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National scientific center of surgery named after A.N. Syzganov

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ОРТАЛЫҒЫ



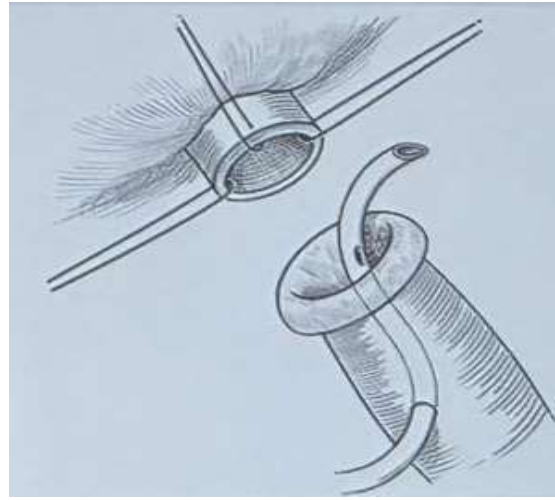
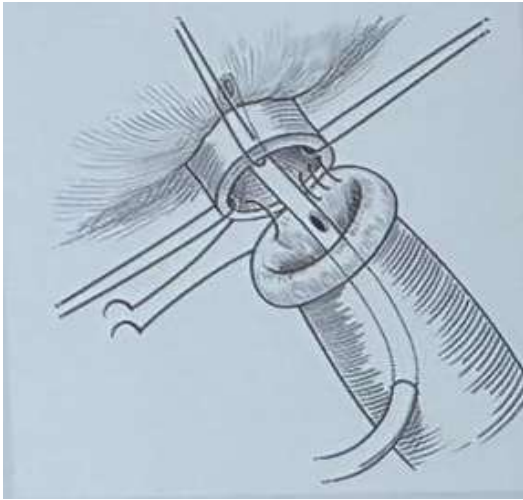
Comparative analysis with or without external biliary drainage of the bile ducts during transplantation of the right lobe of the liver from a living donor

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External biliary drainage during biliobiliary reconstruction



Total BC – 13.5%
:BAS (11.4%),BAL (5.7%)

No stent group (n=24)
: BAS (n=5, **20.8%**),BAL (n=8, 33.3%)

Stent group (n=116)
: BAS (n=11, **9.5%**),BAL (n=0,**0%**)

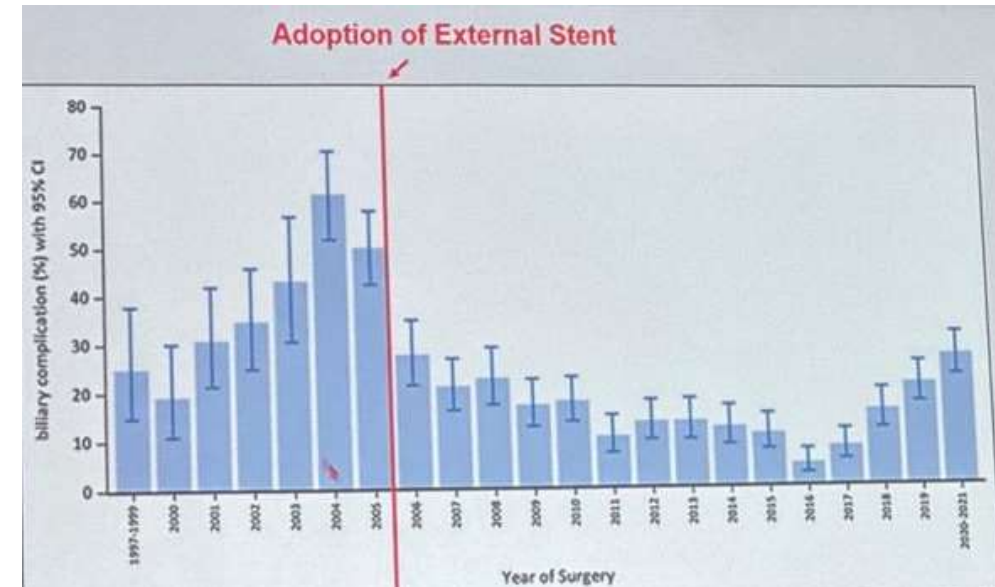
Decreasing instrumental pressure of bile duct

Advantages

- decrease of biliary complications in LDLT (especially bile leak)
- early diagnosis of biliary complications
- check the quality of bile nature
- identify the location of the bile ducts during PTBD

Disadvantages

- pain at the tube insertion site
- discomfort due to long-term maintenance
- abdominal pain and LFT abnormalities during clamping of external stent
- accidental removal of the external stent and peritonitis
- catheter related complications



Biliary complications after liver transplantation

Multiple bile ducts in the graft are not a contraindication for biliary anastomosis

Turkmen Arikan

DOI:10.1016/j.transproceed.2019.01.160

Biliary complications after LDLT occur from 13% to 36%, after DDLT from 5% to 15%

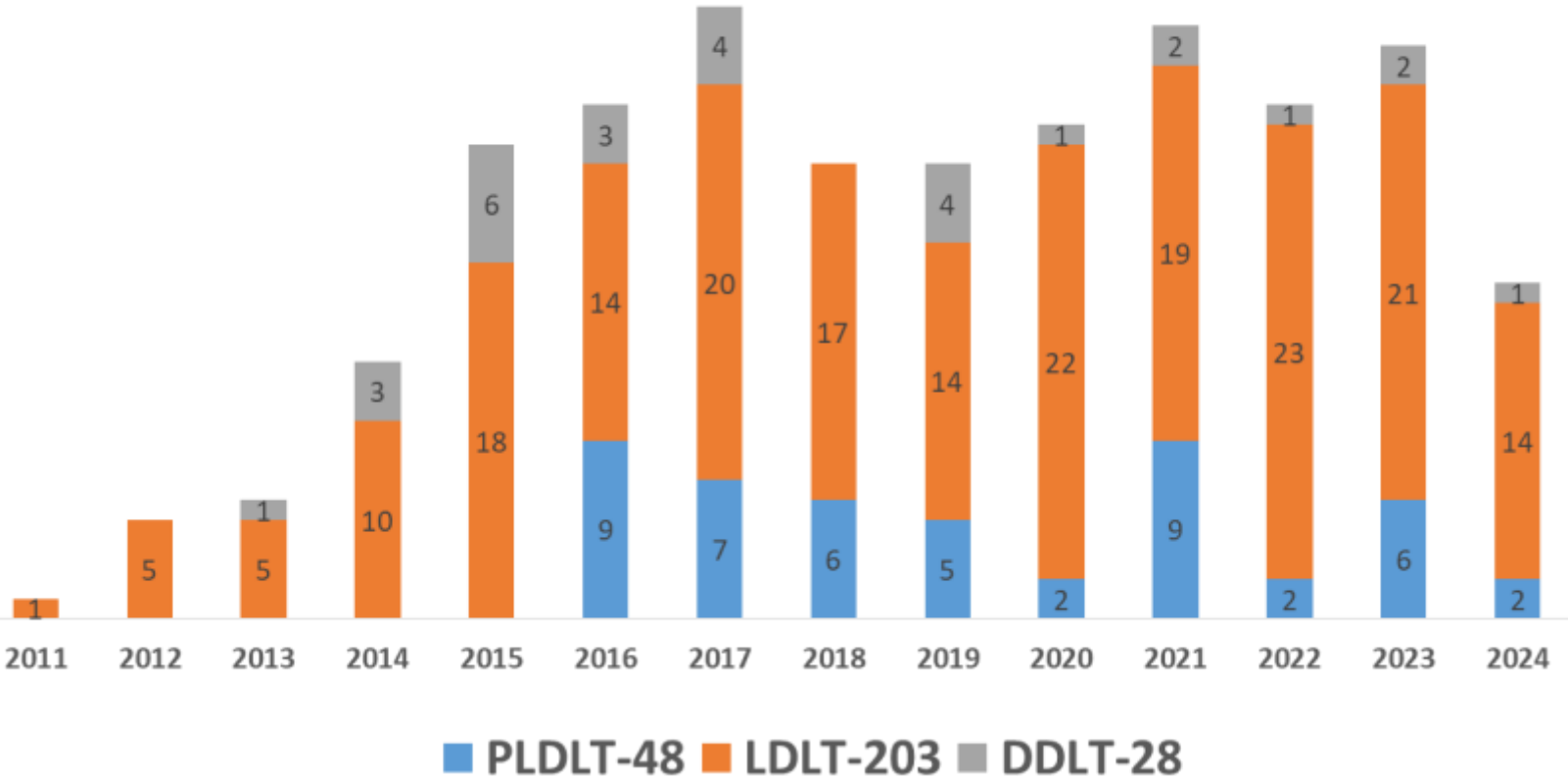
World J Hepatol. 2021 Jan 27; 13(1): 66–79

Most biliary complications are corrected in minimally invasive ways

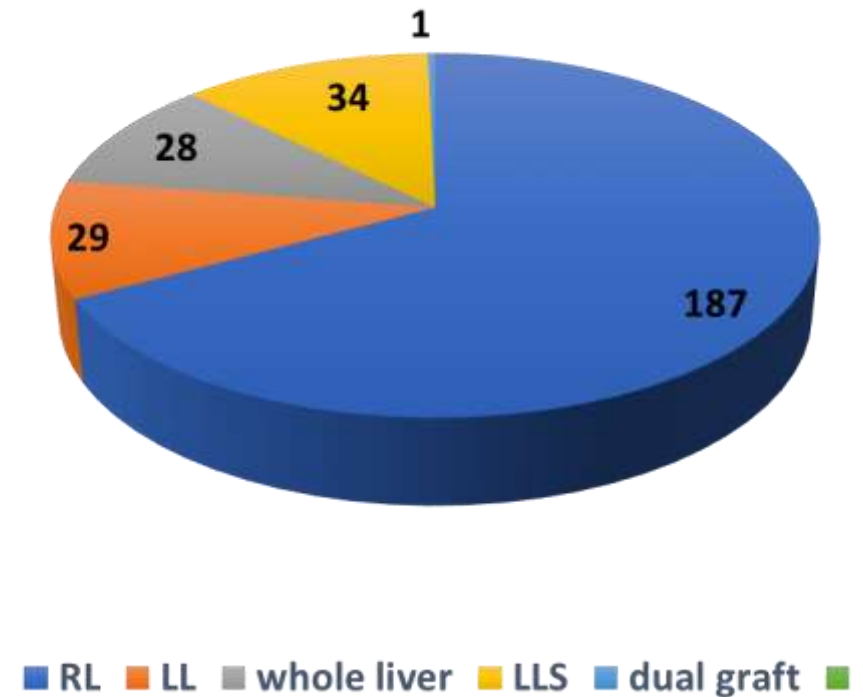
Brian T Moy. J Clin Transl Hepatol. 2019 Mar 28;7(1):61-71

Liver transplantation in the NSCS

12/2011 – 04/2024 (n=279)



Transplanted liver graft



LDLT using right lobe of the liver in the NSCS n=187

Biliary complications n=21 (11.3%)

| With drainage (n= 91) | Without drainage (n= 96) | P-value |
|--------------------------|--------------------------|---------|
| n= 8 (4.3%) | n= 13 (7.0%) | ns |
| Bile leakage 1 (0.6%) | Bile leakage 2 (1.1%) | ns |
| Stricture 7 (3.7%) | Stricture 11 (5.9%) | ns |

Conclusion

- **In conclusion, our experience shows that biliary complications is less common in patients with external biliary drainage compared to those without external biliary drainage.**