



Abstracts of the 2024 Annual Meeting of the ALEH (Asociación Latinoamericana para el Estudio del Hígado)

O-1 SIMULTANEOUS LIVER-KIDNEY TRANSPLANTATION OUTCOMES IN LATIN AMERICA

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Conflict of interest: No

Introduction and Objectives: Simultaneous liver-kidney transplantation (SLKT) is increasingly performed worldwide. We aimed to evaluate the characteristics and outcomes of SLKT patients in Latin America.

Patients / Materials and Methods: We conducted a multicenter, international retrospective cohort study of adult patients who underwent SLKT. Overall survival and survival with functional grafts (both liver and kidney) were estimated using the Kaplan-Meier method.

Results and Discussion: 293 patients who underwent SLKT between 2003 and 2024 from Argentina, Brazil, Colombia, Chile, Mexico, Peru, and Uruguay were included. Patients had a median age of 56 (IQR: 47–61), and 63% were male. Primary indications for liver transplantation were decompensated cirrhosis (69%) and polycystic disease (19%). The most common etiologies of cirrhosis were viral (36%), alcohol-related (35%), and metabolic-associated steatotic liver disease (27%). Ninety-three percent of kidney indications were due to chronic kidney disease, primarily polycystic kidney disease (26%), diabetic nephropathy (25%), and hypertensive nephropathy (11%). Among patients transplanted for acute kidney injury, 75% had hepatorenal syndrome. Overall, 55% were on pre-transplant renal replacement therapy (RRT). Thirty-eight percent accessed transplantation with MELD exceptions. The median MELD-Na score was 24 (19–30), 25 (21–32) in those without supplementary MELD, and 20 (17–25) in those with supplementary MELD. Fourteen percent had a prior isolated transplant (kidney 50% and liver 50%). Twenty-five percent required RRT, and 18% underwent abdominal re-operation within the first post-transplant week. During long follow-up, 13% experienced major cardiovascular events, and 7% experienced oncological

complications. Other recipient and donor characteristics are presented in the table. One-year overall survival was 77% (95% CI 72-82); at 5 years, it was 67% (95% CI 60-72); and at 10 years, it was 59% (95% CI 51-66). Survival with functional grafts at 1 year was 77% (95% CI 72-82); at 5 years, it was 65% (95% CI 58-70); and at 10 years, it was 54% (95% CI 46-62).

Conclusions: For the first time, data from the region demonstrate that long-term patient survival following SLKT meets international standards.

Recipient and Donor Characteristics (n=293)	
Variable	Result (n=293)
PRE-TRANSPLANT RECIPIENT CHARACTERISTICS	
Arterial hypertension, n (%)	153 (54)
Diabetes, n (%)	99 (35)
Dyslipidemia, n (%)	49 (17)
BMI, median (IQR)	24 (22 - 28)
Pre-transplant mechanical ventilation, n (%)	37 (13)
INDUCTION IMMUNOSUPPRESSION, n (%)	
Methylprednisolone	40 (14)
Methylprednisolone, Thymoglobulin	36 (12)
Methylprednisolone, Basiliximab,	158 (54)
Methylprednisolone, Basiliximab, Thymoglobulin	7 (2)
Other	52 (18)
REJECTION, n (%)	
Biopsy-proven acute/cellular liver rejection*	21 (8)
Biopsy-proven acute/cellular kidney rejection*	28 (11)
DONOR CHARACTERISTICS	
Male gender, n (%)	180 (63)
Age, median (IQR)	34 (24 - 47)
BMI, median (IQR)	25 (23 - 27)
Sodium, median (IQR)	151 (145 - 159)
Creatinine, median (IQR)	0.95 (0.71 - 1.20)

*At least one episode during follow-up.

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O2- CHARACTERIZATION OF STEATOTIC LIVER DISEASE AND THE ROLE OF GENETIC BACKGROUND IN LATIN AMERICA

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Introduction and Objectives: Although Latinos living in the United States are at higher risk of steatotic liver disease (SLD), information from Latin American countries is extremely scarce. We aimed to characterize SLD in Latin America and explore the role of the common genetic variants in this region.

Patients / Materials and Methods: Cross-sectional multicenter study including individuals with SLD who undergo liver biopsy or transient elastography (TE) between 2003–2024. TE thresholds were established as follows: significant fibrosis (F2) ≥8.2 kPa, advanced fibrosis (F3) ≥9.7 kPa, and cirrhosis (F4) ≥13.6 kPa. Analyses included logistic binary regression.

Results and Discussion: We included 2,159 patients (93.7% metabolic dysfunction-associated SLD and 6.3% alcohol-associated liver