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Guest Editor:

*L. Müller and J. Kilo, Innsbruck*

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## Lunge

### V01 Extended donor criteria for lung transplantation

A. Abraham, C. Aigner, P. Jaksch, S. Guth, G. Marta, A. Samatelopoulos, S. Taghavi, W. Wisser, W. Klepetko

Klinische Abteilung für Herz-Thoraxchirurgie, Universitätsklinik für Chirurgie, Medizinische Universität Wien, Wien, Österreich

**Background.** Nowadays lung transplantation is an established standard procedure for the treatment of most end-stage respiratory disorders. In the last years, like for all solid-organ transplantations, the demand for donor lungs exceeded significantly the existing organ pool. Thus, most specialised centers face a high mortality on the waiting list. This retrospective study compares the outcome of marginal versus ideal donor lungs.

**Methods.** We performed a retrospective analysis of 98 consecutive primary lung transplantations from 94 donors from 1/2001 to 12/2002. Recipients were divided in two groups (standard versus "extended") according to the donor lung acceptance criteria (age, >55 years; PaO<sub>2</sub> at FiO<sub>2</sub>/PEEP 5, <300 mmHg; positive tobacco anamnesis [>20 packages per year]; inhalation of noxious agents; presence of infiltration on chest X-ray or purulent secretions at bronchoscopy).

**Results.** Twenty-three donors (24.5%) were extended. Twenty-six recipients (26.55%) received organs from extended donors. According to our data, differences in intubation times, ICU stay, and hospital stay were not statistically significant. Furthermore, postoperative bleeding rates were comparable as well as bronchial anastomotic complications. We encountered no significant statistical difference in the 3-month

(standard 88.89% vs. extended 92.31%) and 1-year (standard 81.94% vs. extended 84.62%) survival between the two groups.

**Conclusions.** Our study suggests that the use of selected marginal donor lungs has no influence on the outcome after transplantation.

### V02 Impact of donor gender on outcome after lung transplantation

S. Guth, C. Aigner, A. Abraham, P. Jaksch, A. Samatelopoulos, S. Taghavi, W. Wisser, W. Klepetko

Klinische Abteilung für Herz-Thoraxchirurgie, Universitätsklinik für Chirurgie, Medizinische Universität Wien, Wien, Österreich

**Background.** Female donor gender has been described to be an independent risk factor for primary graft failure. We performed this study to evaluate the impact of donor gender on outcome and complications after lung transplantation.

**Methods.** We retrospectively reviewed the impact of donor gender on outcome of 163 primary lung transplant recipients (93 recipients were male [57%], 70 were female [43%]) from January 2001 to December 2003. Recipients were stratified whether they received a female- or male-donor organ. Both groups were compared with regard to duration of intubation time, ICU stay, postoperative complications and survival. Both groups were comparable with regard to mean age, indications, and mean waiting list time.

**Results.** Mean time until extubation was 8 days in the group receiving organs from male donors and 16 days in the group receiving organs from female donors (P = 0.041).

Mean ICU stay of 12 days for the male-donor recipient group was significantly shorter than that for the female-donor recipient group, 20 days (P = 0.044). 3-month survival rates were comparable in both groups: 89.53% (male-donor recipi-