Management of and LDLT Outcomes in ultra-high-risk patients

In the preparation for liver transplantation, high-urgency patients should be given special considerations. Prompt management of postoperative complications is of paramount importance to ensure good outcomes. In particular, patients with acute-on-chronic liver failure pose a significant health burden to the society. These patients tend to be chronically sick and more prone to sepsis and have a higher risk of hepatorenal syndrome. Thus they usually have ultra-high MELD scores. Successful management of these problems could decrease their morbidity and mortality rates after transplantation. LDLT for this group of patients can decrease the wait-list drop-out rate and could be a salvage treatment for them. An important debate is when we should stop the evaluation of potential donors to avoid futility if the recipients’ conditions are too poor.