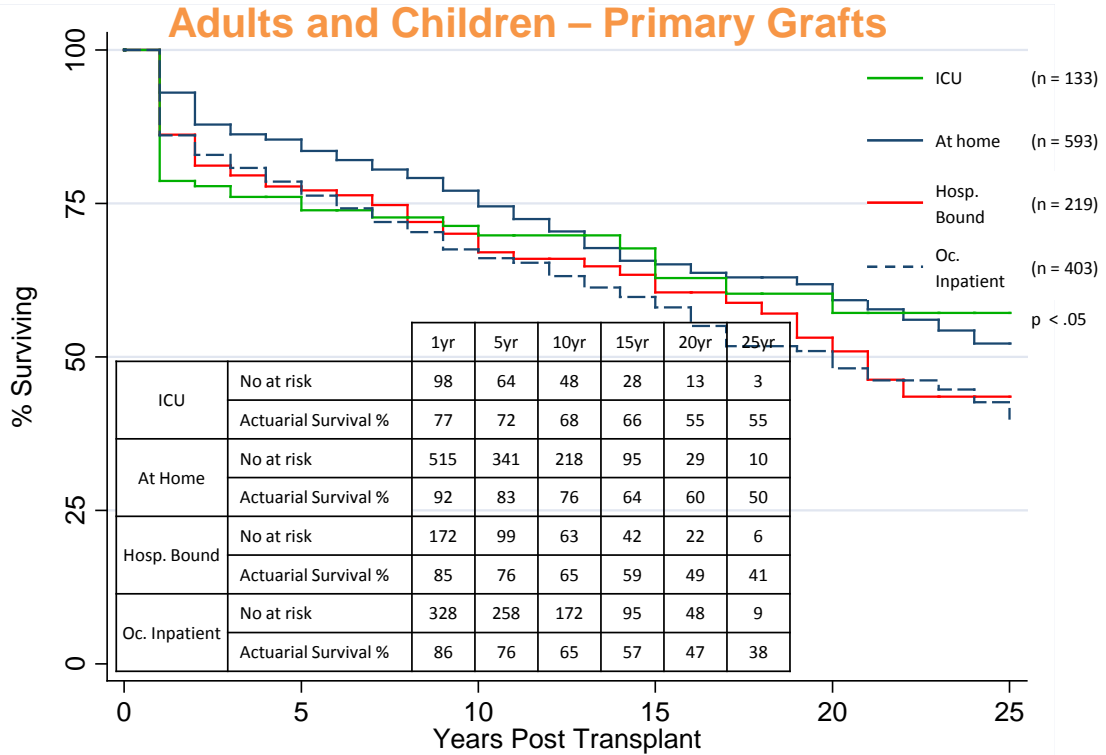
Primary Disease vs Outcome Children



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Data to 31 December 2014

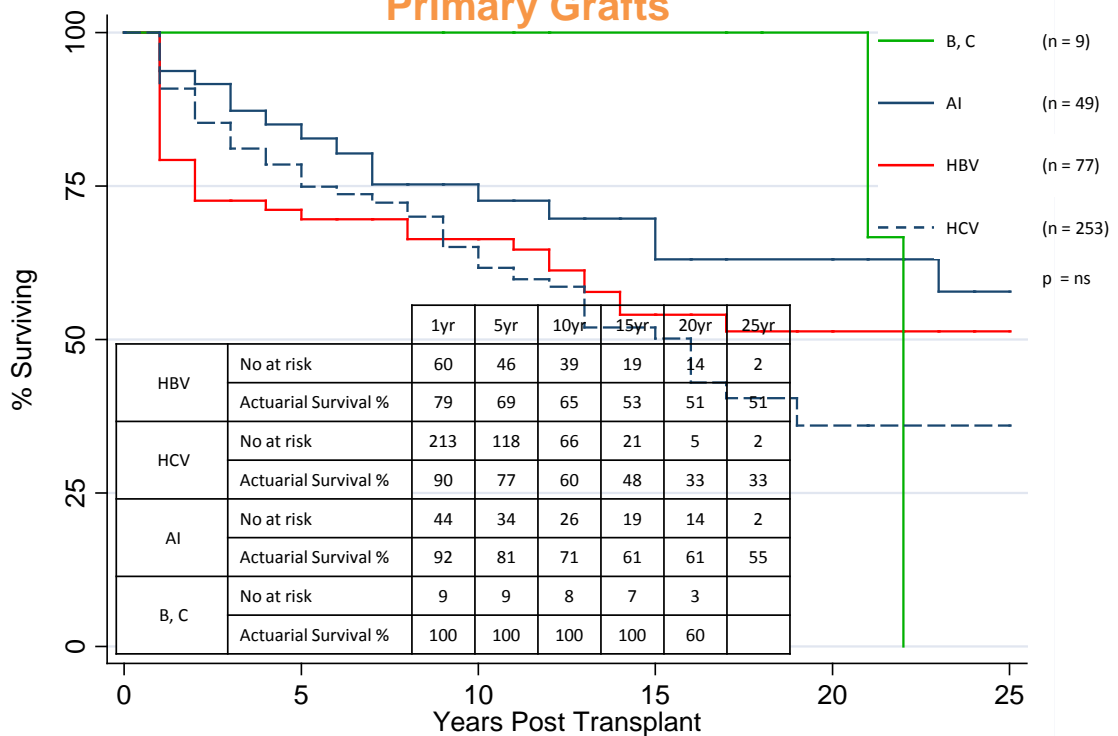
Status vs Outcome Adults and Children – Primary Grafts



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Data to 31 December 2014

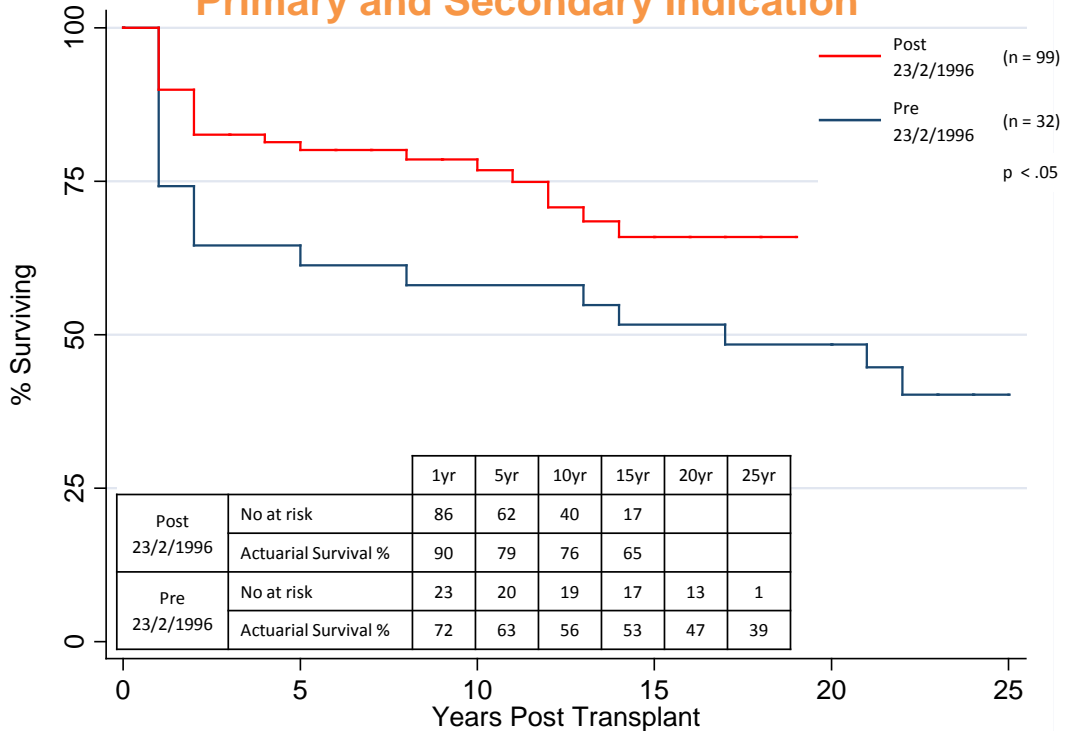
Chronic Viral, Autoimmune Disease vs Outcome Primary Grafts



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Data to 31 December 2014

Chronic HBV Before and After Prophylaxis Protocol* Primary and Secondary Indication

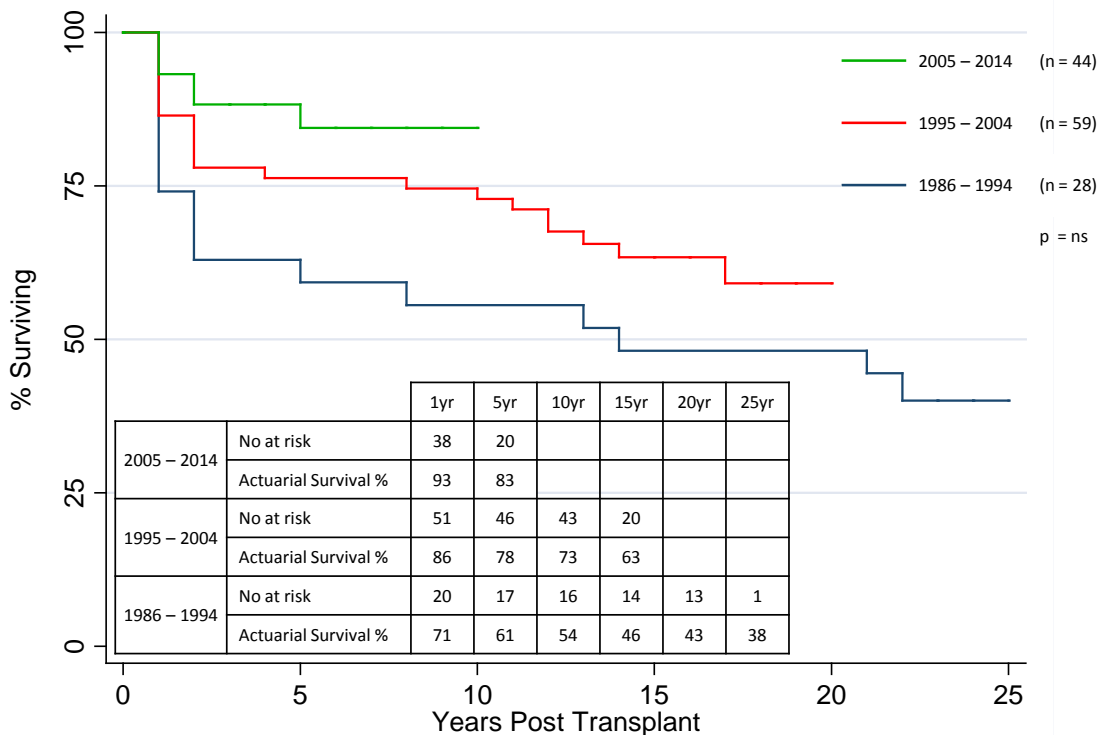


* Oral nucleos(t)ide therapy + low dose monthly IMI HBIG

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Data to 31 December 2014

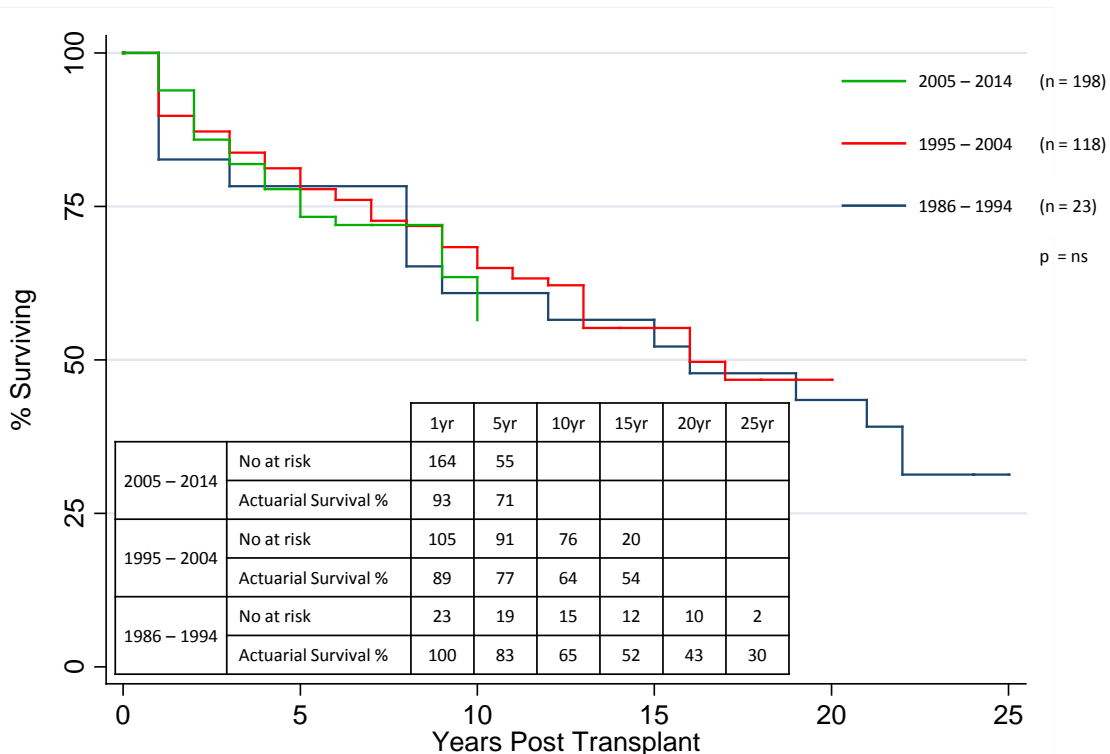
Chronic HBV (Primary and Secondary) vs Era



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Data to 31 December 2014

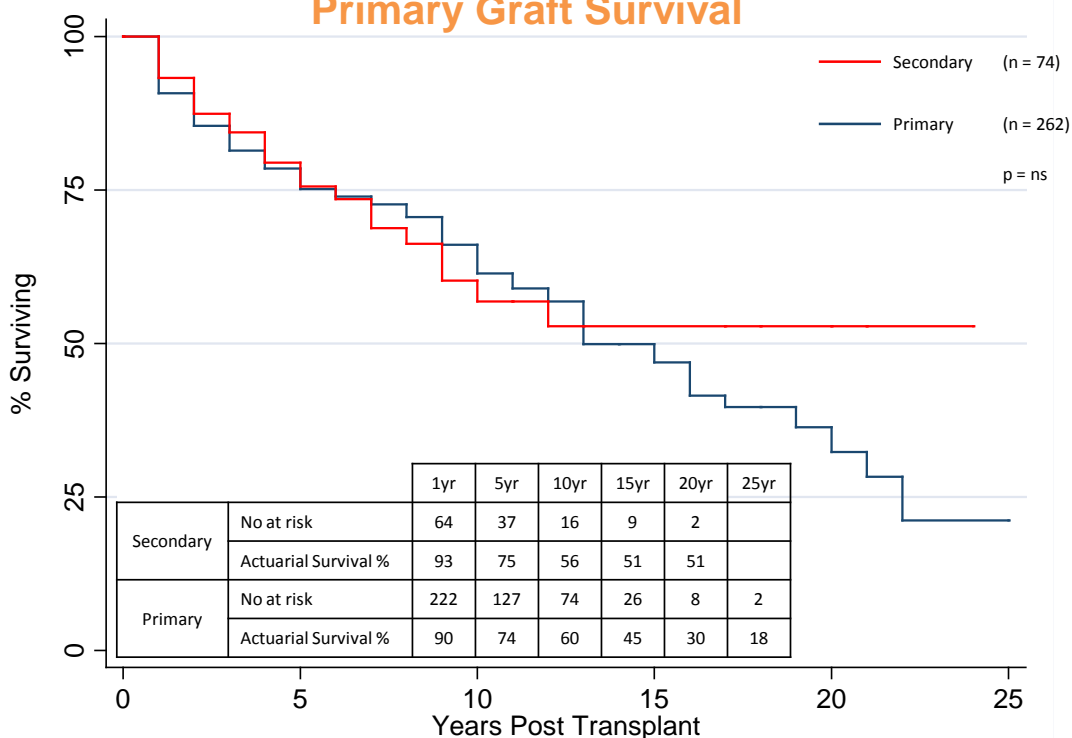
Chronic HCV (Primary and Secondary) vs Era



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Data to 31 December 2014

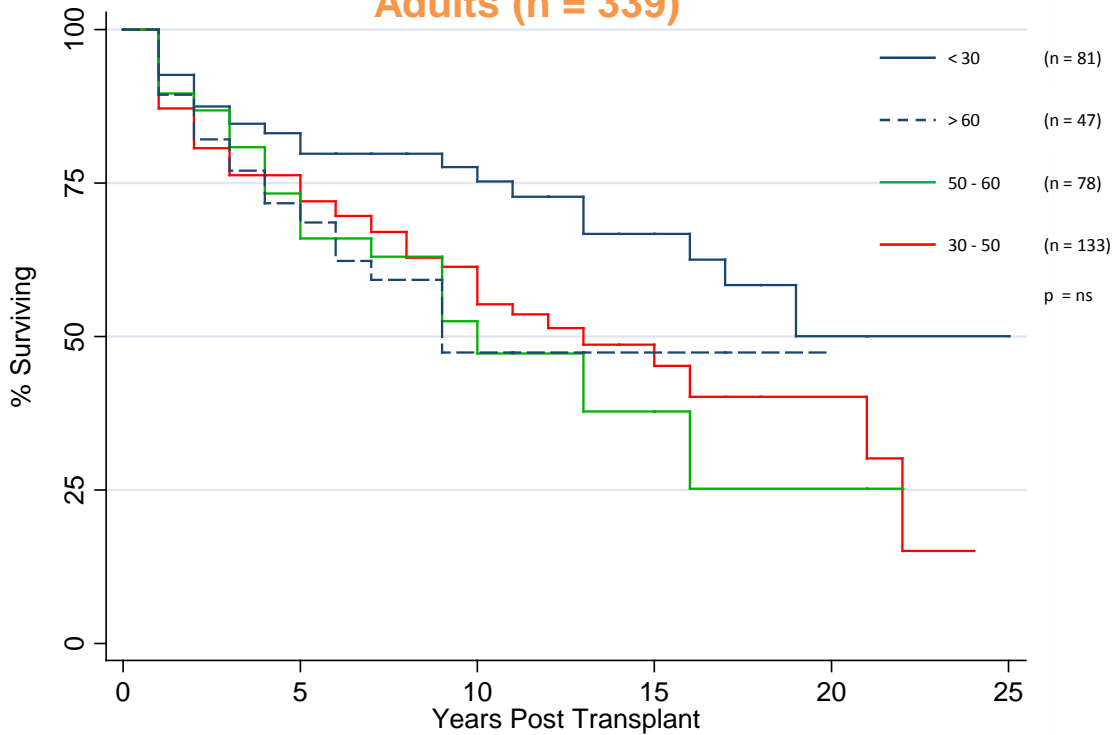
Chronic HCV Primary vs Secondary Indication Primary Graft Survival



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Data to 31 December 2014

HCV vs Donor Age vs Primary Graft Outcome Adults (n = 339)



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Data to 31 December 2014

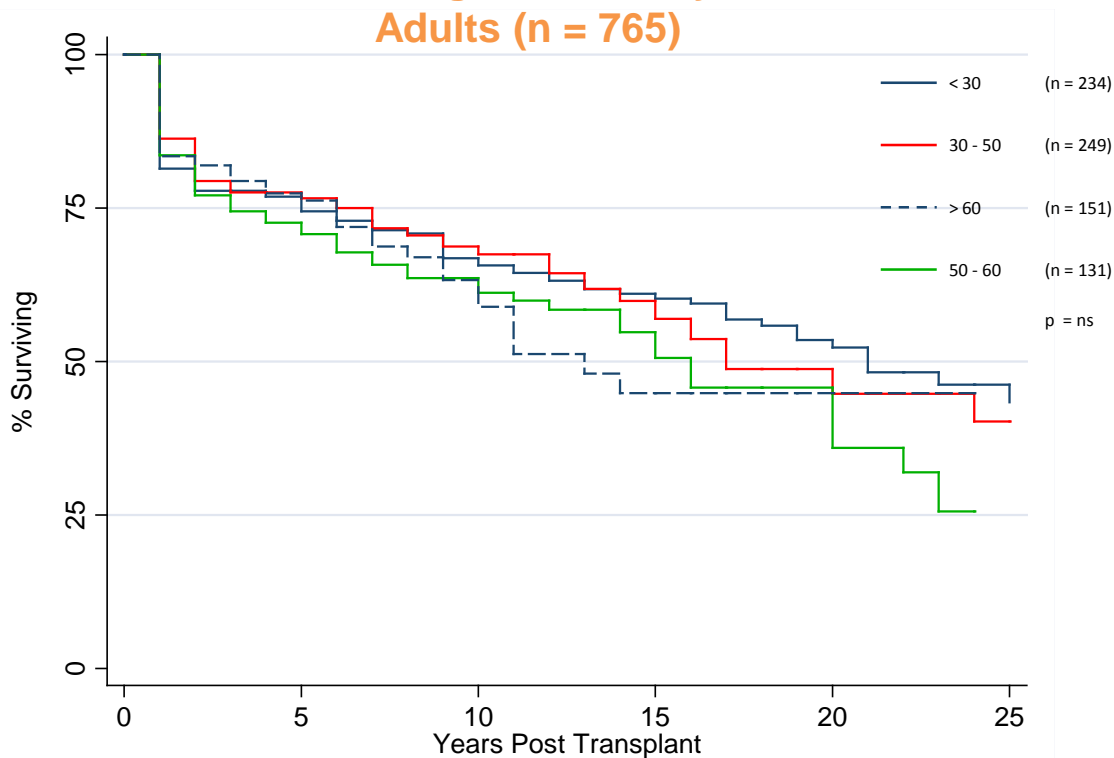
HCV vs Donor Age vs Primary Graft Outcome Adults (n = 339)

		1yr	5yr	10yr	15yr	20yr	25yr
>60 (n = 47)	No at risk	37	22	11	3		
	Actuarial Survival %	88	67	47	47		
<30 (n = 81)	No at risk	72	45	30	16	4	2
	Actuarial Survival %	92	79	74	65	47	47
50 - 60 (n = 78)	No at risk	64	27	8	3	2	
	Actuarial Survival %	88	64	45	36	24	
30 - 50 (n = 133)	No at risk	108	61	34	9	4	
	Actuarial Survival %	86	71	54	43	38	

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Data to 31 December 2014

Non HCV vs Donor Age vs Primary Graft Outcome Adults (n = 765)



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Data to 31 December 2014

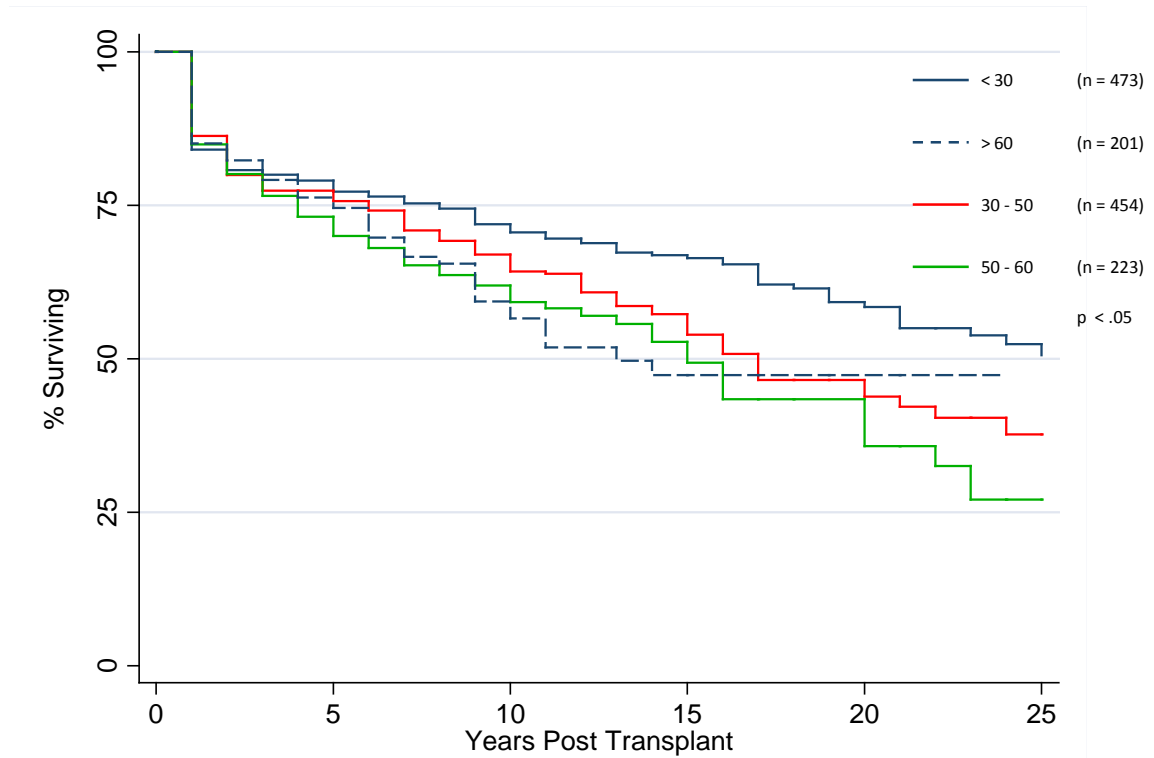
Non HCV vs Donor Age vs Primary Graft Outcome Adults (n = 765)

		1yr	5yr	10yr	15yr	20yr	25yr
<30 (n = 234)	No at risk	182	148	108	73	39	9
	Actuarial Survival %	80	73	64	59	51	41
30 - 50 (n = 249)	No at risk	200	145	99	52	18	5
	Actuarial Survival %	86	76	66	56	43	39
>60 (n = 151)	No at risk	113	53	23	10	3	
	Actuarial Survival %	83	75	57	43	43	
50 - 60 (n = 131)	No at risk	102	71	48	21	14	
	Actuarial Survival %	81	69	59	48	43	

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Data to 31 December 2014

Donor Age vs Primary Graft Outcome



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Data to 31 December 2014

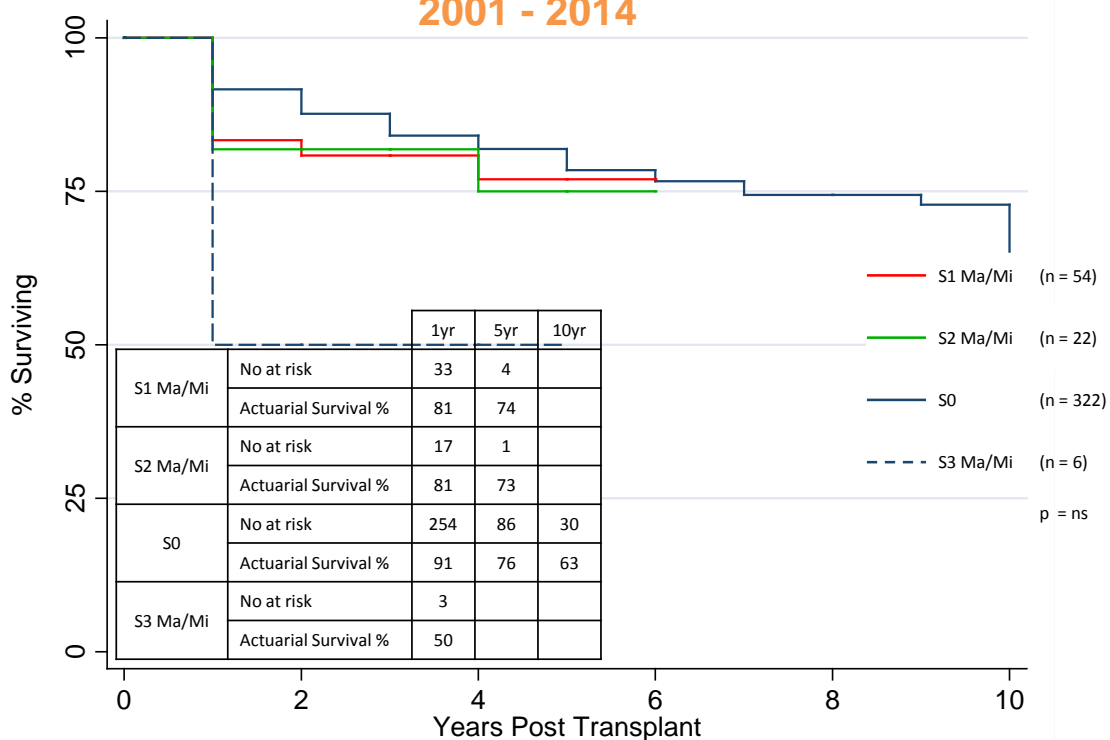
Donor Age vs Primary Graft Outcome

		1yr	5yr	10yr	15yr	20yr	25yr
<30 (n = 473)	No at risk	377	290	206	131	68	18
	Actuarial Survival %	83	76	70	65	57	49
30 - 50 (n = 454)	No at risk	366	246	152	69	27	7
	Actuarial Survival %	86	75	63	52	42	36
50 - 60 (n = 223)	No at risk	176	107	59	25	12	
	Actuarial Survival %	83	68	60	47	33	
>60 (n = 201)	No at risk	153	77	36	15	4	
	Actuarial Survival %	84	73	55	45	45	

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Data to 31 December 2014

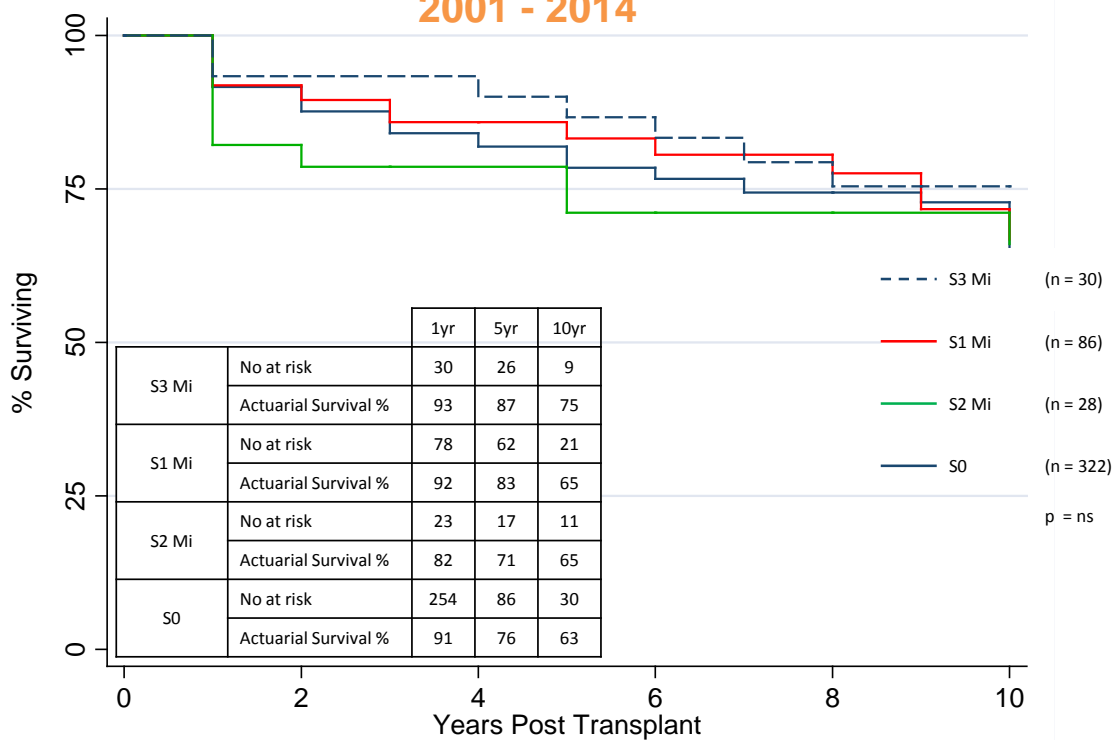
Macro Steatosis vs Primary Graft Outcome (Adults) 2001 - 2014



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Data to 31 December 2014

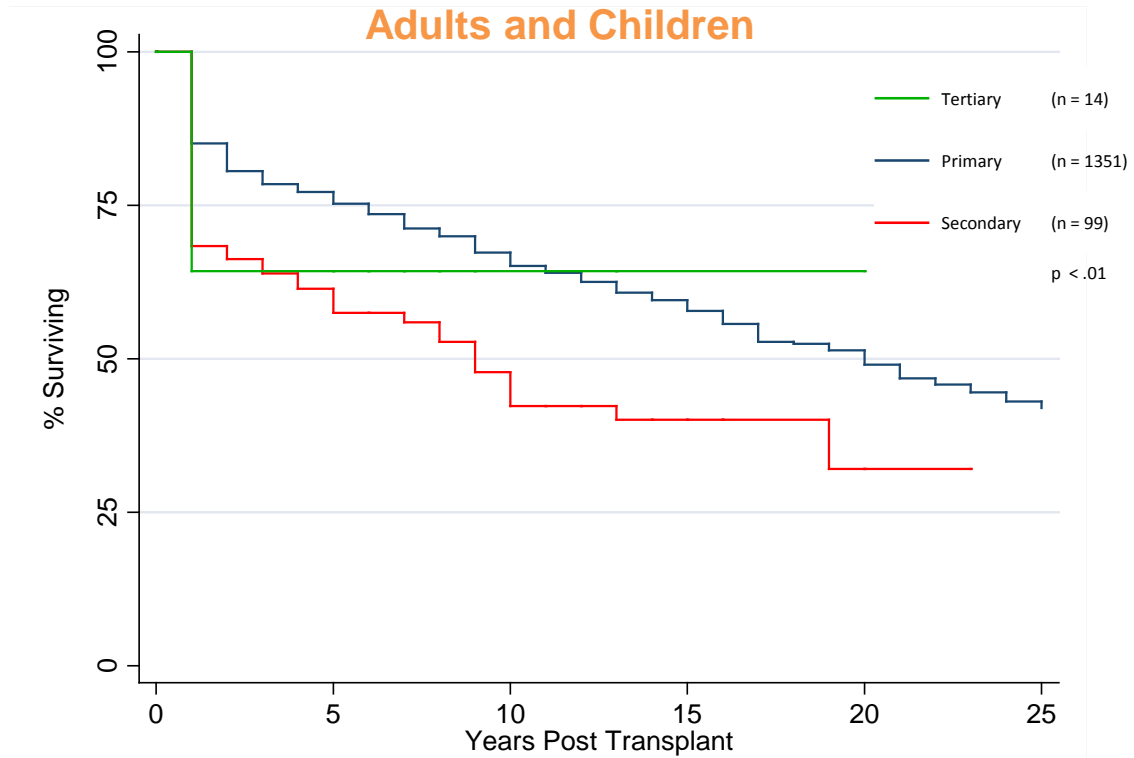
Micro Steatosis vs Primary Graft Outcome (Adults) 2001 - 2014



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Data to 31 December 2014

Graft Survival by Graft No Adults and Children



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Data to 31 December 2014

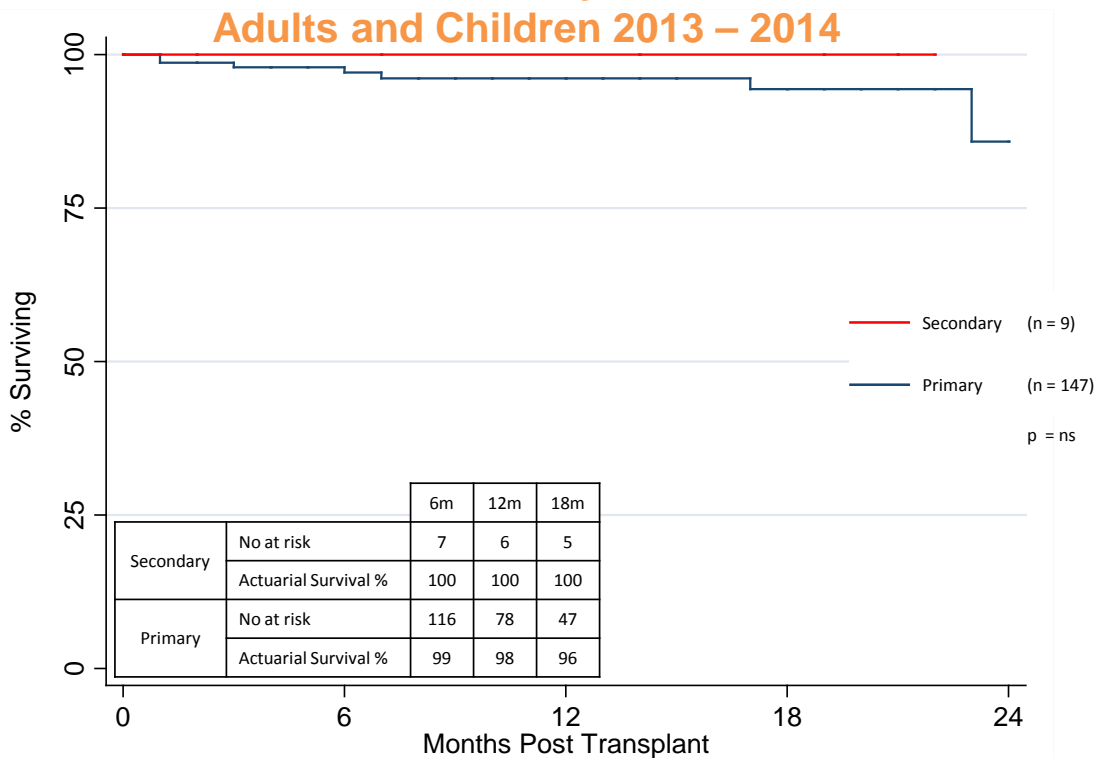
Graft Survival by Graft No Adults and Children

		1yr	5yr	10yr	15yr	20yr	25yr
Tertiary (n = 14)	No at risk	14	8	3	2		
	Actuarial Survival %	64	64	64	64		
Primary (n = 1351)	No at risk	1072	720	452	240	111	25
	Actuarial Survival %	84	76	64	56	47	41
Secondary (n = 99)	No at risk	64	41	22	12	6	1
	Actuarial Survival %	67	56	41	39	30	30

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Data to 31 December 2014

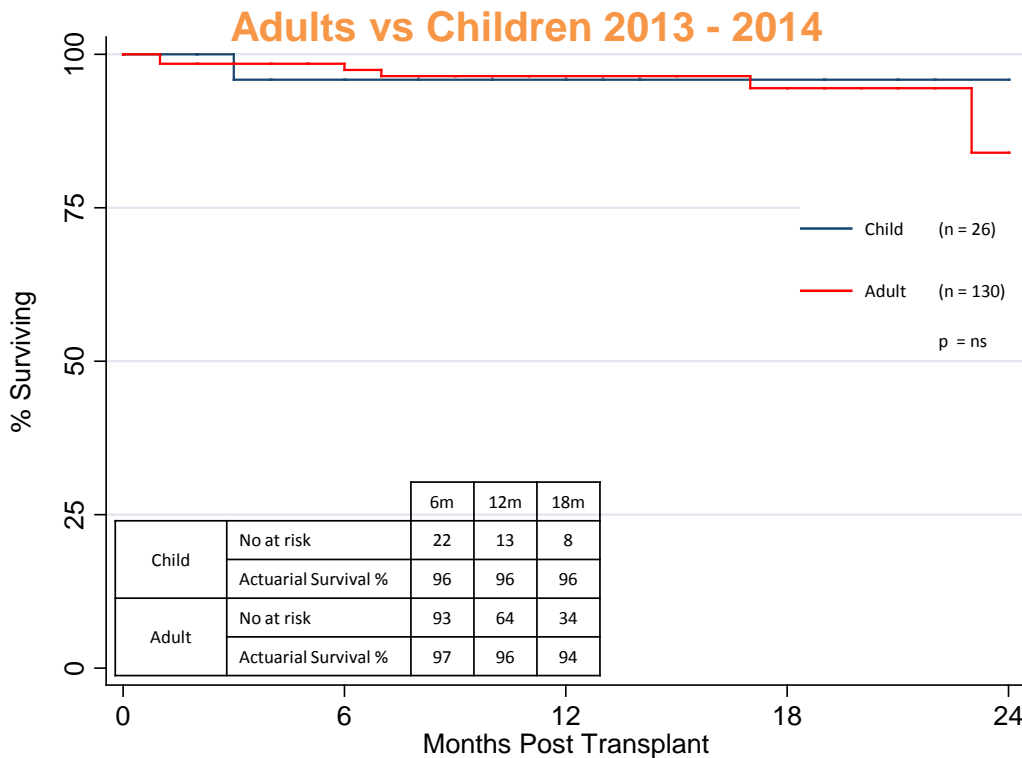
Graft Survival by Graft No Adults and Children 2013 – 2014



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Data to 31 December 2014

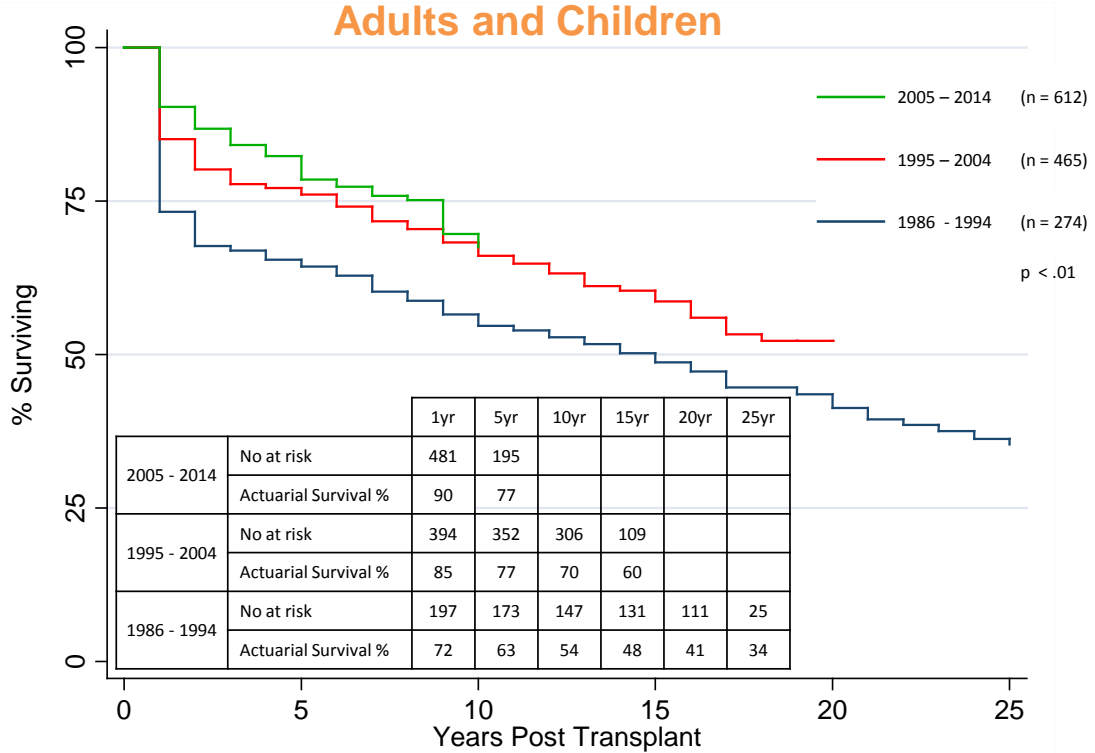
Graft Survival Adults vs Children 2013 - 2014



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Data to 31 December 2014

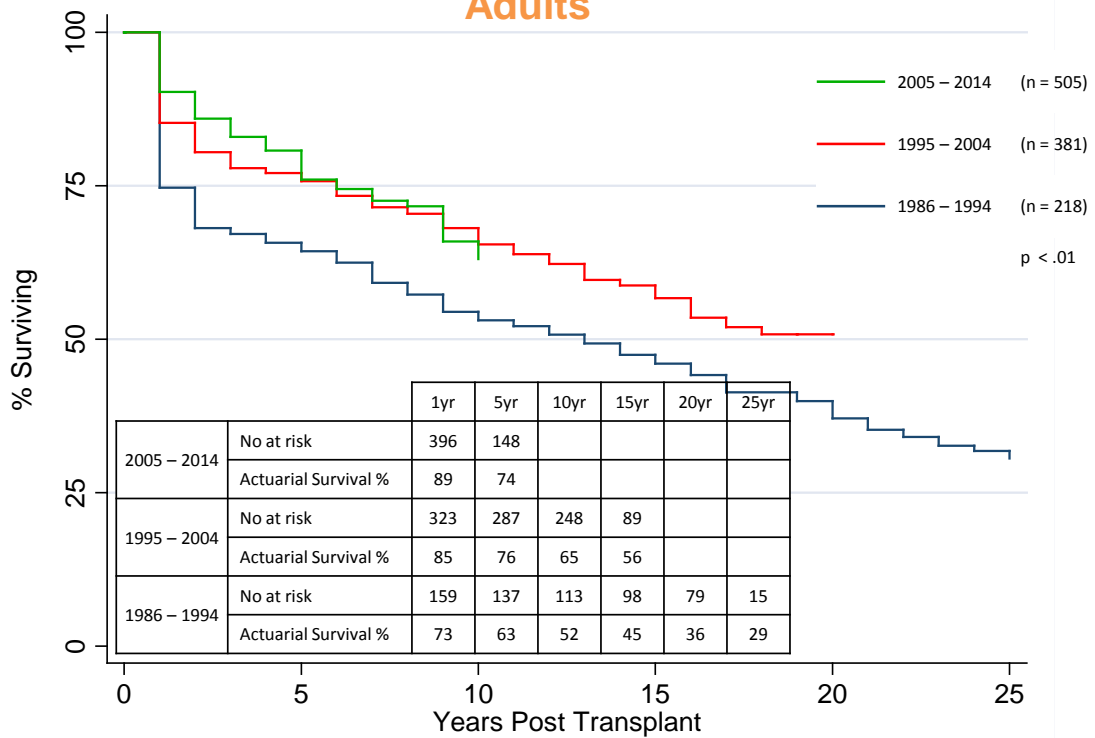
Primary Graft Survival by Era Adults and Children



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Data to 31 December 2014

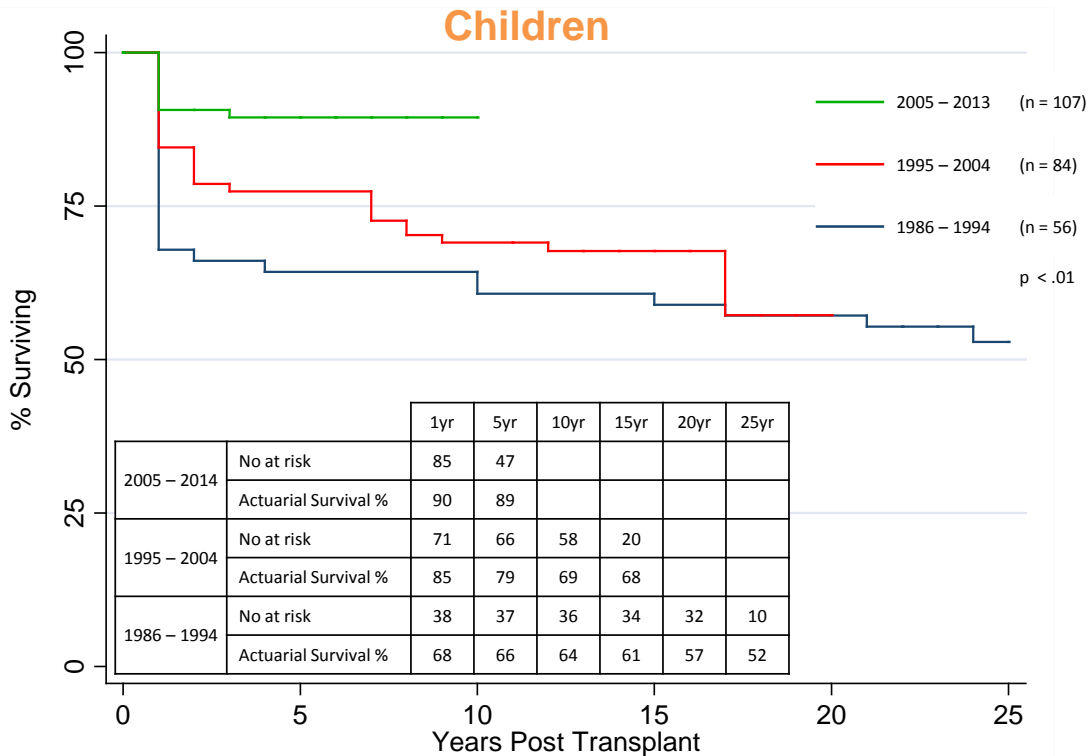
Primary Graft Survival by Era Adults



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Data to 31 December 2014

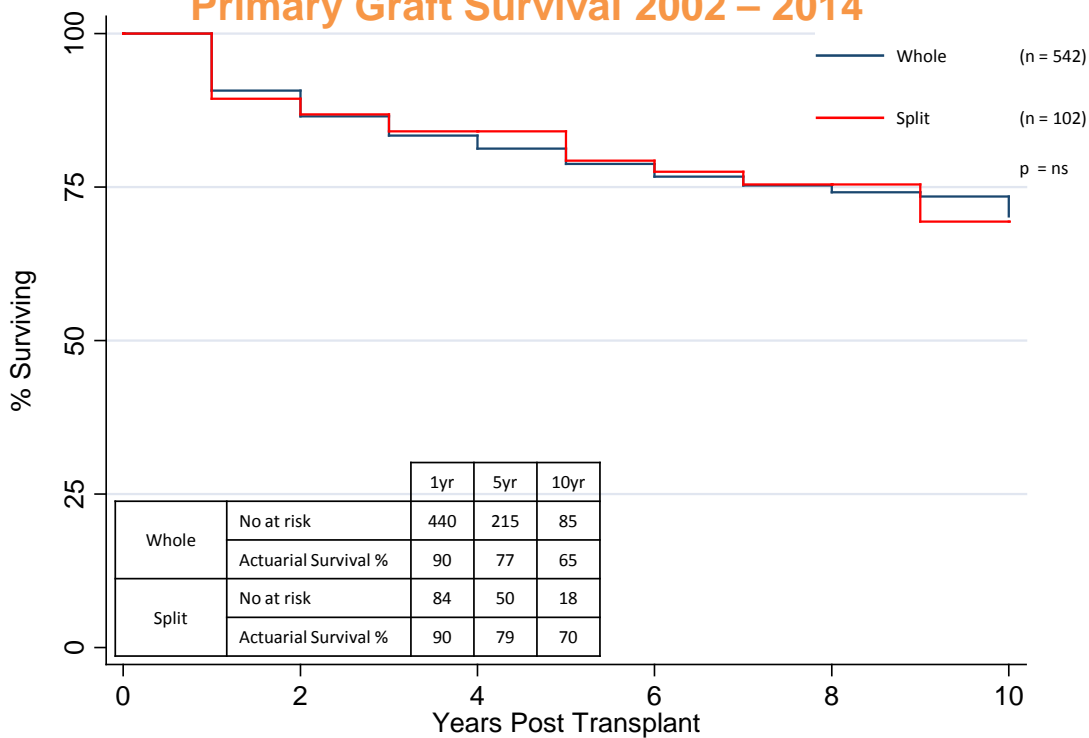
Primary Graft Survival by Era Children



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Data to 31 December 2014

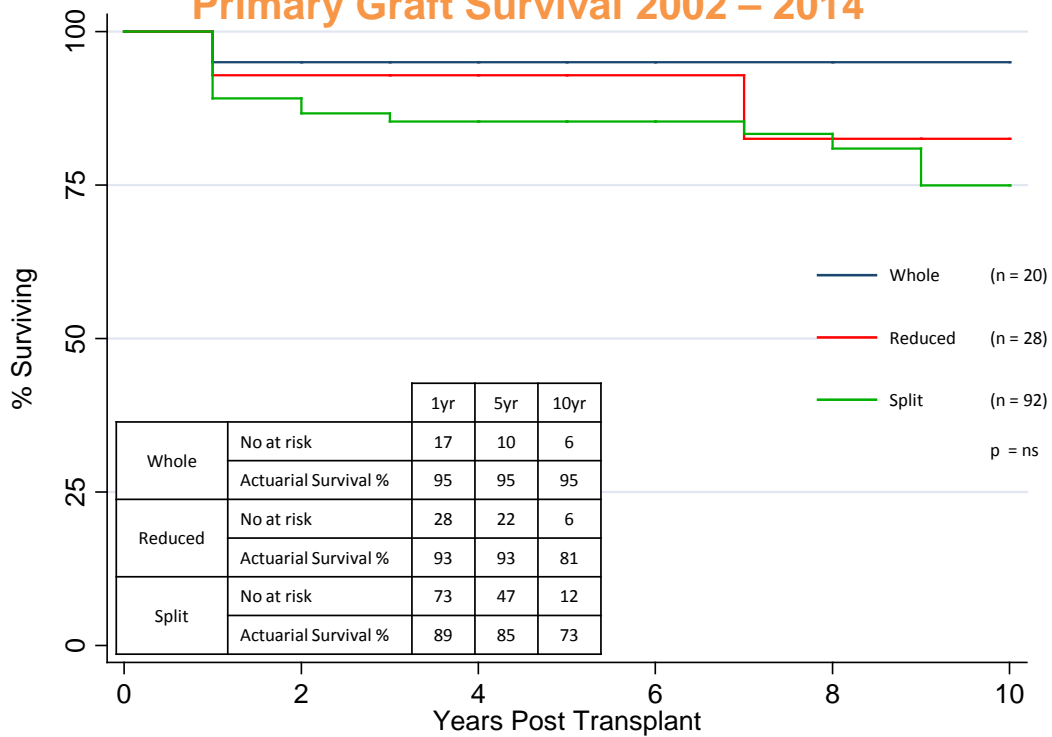
Split vs Whole Grafts (Adults) Primary Graft Survival 2002 – 2014



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Data to 31 December 2014

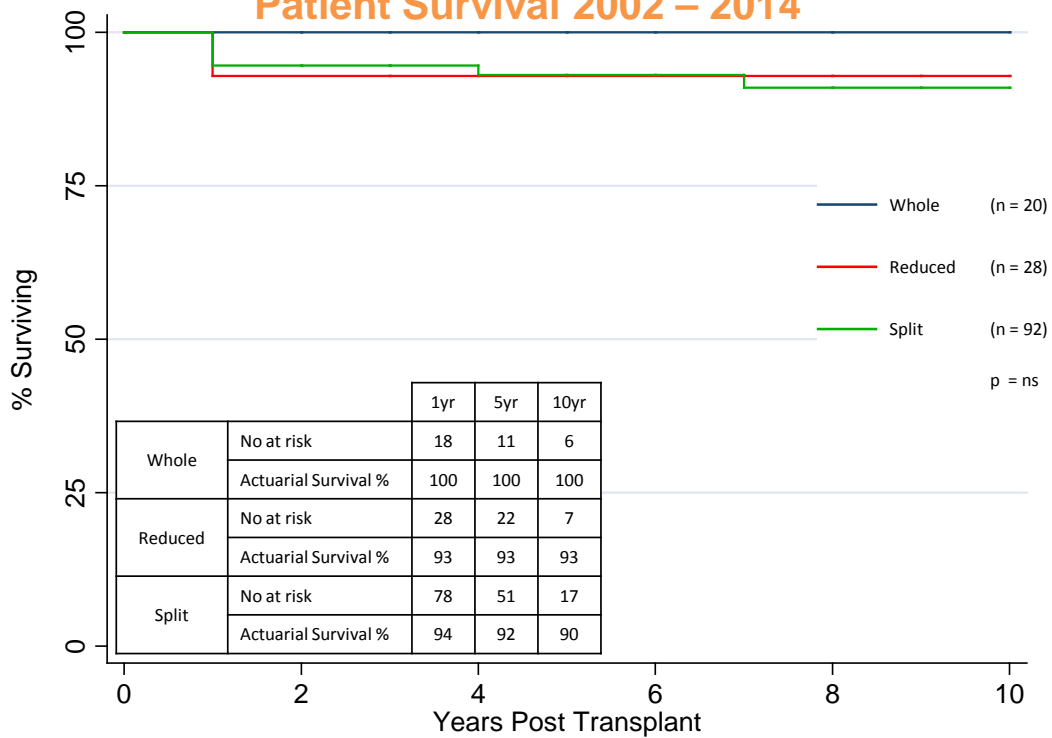
Split vs Reduced vs Whole Grafts (Children) Primary Graft Survival 2002 – 2014



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Data to 31 December 2014

Split vs Reduced vs Whole Grafts (Children) Patient Survival 2002 – 2014



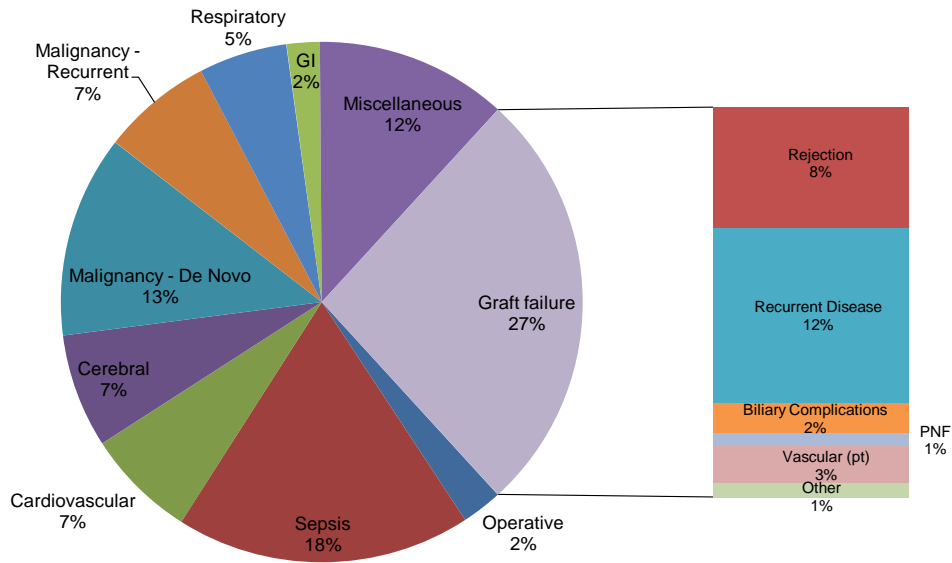
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Data to 31 December 2014

Cause of Death

Graft Failure	116 (26.5%)
Rejection: Chronic	26
Rejection: Acute	10
Recurrent disease	
Hepatitis C	36
Hepatitis B	10
Vascular	11
Biliary Complications	9
PNF	4
NASH	2
Other	8
Sepsis	80 (18.3%)
Malignancy	85 (19.4%)
Recurrent disease	30
De Novo	54
Transferred from donor	1
Cerebral	31 (7.1%)
Cardiovascular	30 (6.8%)
Respiratory	24 (5.5%)
Multi-organ Failure	11 (2.5%)
Operative	11 (2.5%)
Vascular	11 (2.5%)
Gastrointestinal	9 (2.1%)
GVHD	4 (0.9%)
Renal Failure	4 (0.9%)
Other	22 (5.0%)
TOTAL	438 (32.4% of all patients)

Cause of Death (n = 438)



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Data to 31 December 2014

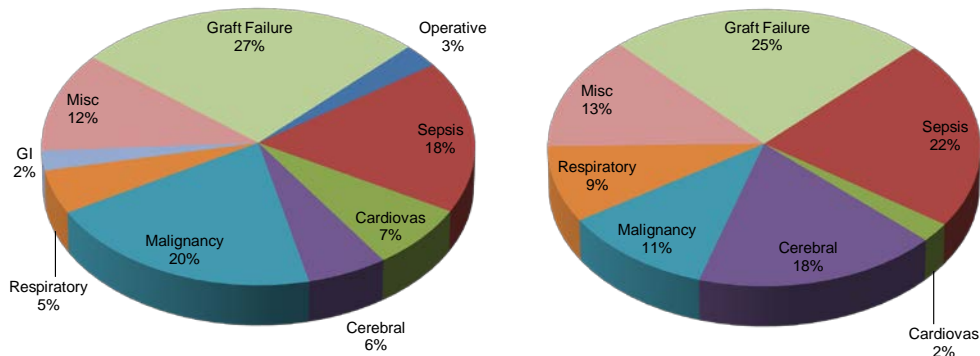
438 patients, or 32.4% of all patients transplanted, have died. Of these, 80 (18.3%) have died due to sepsis and 116 (26.5%) from graft failure.

Of the 116 cases of death due to graft failure, 36 (31.0%) patients lost grafts due to rejection, 52 (44.8%) from recurrent disease and 4 (3.4%) from primary non function (PNF).

Cause of Death (n = 438)

Adults (n = 393)

Children (n = 45)

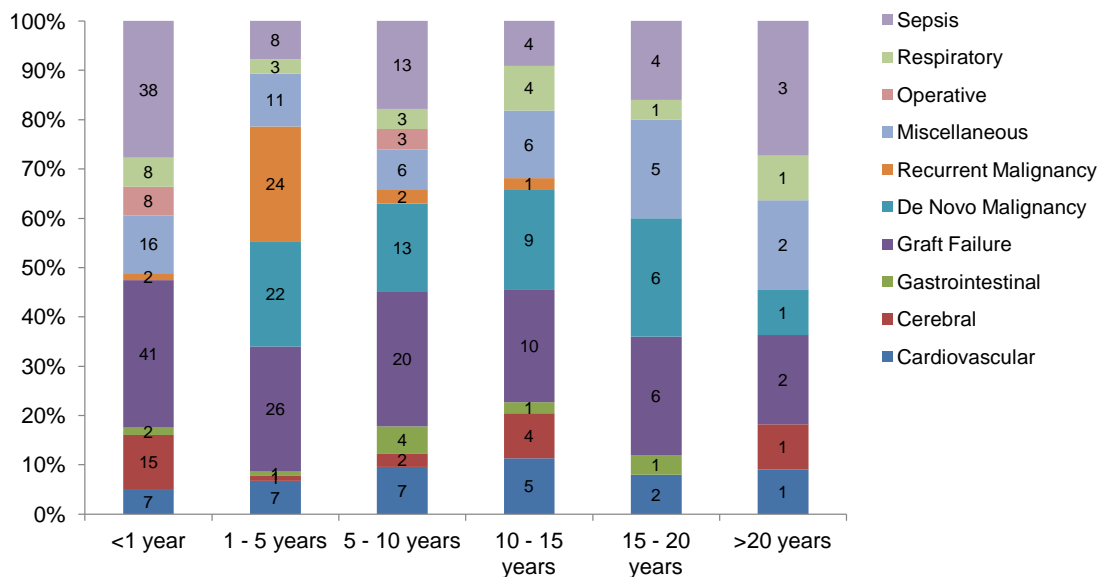


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Data to 31 December 2014

The majority of adult deaths were due to Graft Failure (105 or 26.8%), Malignancy (80 or 20.4%) and Sepsis (70 or 17.9%). The majority of child deaths were due to Graft Failure (11 or 24.4%), Sepsis (10 or 22.2%) and Cerebrovascular accident (8 or 17.8%).

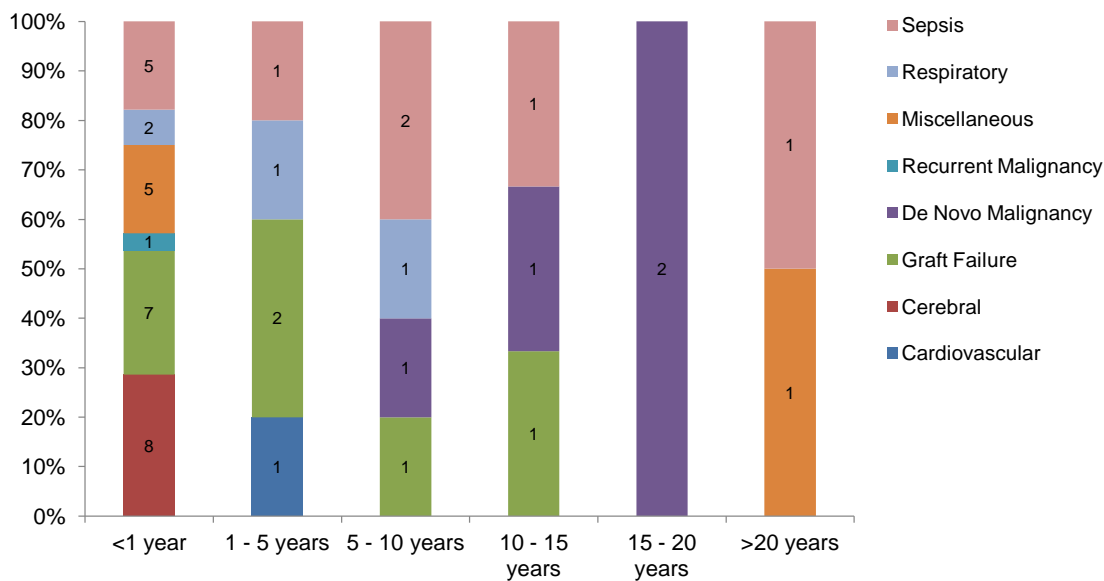
Cause of Death by Time - Adults (n = 393; 35.6% of adults)



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Data to 31 December 2014

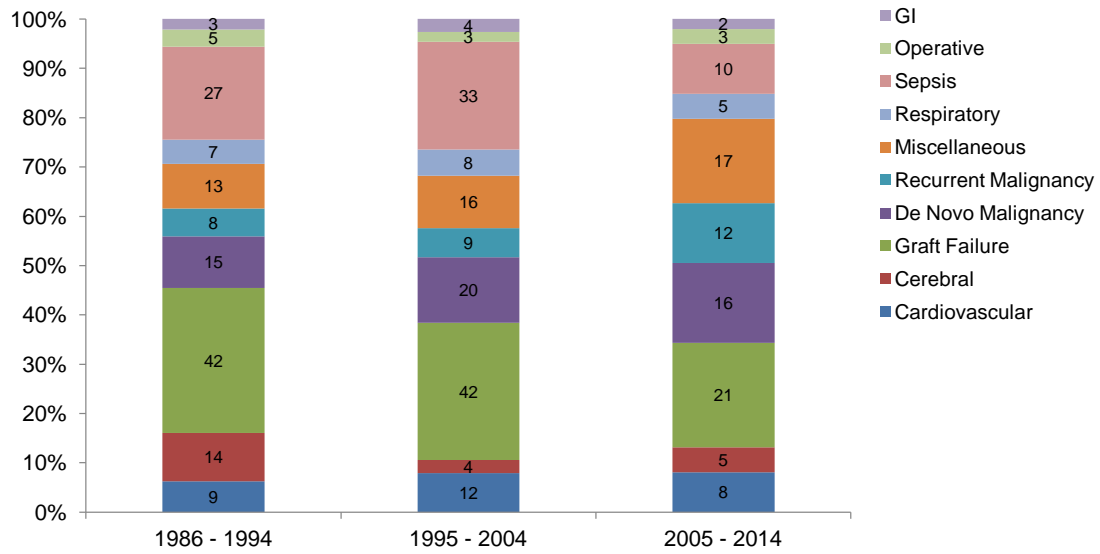
Cause of Death by Time - Children (n = 45; 18.2% of children)



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Data to 31 December 2014

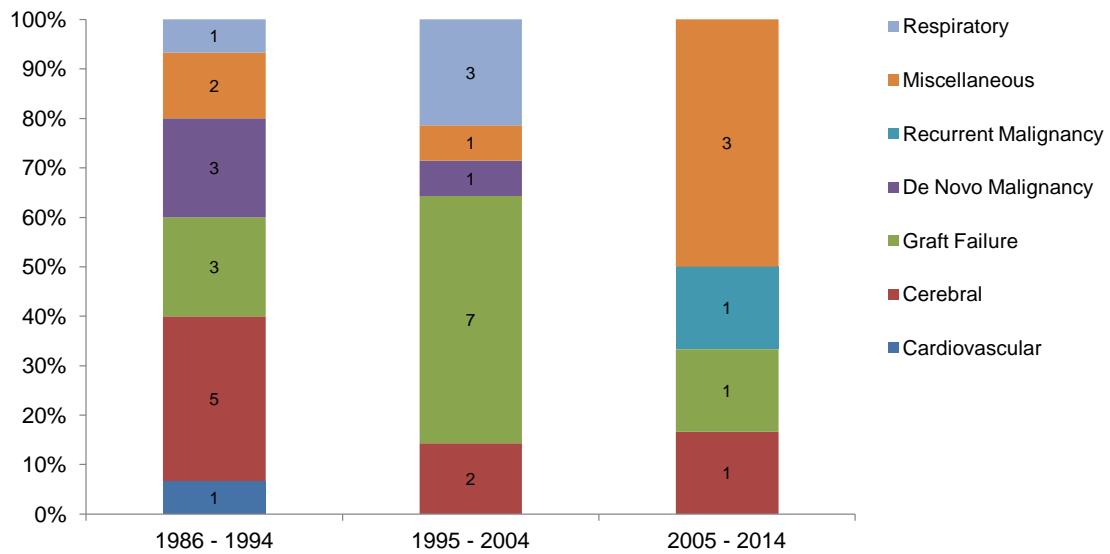
Cause of Death by Transplant Era - Adults (n = 393; 35.6% of adults)



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Data to 31 December 2014

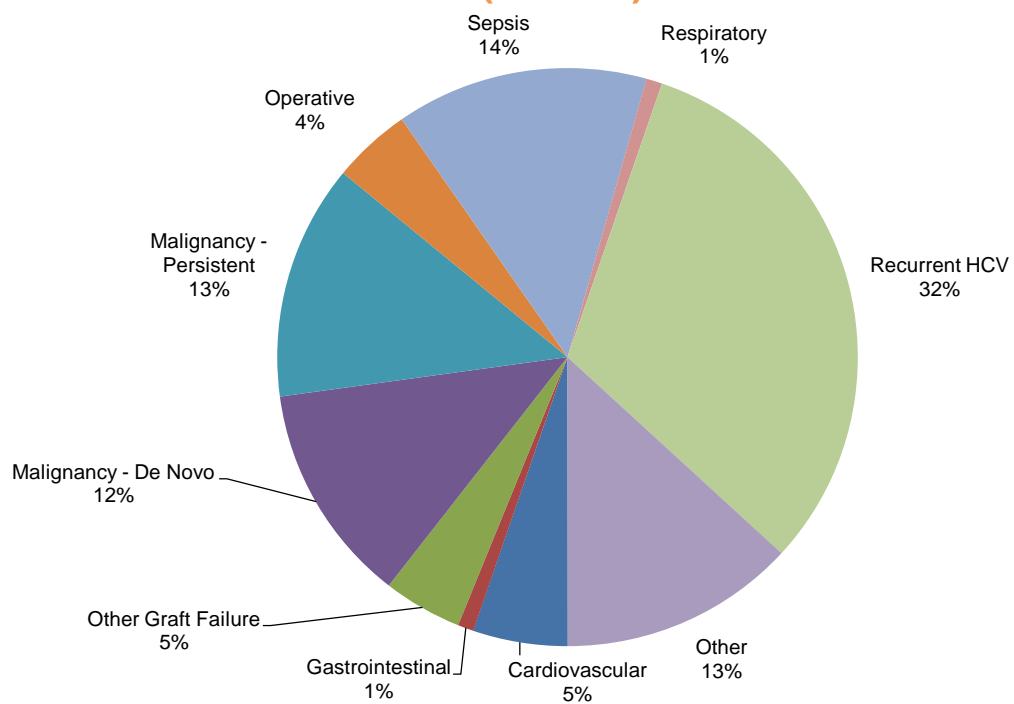
Cause of Death by Transplant Era - Children (n = 45; 18.2% of children)



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Data to 31 December 2014

Cause of Death – HCV Recipients (n = 114)



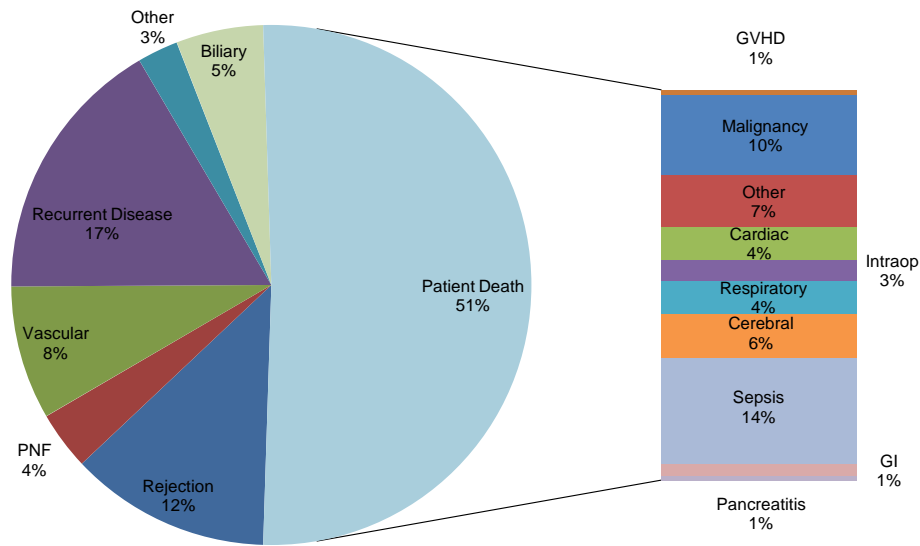
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Data to 31 December 2014

Cause of Graft Failure

Rejection		69 (12.5%)
	Acute	15
	Chronic	47
	ABO incompatibility	6
	Subacute	1
Vascular complications		46 (8.3%)
	Hepatic artery thrombosis	36
	Portal vein thrombosis	4
	Graft infarction	1
	Dissection in donor	1
	Graft compression	1
	Hepatic vein stenosis	1
	Rupture	1
	Vena Cava obstruction	1
Recurrent disease		92 (16.7%)
	Hep C	44
	Malignancy	26
	Hep B	13
	NASH	3
	PSC	4
	Alcohol	1
	Cryptogenic cirrhosis	1
Primary non function		20 (3.6%)
	Graft infarction	7
	Severe steatosis	2
	Antibody mediated rejection	1
	Arterial thrombosis	1
	Blood loss	1
	HA occlusion	1
	Preservation injury	1
	Profound hypotension	1
	Vena	1
	Other	4
Patient deaths		282 (51.0%)
	Sepsis	72
	Malignancy	58
	Cerebral	32
	Cardiovascular	24
	Respiratory failure	24
	Intraoperative	15
	GI haemorrhage	8
	GVHD	4
	Pancreatitis	3
	Other	42
Biliary complications		30 (5.4%)
	Biliary strictures	21
	Other	9
Other		14 (2.5%)
TOTAL		553 (37.7%) of all grafts

Cause of Graft Failure (n = 553)



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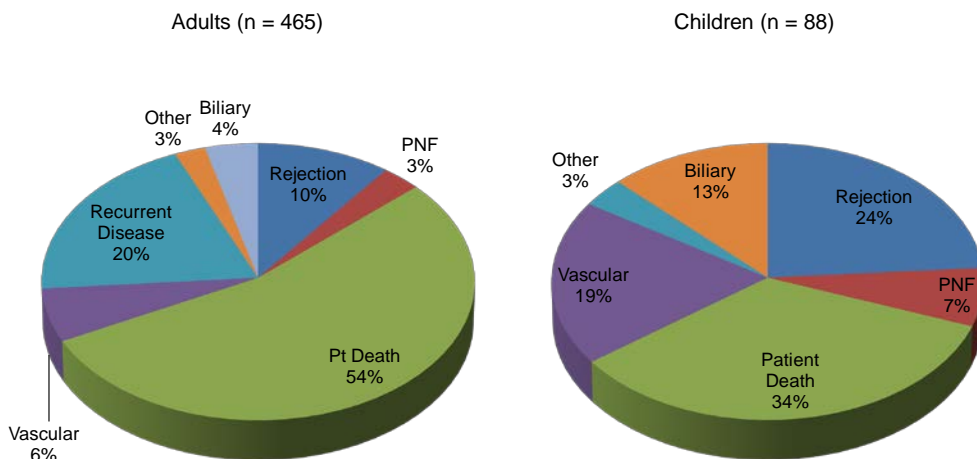
Data to 31 December 2014

553 of 1464 grafts (37.7%) have failed.

282 grafts (51.0%) were lost due to patient deaths, due to disease recurrence and 69 (12.5%) due to rejection 92 (16.7%).

Sepsis was the most significant cause of patient death (77 patients), followed by malignancy (58 patients) and cerebral catastrophe (32 patients).

Cause of Graft Failure (n = 553)

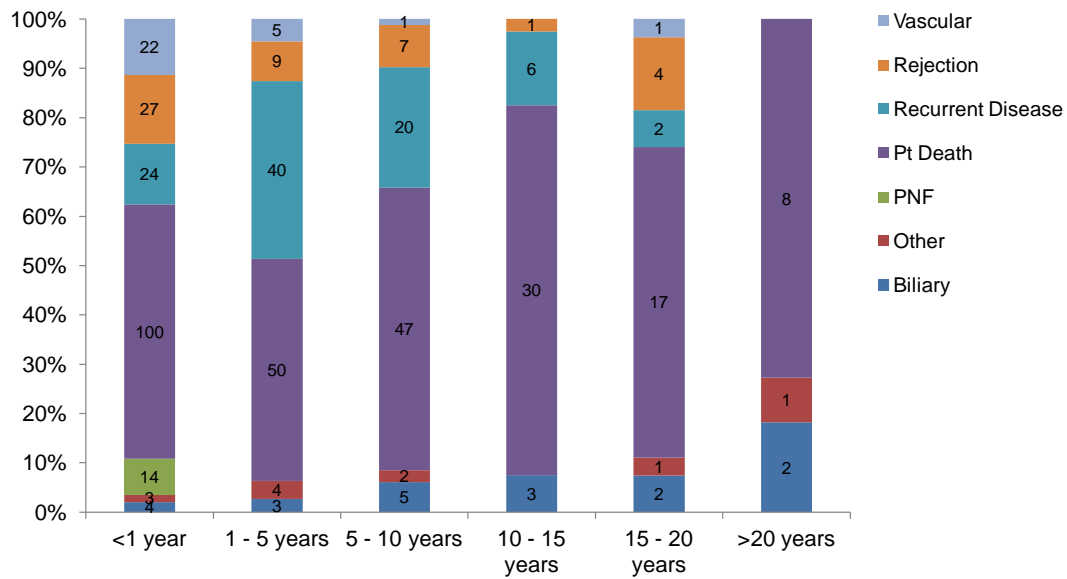


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Data to 31 December 2014

Patient death was the most significant cause of graft failure, followed by rejection.

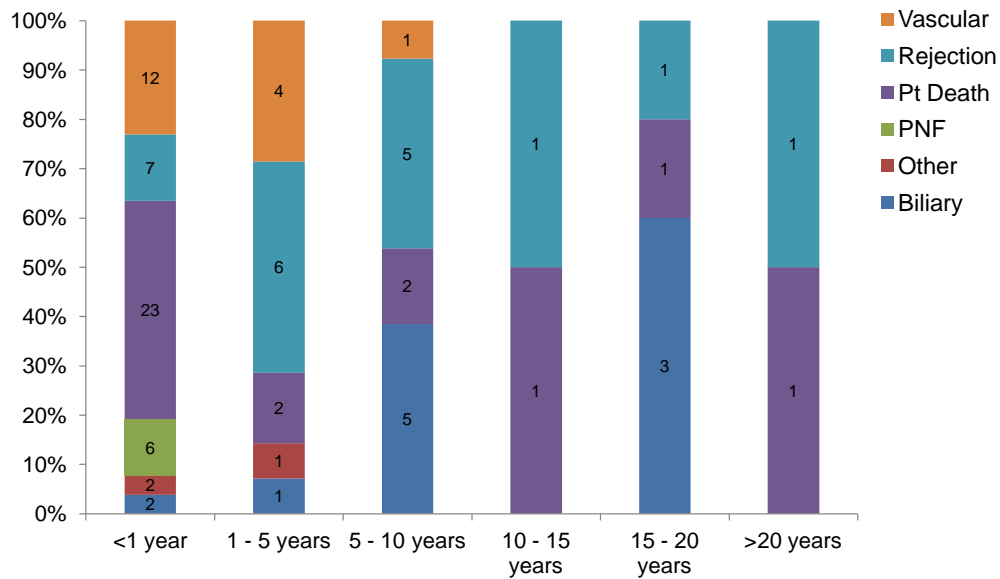
Cause of Graft Failure by Time - Adults (n = 465; 39.4% of adult grafts)



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Data to 31 December 2014

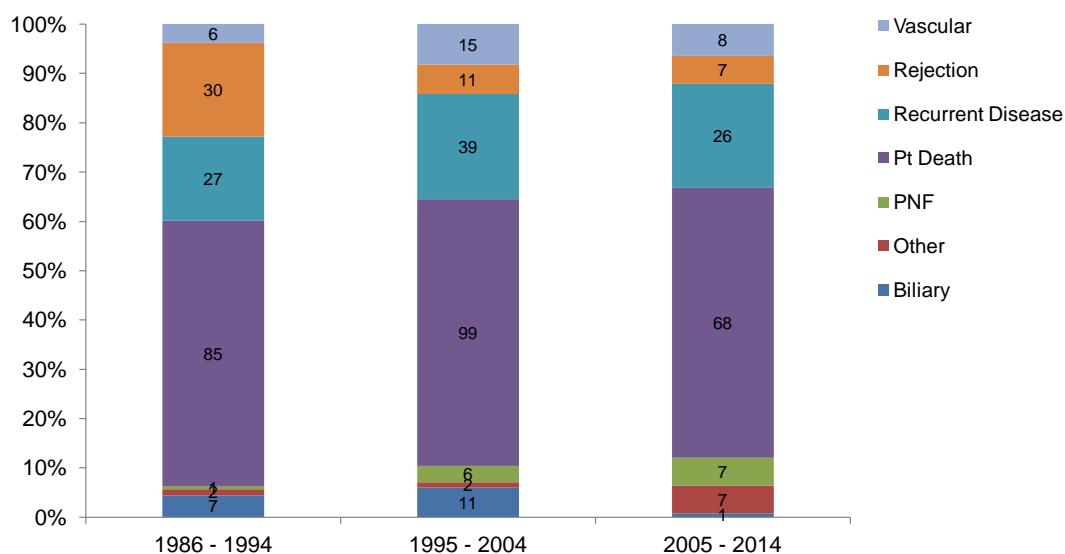
Cause of Graft Failure by Time - Children (n = 88; 30.3% of child grafts)



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Data to 31 December 2014

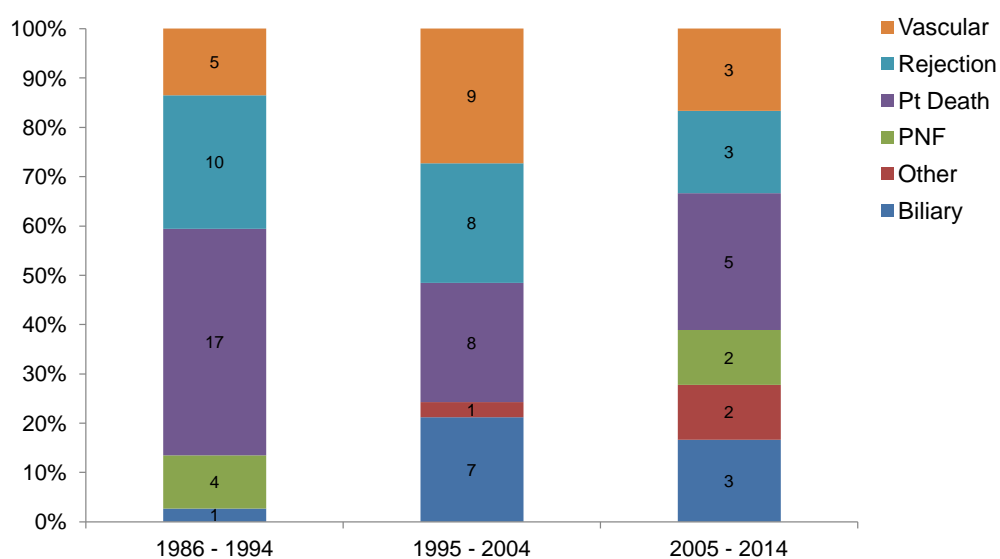
Cause of Graft Failure by Transplant Era - Adults (n = 465; 39.4% of adult grafts)



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Data to 31 December 2014

Cause of Graft Failure by Transplant Era - Children (n = 88; 30.3% of child grafts)

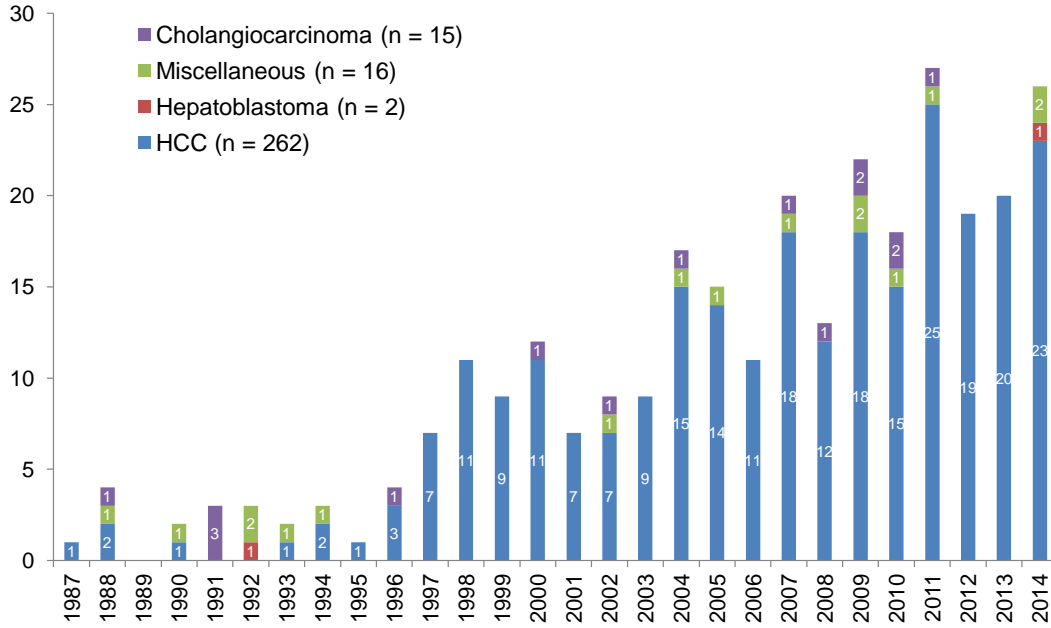


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Data to 31 December 2014

CANCER AND TRANSPLANTATION

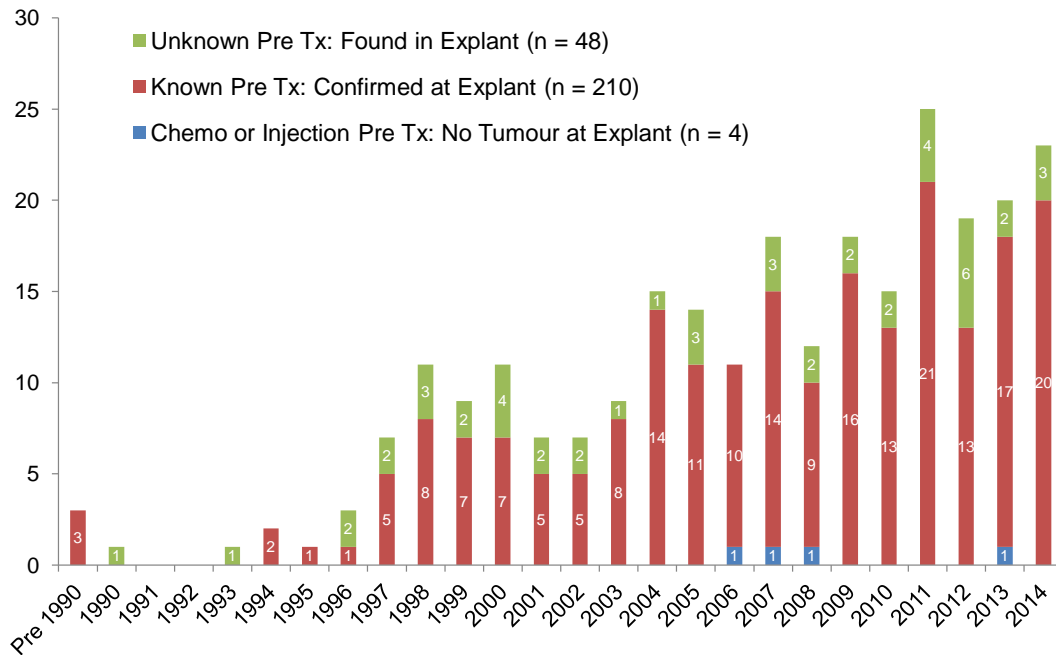
Malignancy at Transplantation (n = 286 Pts/295 Ca; 21.1% of patients)



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Data to 31 December 2014

HCC at Transplantation (n = 262)



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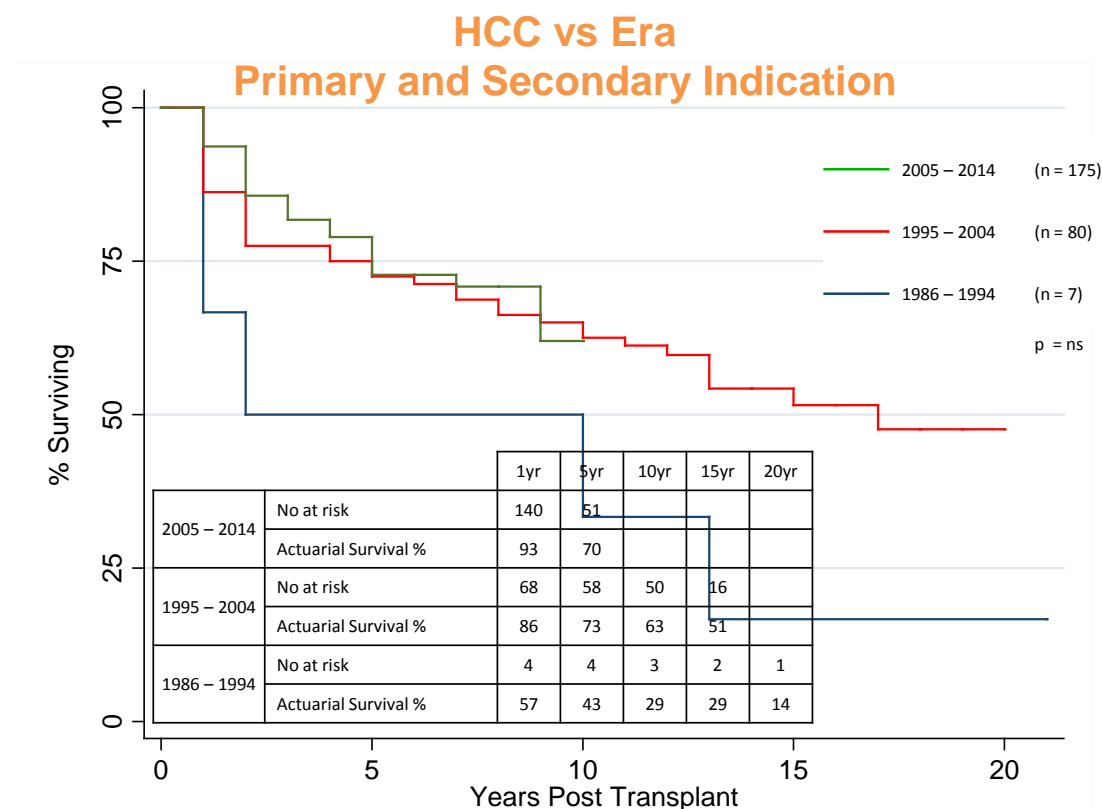
Data to 31 December 2014

Cancer in Liver Transplant Recipients 1986 - 2014

At Transplant (1278 patients)		Patients (n,%)
Liver cancer as primary diagnosis		130 10%
Liver cancer as secondary diagnosis		156 11%
No. of Patients with a cancer diagnosis at transplant		286 21%
Post Transplant		
Recurrent liver cancer		33 2% of all pts, 12% of cancer at tx pts
De novo non-skin cancer		113 8% of all pts, 40% of cancer at tx pts
De novo skin cancer		203 15% of all pts, 72% of cancer at tx pts
No. of Patients with a post transplant cancer		349 26% of all pts
Patients with multiple cancers		189 14% of all pts
Pre transplant cancer developed de novo cancer		58 20% of cancer at tx pts
Transferred from donor		3
Developed non-skin cancer within 90 days		1

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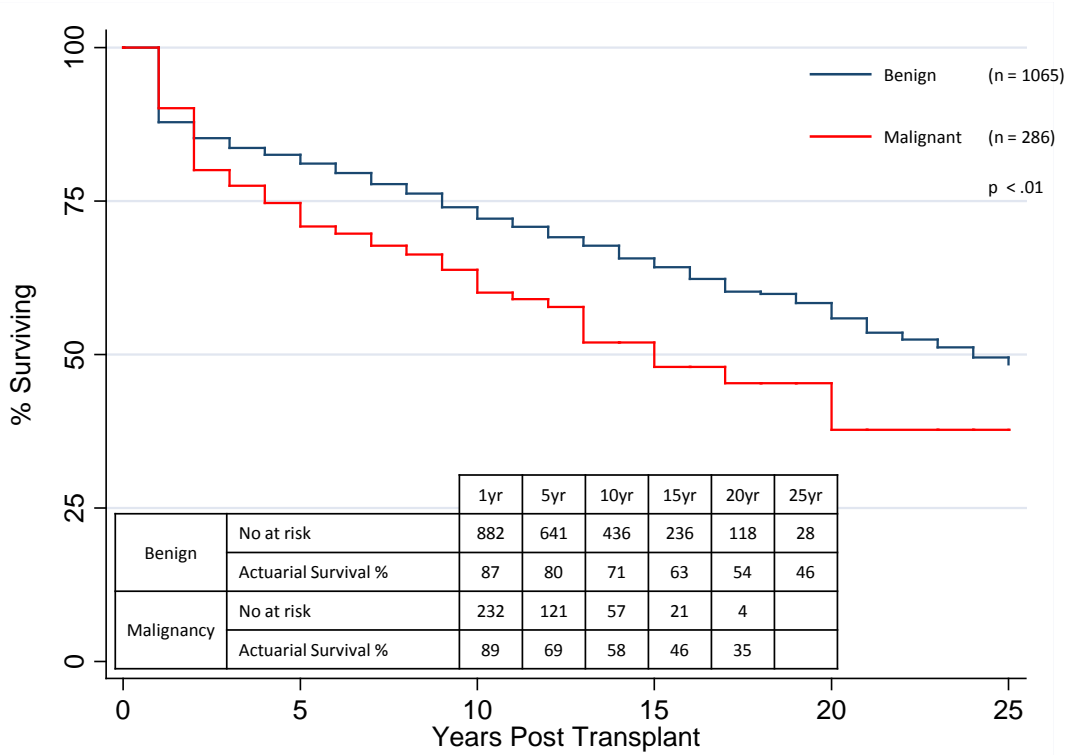
Data to 31 December 2014



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Data to 31 December 2014

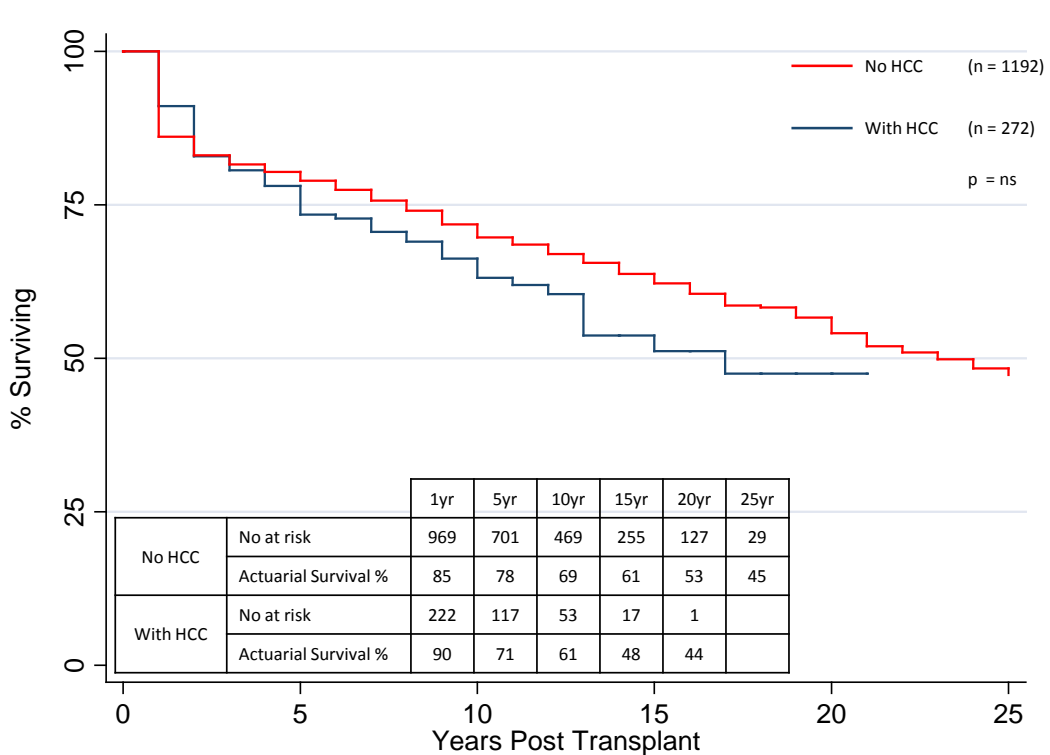
Benign Disease vs Malignancy



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Data to 31 December 2014

Primary and Secondary HCC vs No HCC



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Data to 31 December 2014

De Novo Cancer (Excluding Skin) n = 107 Pts, 119 Ca; 8.7% pts transplanted

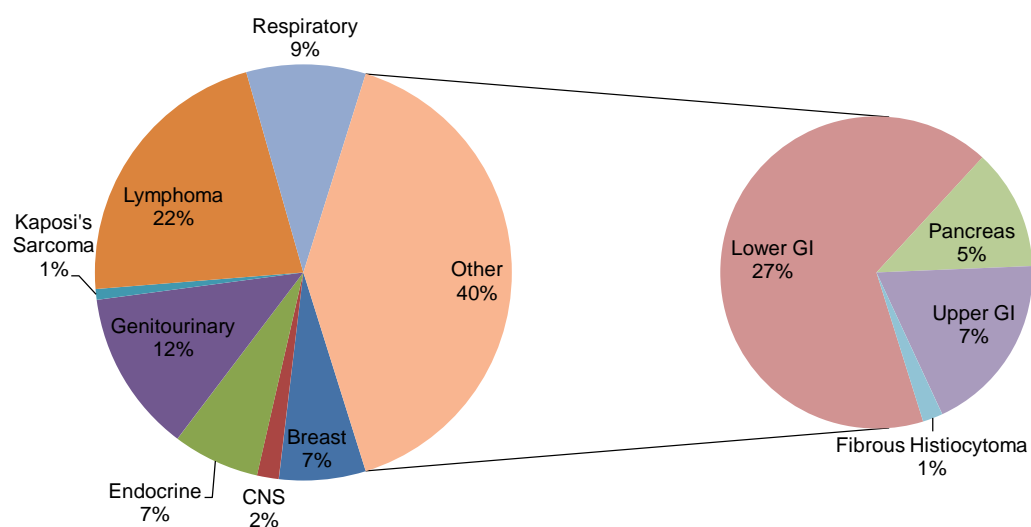
	No	Male	Female	Age of patients (years)	Time to diagnosis (months)	Died of This Cancer	Died Other
Alimentary	47	37	10	13 - 78 (m = 59)	6 - 266 (m = 76)	23 49%	8
Lymphoma (including PTLT)	26	16	10	1.5 - 70 (m = 44)	4 - 281 (m = 87)	7 27%	6
Genitourinary	15	12	3	21 - 74 (m = 59)	2 - 229 (m = 83)	2 13%	4
Respiratory	11	9	2	29 - 68 (m = 61)	7 - 193 (m = 36)	8 73%	0
Breast	8	0	8	30 - 60 (m = 44)	50 - 240 (m = 115)	6 75%	1
Endocrine	8	2	6	36 - 70 (m = 48)	14 - 144 (m = 56)	2 25%	0
CNS	2	1	1	66 - 75 (m = 70)	14 - 93 (m = 53)	2 100%	0
Fibrous Histiocytoma	1	0	1	62	120	0	0
Kaposi's	1	1	0	32	48	0	1
Total	119	78	41	1.5 - 78 (m = 56)	2 - 281 (m = 78)	50 42%	20

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NB: m = median

Data to 31 December 2014

De Novo Cancer (Excluding Skin) n = 107 Pts, 119 Ca; 8.7% pts transplanted

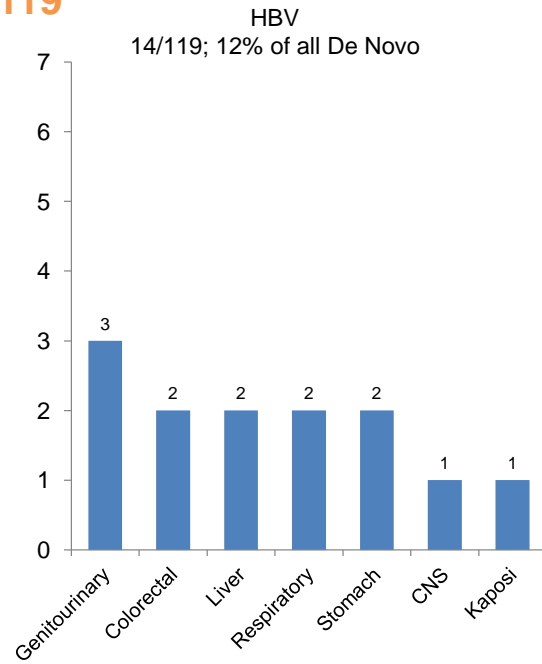
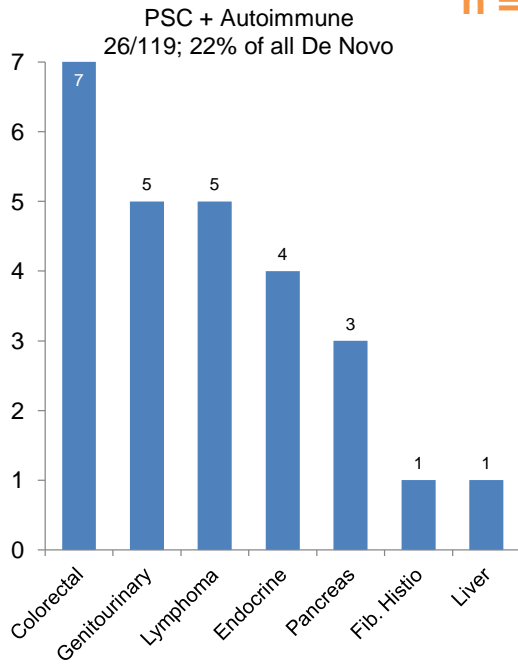


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Data to 31 December 2014

Pre Transplant Liver Disease and De Novo Cancer (Excluding Skin)

n = 119

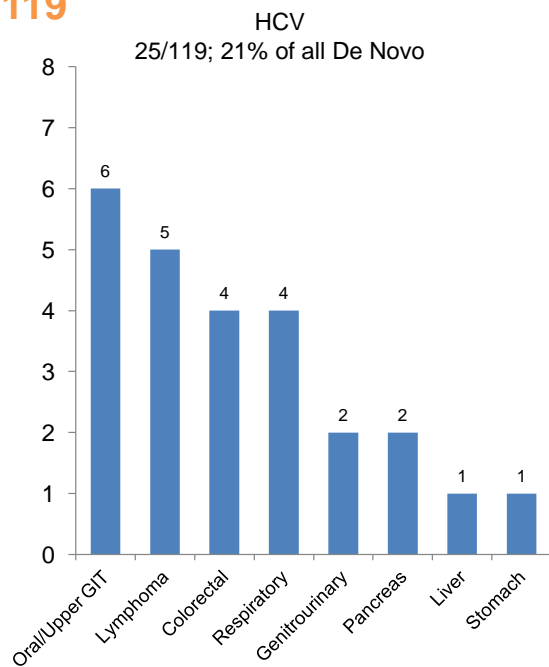
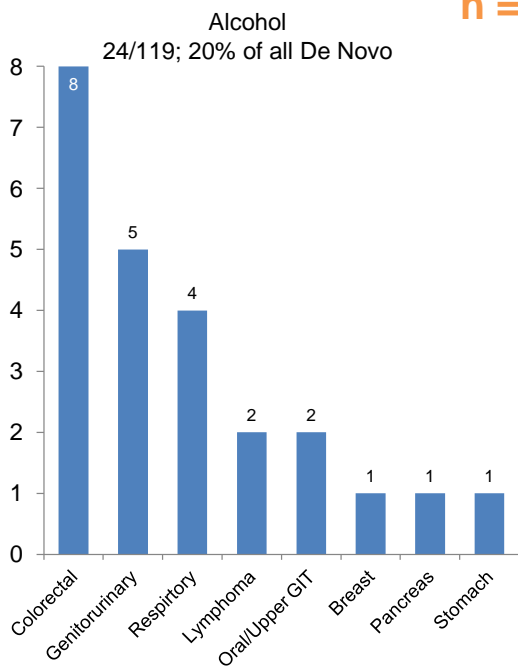


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Data to 31 December 2014

Pre Transplant Liver Disease and De Novo Cancer (Excluding Skin)

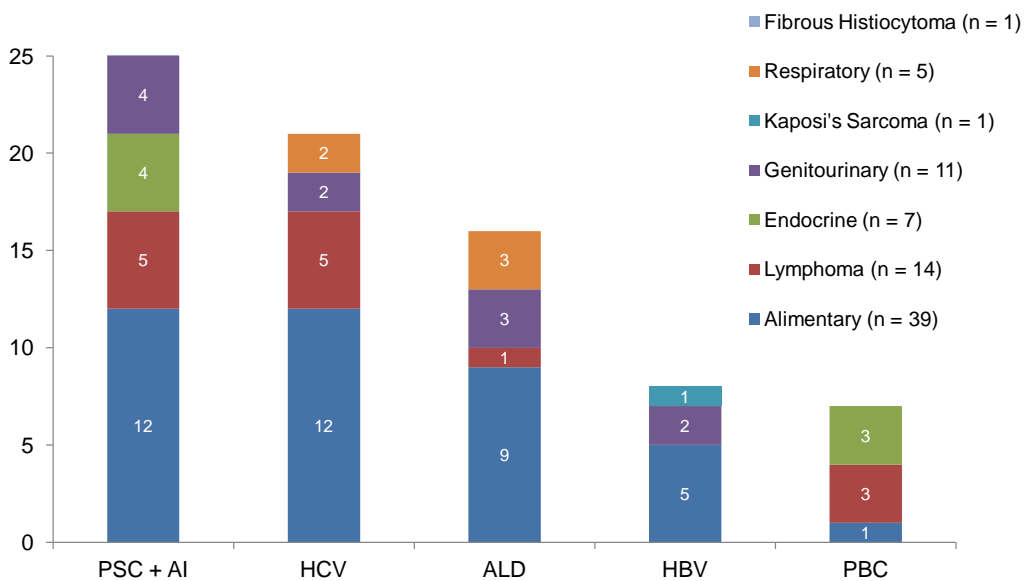
n = 119



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Data to 31 December 2014

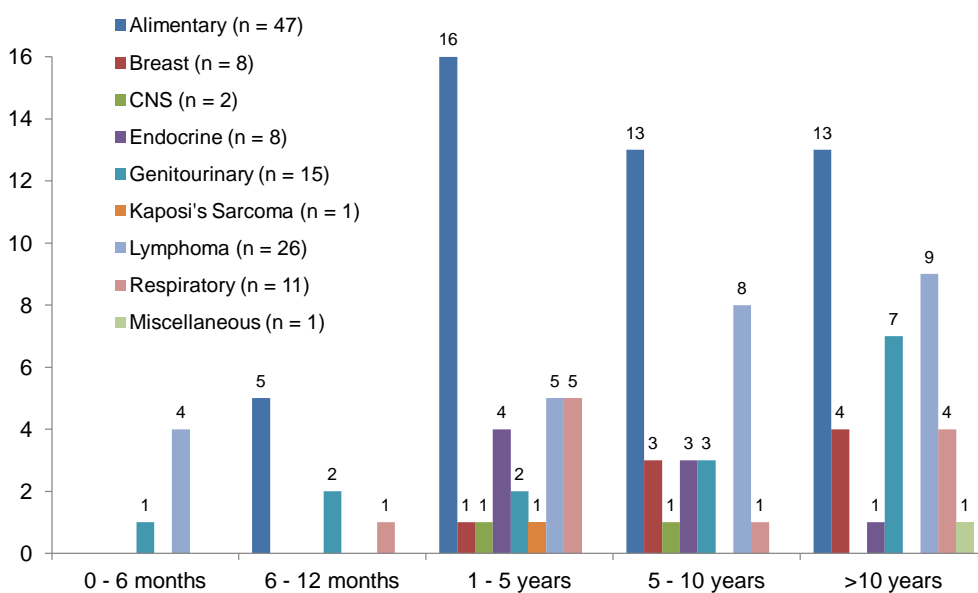
Primary Liver Disease and De Novo Cancer (Excluding Skin)



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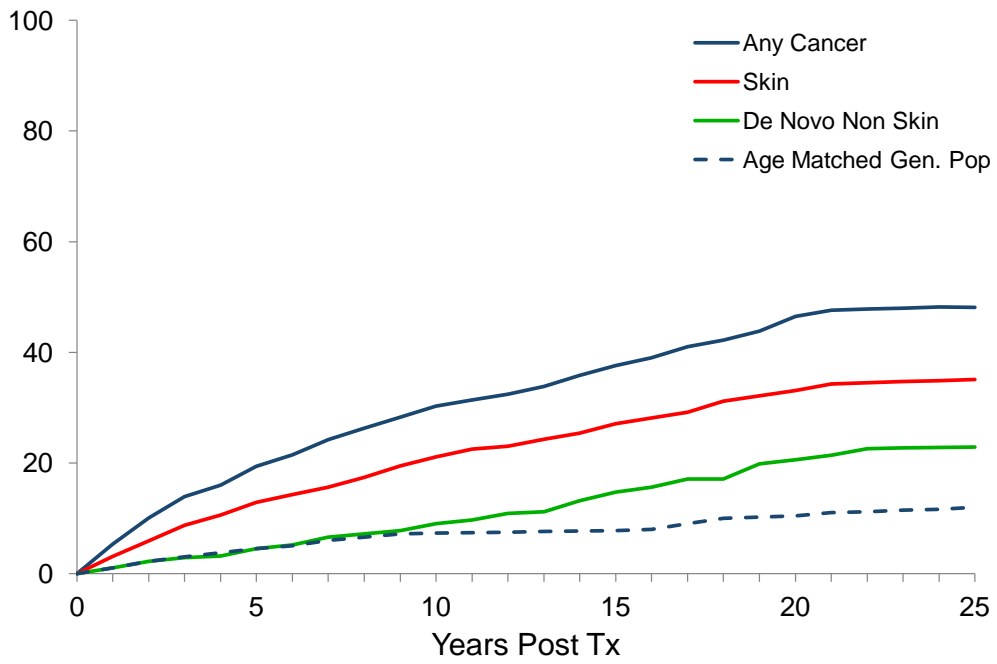
Time to Diagnosis De Novo Cancer (Excluding Skin)



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Data to 31 December 2014

Cumulative Risk of Diagnosis of Cancer Following Liver Transplantation 1986 – 2014



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