# AUSTRALIA & NEW ZEALAND

LIVER TRANSPLANT REGISTRY



From the Combined Registries of the Australian and New Zealand Liver Transplant Centres

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Brisbane, QLD, AUSTRALIA Editors: S.V. Lynch, G.A. Balderson

### STATISTICAL METHODS

Kaplan-Meier survival curves have been produced using SPSS® for Windows™ Release 11.0.1 , SPSS Inc.

#### **ACKNOWLEDGMENT**

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# Preface

We are pleased to present the 15<sup>th</sup> Report of the Australia and New Zealand Liver Transplant Registry (ANZLTR). This report contains data to 30<sup>th</sup> June 2003 and analyses cumulative data since the establishment of the first liver transplantation units in Australia or New Zealand in 1985.

The Registry is a collaborative effort of the liver transplant centres in Australia (Adelaide, Brisbane, Melbourne, Perth, Sydney) and New Zealand (Auckland). Prior to the establishment of the centre in Auckland in 1998, New Zealand patients were transplanted in Australia and their data is combined with data from later New Zealand recipients for analysis where appropriate. This was done to provide more accurate New Zealand demographic data and does not reflect the activity of the New Zealand unit.

Donor data have been supplied by the Australia and New Zealand Organ Donor Registry and we thank them for their collaboration.

The Editors would also like to thank all the Liver Transplant Units for the contribution of their data. A full list of the Units and their contact information can be found in the appendix. In particular we are grateful to the efforts of Jodie Fisher, Data Manager, and Pamela Dilworth, Program Manager, Royal Prince Alfred Hospital, Sydney for their continuing contribution to the maintenance of the data in the Cancer Registry and for preparation of the Cancer Report.

The registry now has some financial support and we are grateful to the Commonwealth Department of Health and Aging for their financial contribution.

The Registry is supervised by the Management Committee who are involved in the ongoing supervision of the development of the Registry. The members are listed on the inside cover together with contact information of the Coordinating Centre for comments or requests for further copies of this Report.

Stephen Lynch

Glenda Balderson

# Summary

#### **PAGE**

- Between January 1985 and  $30^{\text{th}}$  June 2003 , 2212 orthotopic liver transplants (OLTx) were performed in Australia and New Zealand on 2041 patients 1639 adult patients (> 15 years) [80%] and 402 children [20%]. The median age of all recipients was 44.6 years. The ages ranged from 24 days to 70.9 years. There is a significant difference in gender distribution between children (M=45%) and adults (M=61%) (  $^2$  = 31.99, p<0.001)
- 6. There was an increase in the total number of new patients in 2002 for both children and adults after a decrease in 2001.
- 7-8 Of 1567 Australian citizens, 1314 [84%] were adults, of 290 New Zealand citizens 229 [79%] were adults, and of 184 other citizens 96 [52%] were adults. This is reflected in the age grouping distributions and overall median ages.
- 9. There was an increase in the total number of liver transplants performed in 2002 compared with the number in 2001 to a record 191 transplants.
- 10-11. Increasing use of split grafts contributed to the increased number of transplants performed in 2002. In children, reduced size grafts have been used in 301 [64%] of 466 cases 249 reduced grafts (including 8 living donor grafts) and 52 split liver grafts. Of adult patients, 24 received reduced size grafts (including 1 as auxiliary graft and 2 living donor grafts) and 65 [4%] split liver grafts (including 1 as auxiliary graft). The first domino transplant of a whole liver was also performed.
- 12-15 Overall chronic viral hepatitis (CVH) is the most common primary indication for liver transplantation. In children biliary atresia (BA) is the most common primary disease. In adults chronic viral hepatitis varied from 25% of Australian citizens, 28% on New Zealand citizens and 32% of other citizens. Full details of specific diagnoses categories by age group and citizenship are listed in the Appendices Metabolic disorders (Appendix II), Other diseases (Appendix III), Fulminant Hepatic Failure (Appendix IV).
- 16-18. The predicted increase in the proportion of patients requiring transplantation for CVH is evident in recent data. By 2000-03, 33% of Australian adults, 43% of New Zealand adults and 46% of Other adult patients had a primary diagnosis of CVH. In Australian and other citizens hepatitis C predominates while hepatitis B predominates in New Zealand citizens. When patients with other primary diagnoses and a secondary diagnosis of Hepatitis B ,C or both are included, the overall incidence of CVH in 2000-03 was 40% in Australian adults, 46% in New Zealand adult patients and 47% in Other adult citizens.
- 19. Current 1 year patient survial of all patients is 85%. Patient survival was 77% at 5 years and 69% at 10 years. There was no difference on survival between citizenship groups.
- 20. Australian adults had a significantly lower survival rate then children but this was not seen in other groups.
- 21-23. Older recipients (60-60 and 65+ years) had poorer outcomes then other adults while overall babies (< 1 year) also tended to have lower survival than other children.
- 24-25. Patient survival in 2000-03 cohort shows continued improvement for the first 3 years in patient outcome compared with earlier cohorts.

DATA TO 30/06/2003 SUMMARY



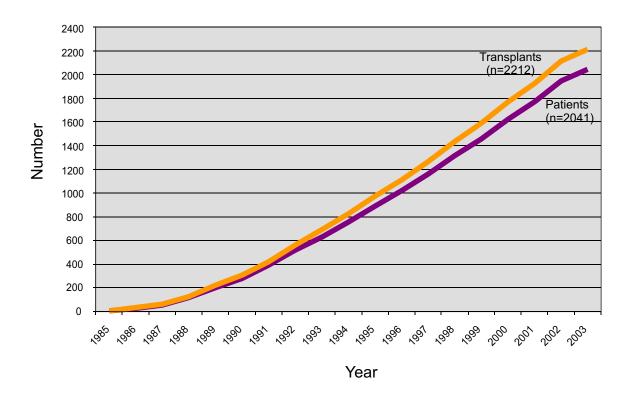
# **Summary**

#### **PAGE**

- 26. Children weighing < 8 kg at the time of transplant had inferior survival compared to heavier patients.
- 27. The type of primary graft, (whole, reduced or split liver), had no effect on patient survival in either children or adults.
- 28. Adult patients transplanted for biliary atresia had the best long term survival while those whose primary disease was malignancy had a significantly lower survival rate.
- 29. In children, patient survival was similar for all disease groups. There were no differences in survival between adults and children transplanted for fulminant hepatic failure with 5 year survival about 70%.
- 30. Recent cohorts of adult patients with a primary diagnosis of hepatitis B show a significantly improved survival which is not seen in adult patients with hepatitis C as primary disease. Patients transplanted for malignancy continue to have a poor outcome.
- Eleven patients have received a living related donor graft, 7 children and 3 adults as a primary graft and one child as a second graft.
- 32. Graft survival was significantly worse in second and third grafts.
- 32-33. Both split and other reduced grafts had lower graft survival in the early post-transplant years but an improving longer term outcome particularly for split grafts.
- 34. Vascular complications and rejection are the commonest indications for retransplantation
- 35-36. Over 50% of deaths have occurred within 6 months of transplant. Overall, sepsis and graft failure are the most frequent causes of death. Early graft failure is due to poor or no early graft function. After 1 year malignancy and graft failure from recurrent disease or chronic rejection cause most deaths. After 5 years cardiovascular disease and de novo malignancy are the most common.
- 37. Donor age has little effect on patient survival after transplantation. The fewer number of transplants in 2001 was a reflection of the decline in cadaveric donors in that year.

# Section 1

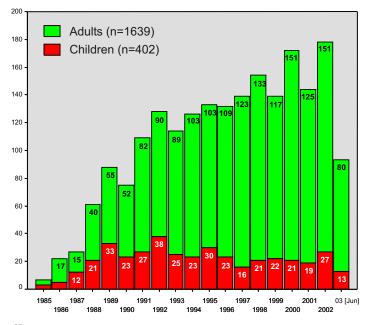
Demographic Data

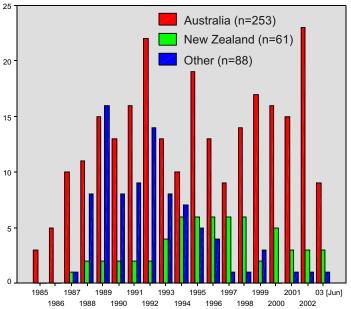


# **Summary Statistics - Age and Gender**

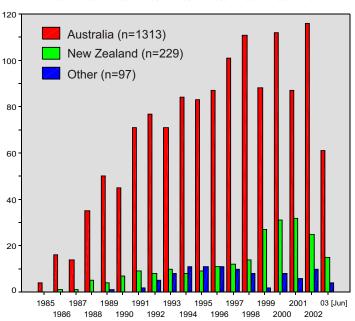
# ALL PATIENTS (AUSTRALIAN, NEW ZEALAND, OTHER)

	Children	Adults	Total					
Patients370	402	1639	2041					
Age								
Mean ± SD	4.5 ± 4.2	46.2 ± 12	38 ± 19.9					
Median	2.5y	48.1y	44.6y 24d - 70.9y					
Range	24d -14.9y	15.0 - 70.9y						
Gender								
Female	221 (55%)	646	1174 (58%)					
Male	181	993 (61%)	867 (42%)					
<b>Surviving</b> 314 (78%)		1229 (75%)	1543 (76%)					





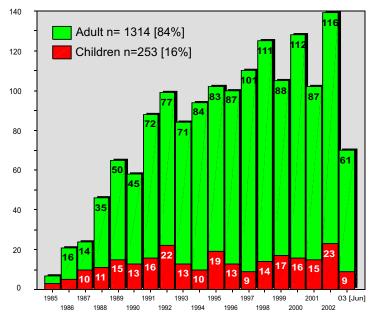
 $\frac{\text{Children}}{\text{n} = 402}$ 



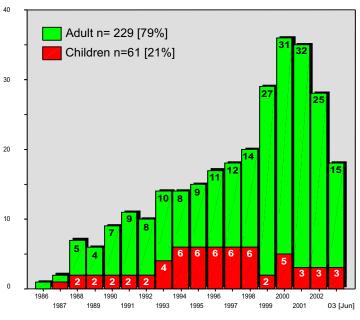
<u>Adults</u> n = 1639

Year of Transplant

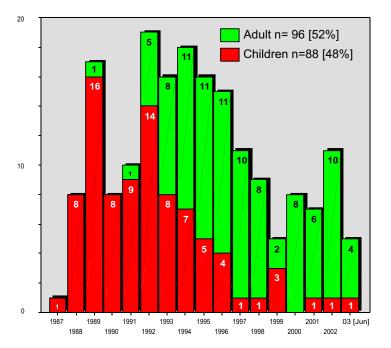




Australian Citizens n = 1567

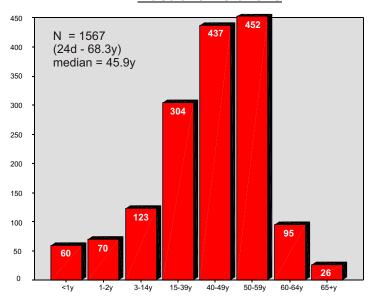


New Zealand Citizens n= 290

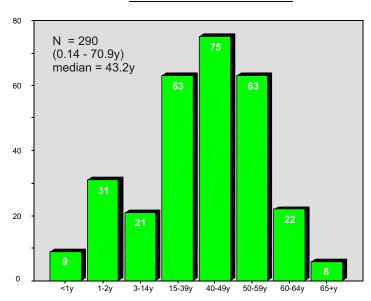


Other Citizens n= 184

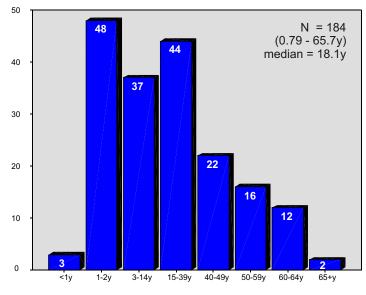
# **Australian Citizens**

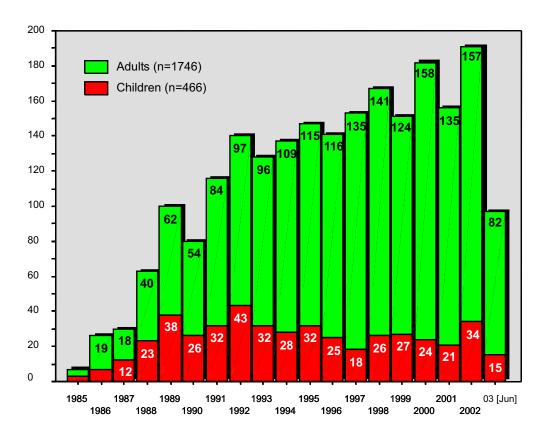


# **New Zealand Citizens**

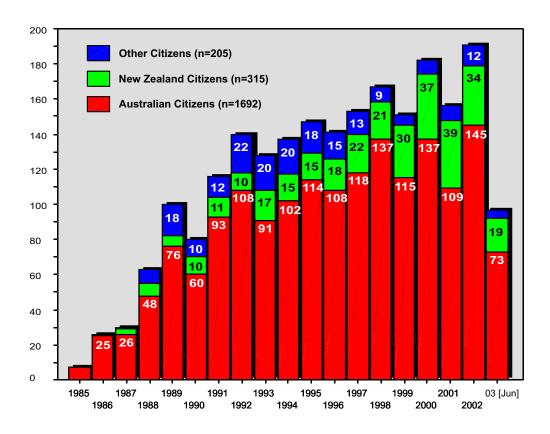


# **Other Citizens**





Year of Transplant

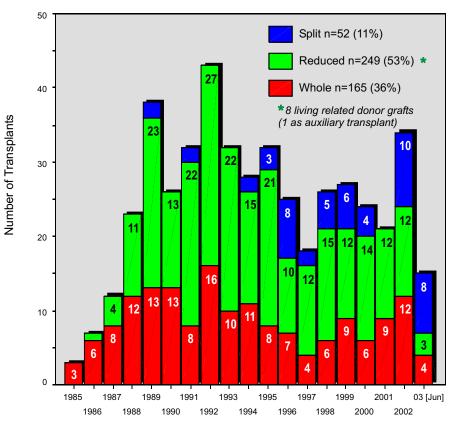


Year of Transplant



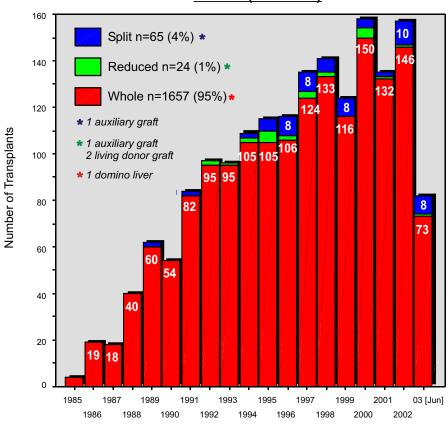
DATA TO 30/06/2003 SECTION 1 : DEMOGRAPHIC DATA

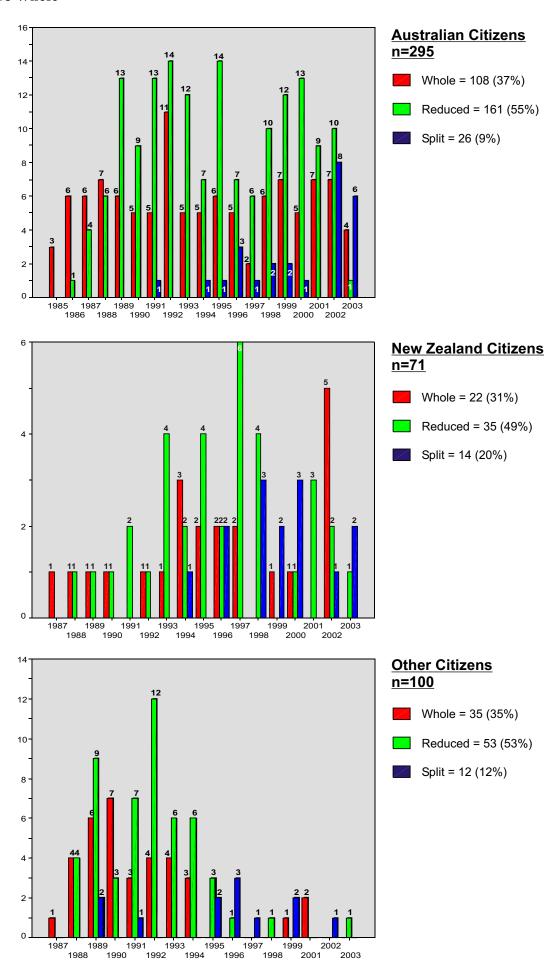
# Children (n = 466)



#### Year of Transplant

# Adults (n = 1746)

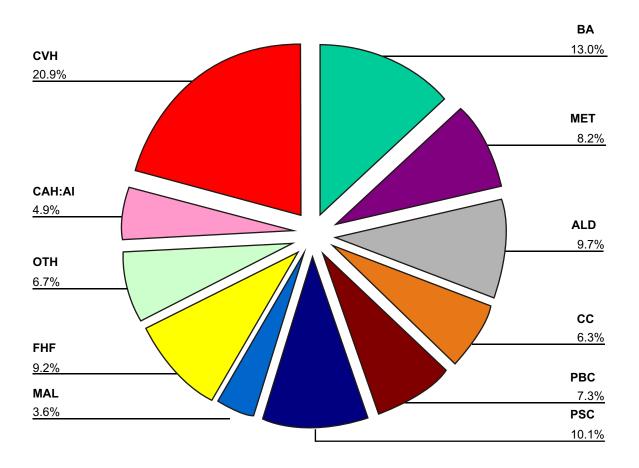




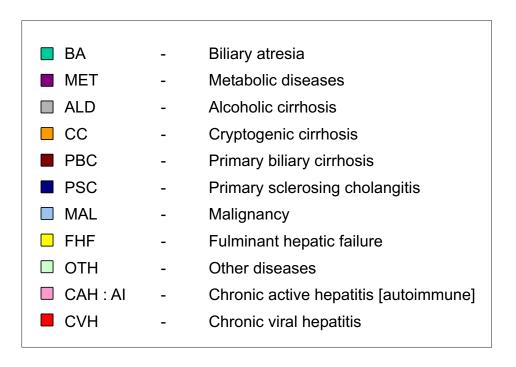
Year of Transplant

# Section 2

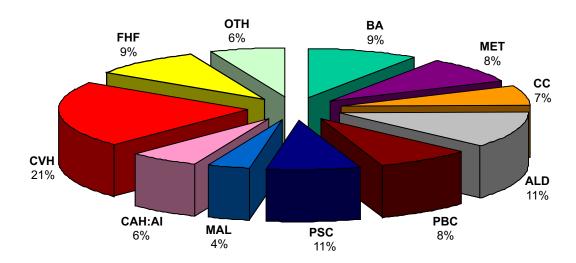
**Primary Diagnosis** 



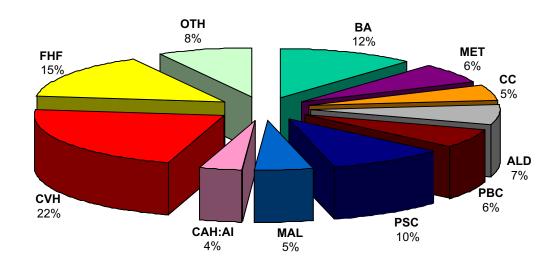
# **Disease Abbreviations**



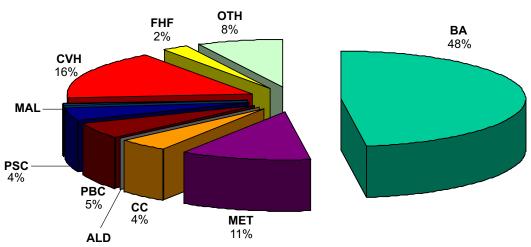
#### **Australian Citizens n=1567**



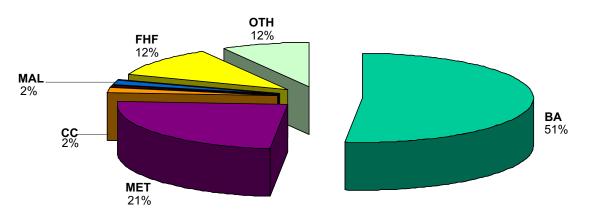
# New Zealand Citizens n= 290



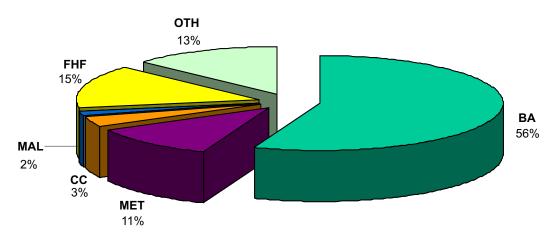
# Other Citizens n= 184



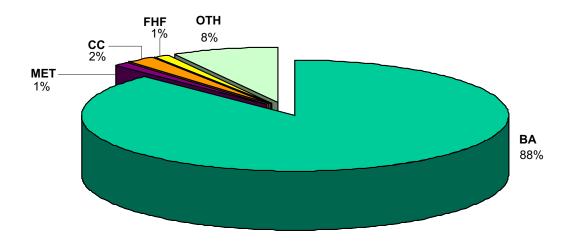
# **Australian Citizens**



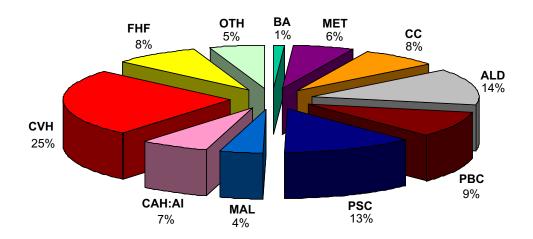
# **New Zealand Citizens**



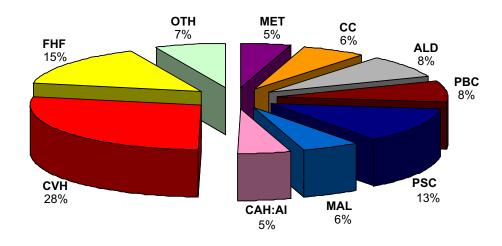
# **Other Citizens**



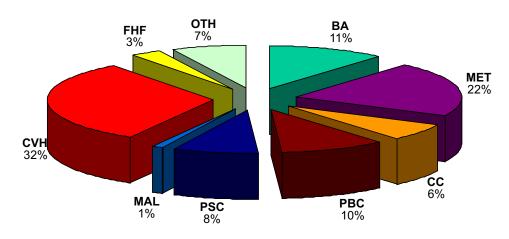
# **Australian Citizens**

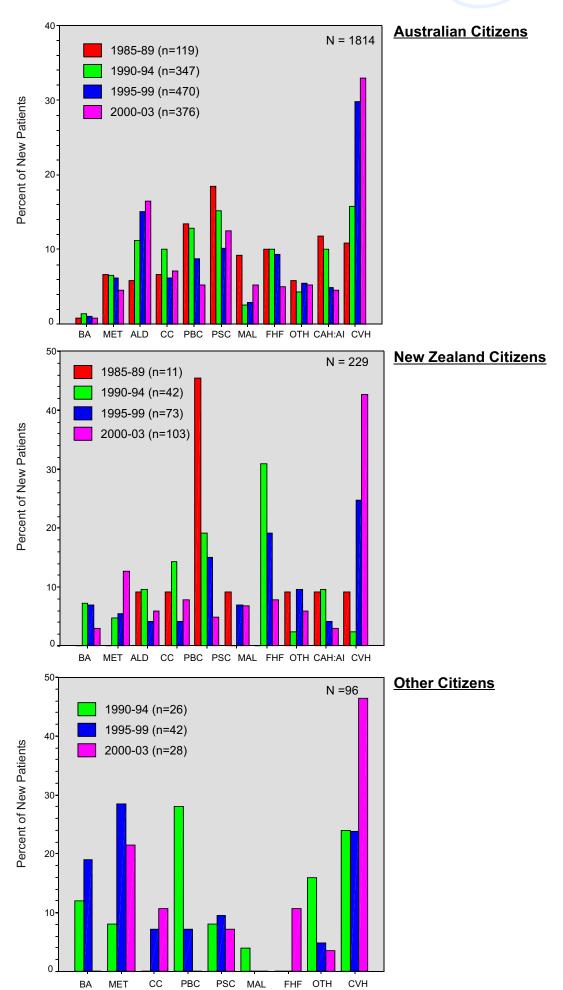


# **New Zealand Citizens**



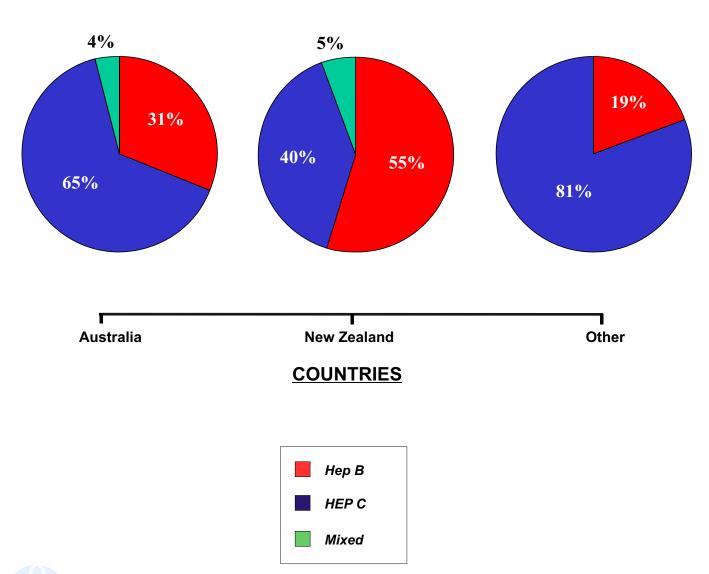
# **Other Citizens**





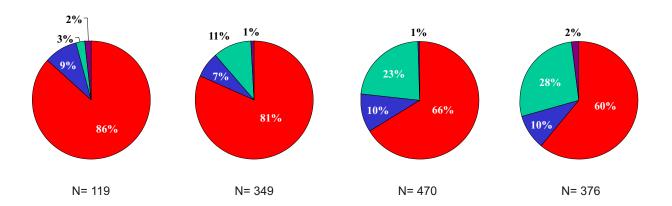
			Secondary Diagnosis			
Primary Diagnosis		n =	Hepatitis C	Hepatitis B	Hepatitis B,C	НСС
	Hepatitis C	264				48
	Hepatitis B	145				39
	Hepatitis	17				2
	BD/BC/BCD					
	HCC + cirrhosis	56	24	20	2	
	ALD	198	7			17
	Other	959	10	1		20
	TOTAL	1639				

# Type of Chronic Viral Hepatitis in Adult Patients

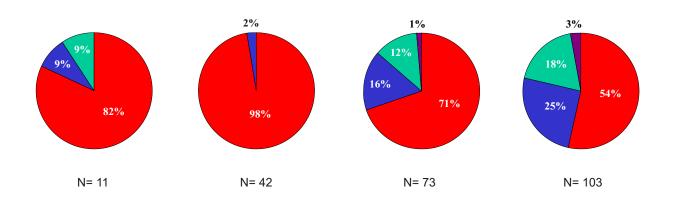




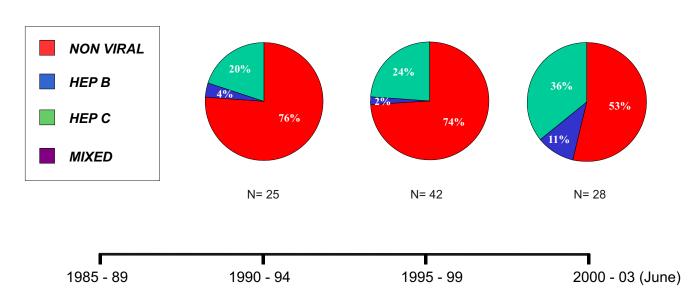
# **Australian Citizens**



# **New Zealand Citizens**

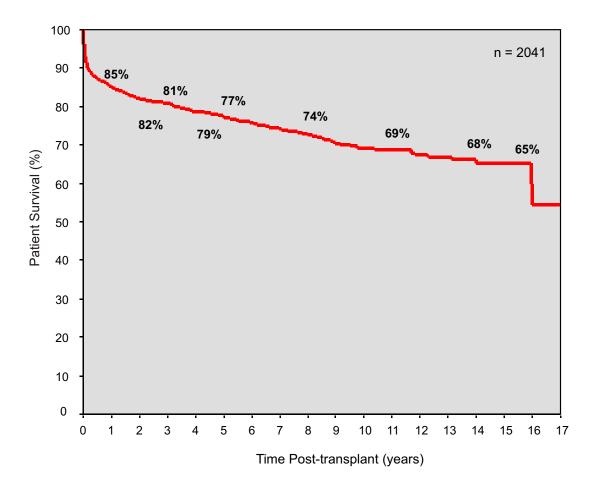


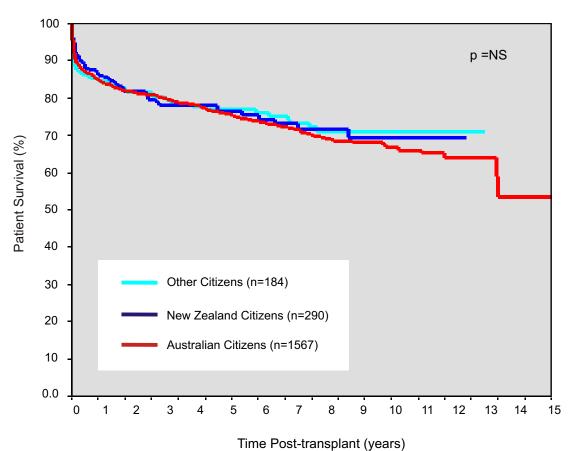
# **Other Citizens**

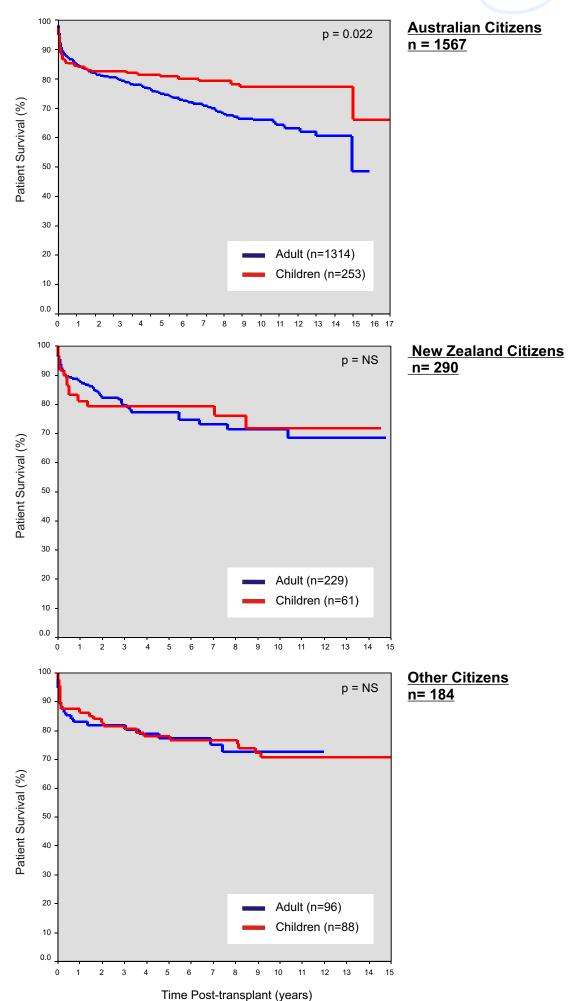


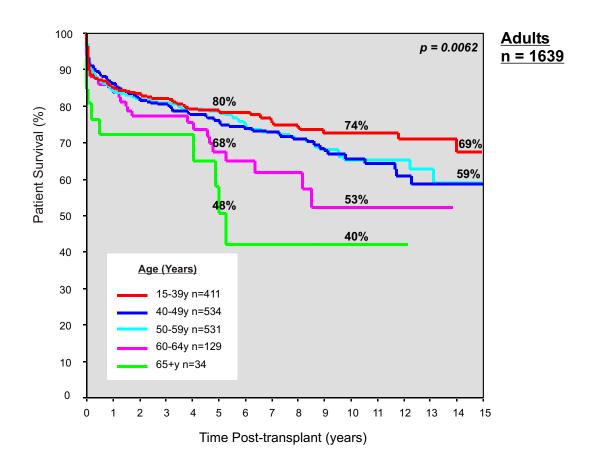
# Section 3

Patient Survival

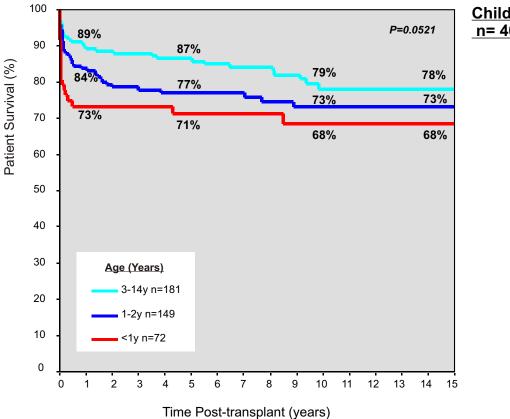


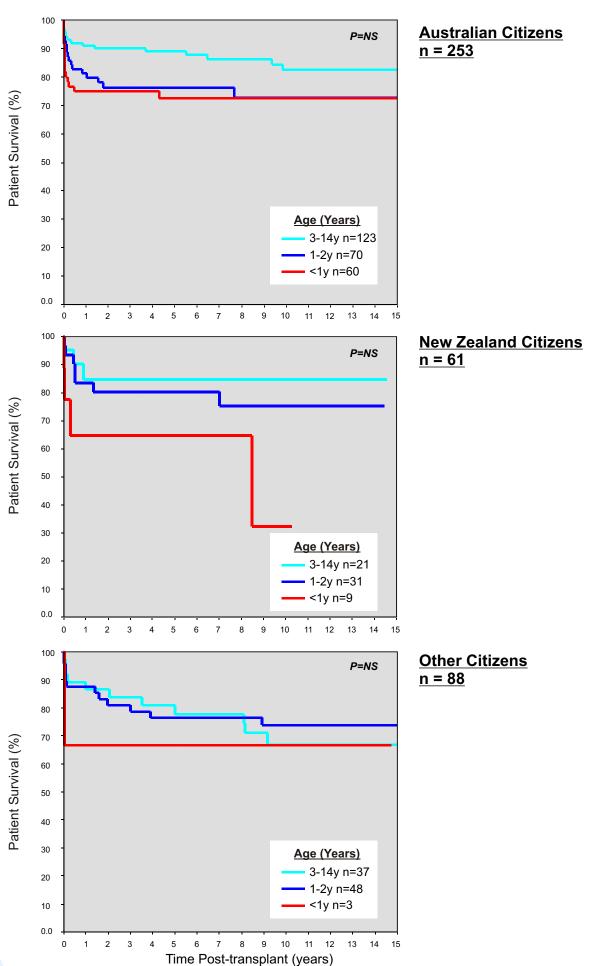




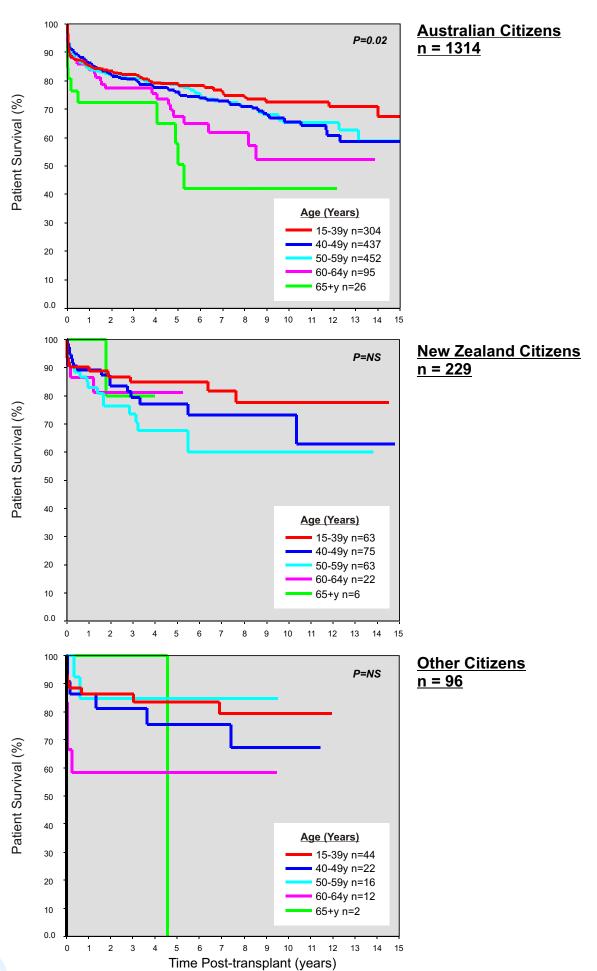


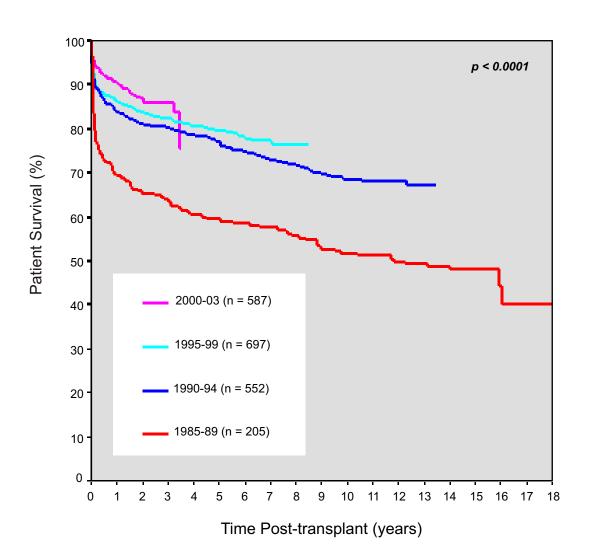


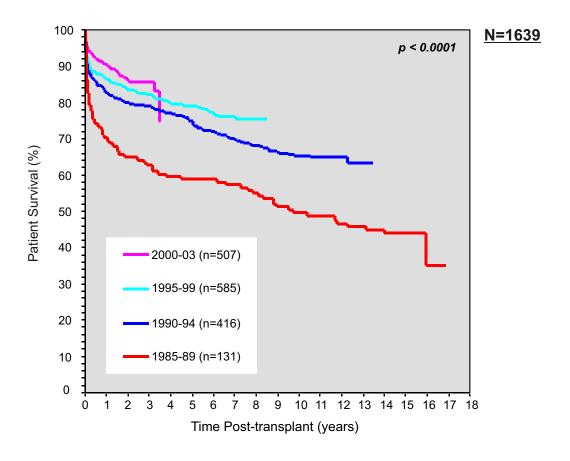




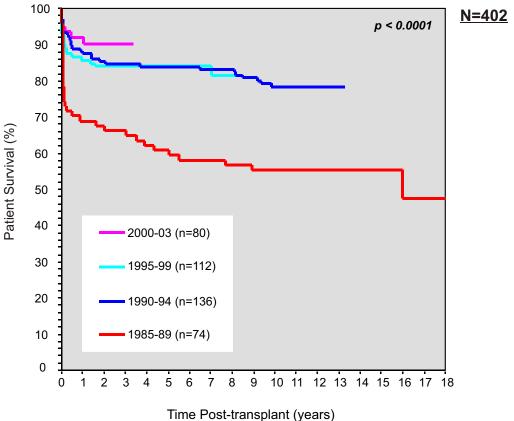
DATA TO 30/06/2003 SECTION 3 : PATIENT SURVIVAL

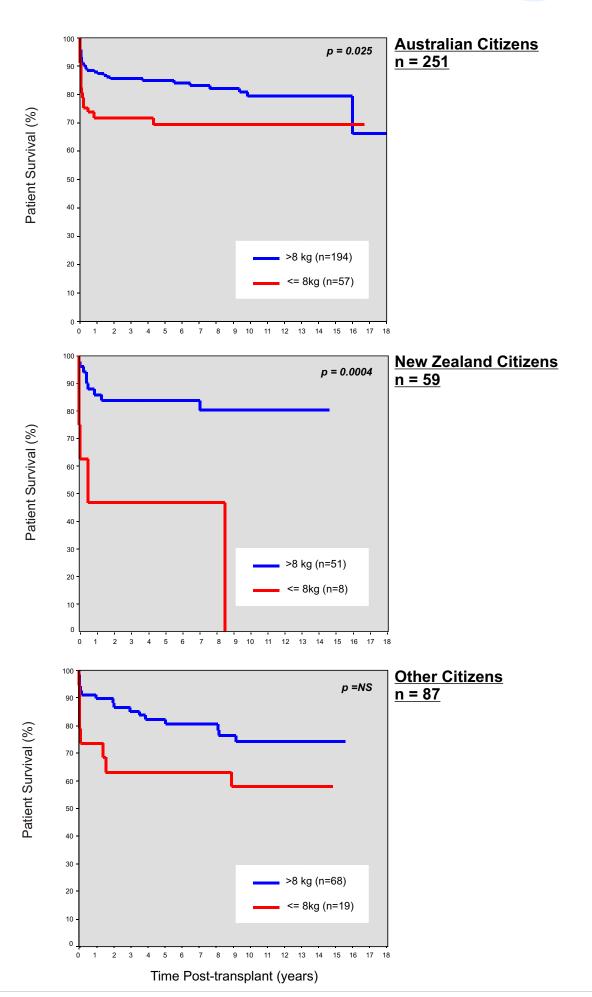


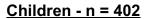


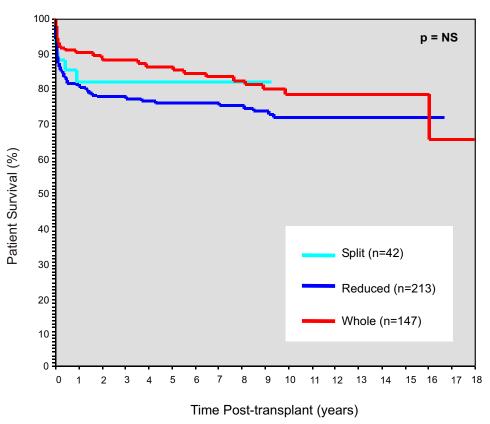


# **Patient Survival - Children**

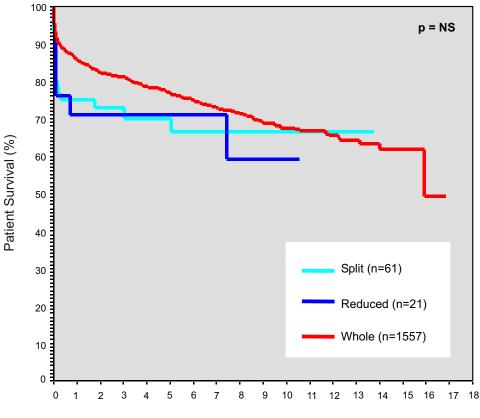






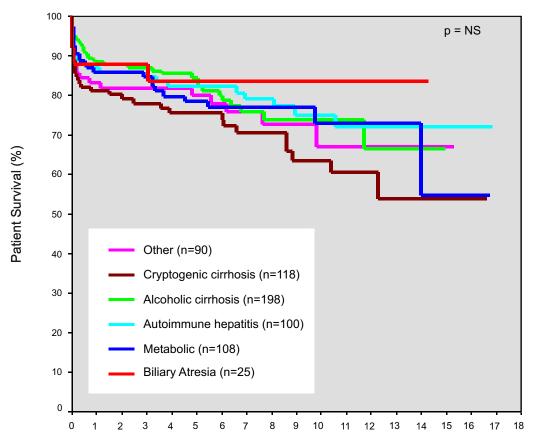


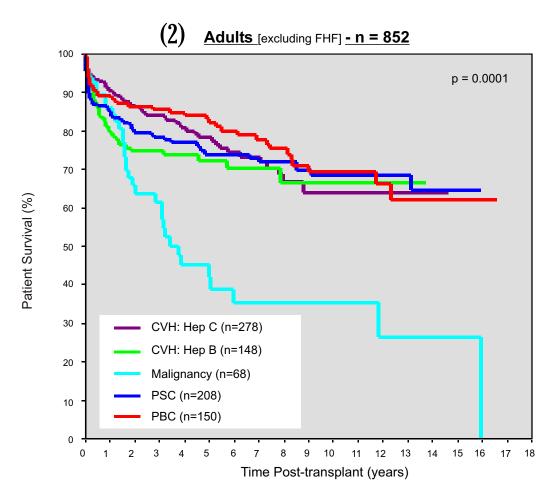
# Adults - n = 1639



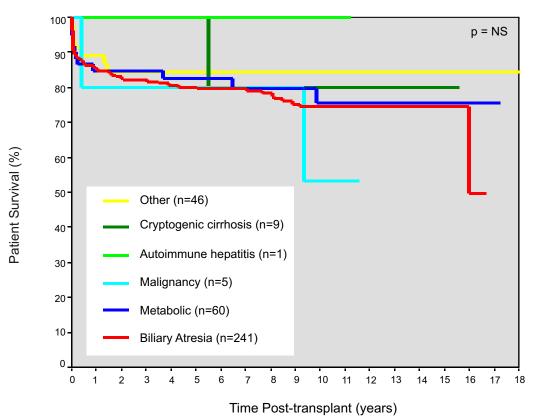
Time Post-transplant (years)



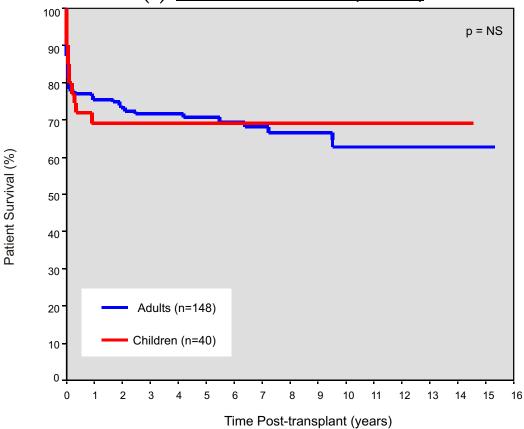


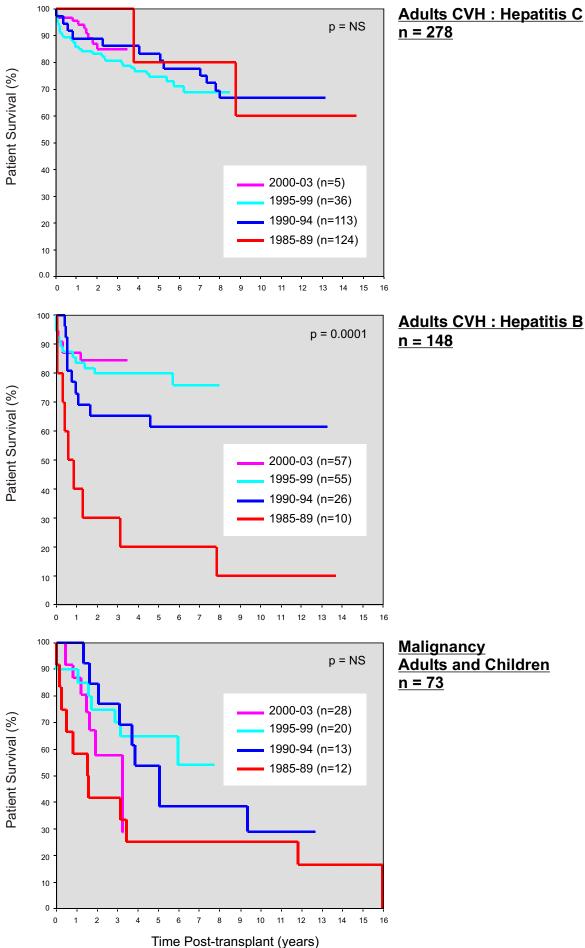


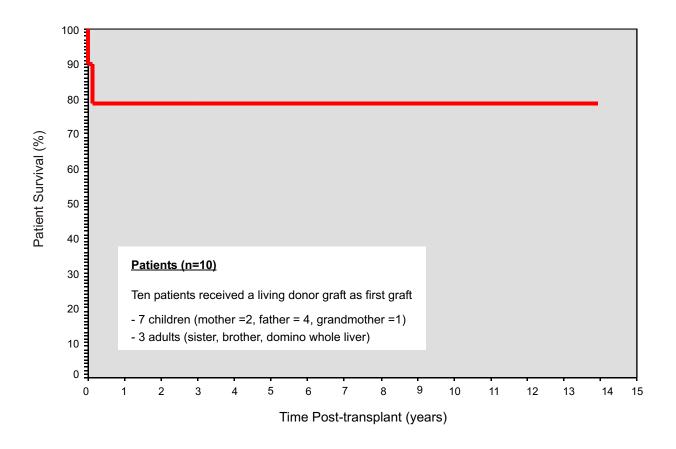
# (3) Paediatric recipients [excluding FHF] - n = 362

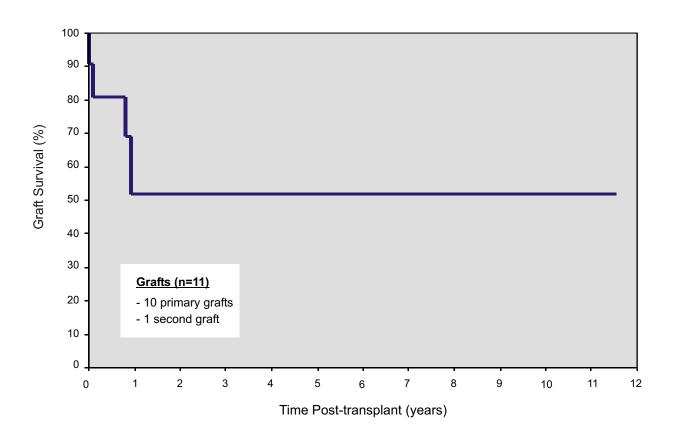


# (4) Acute fulminant failure ( n = 188)



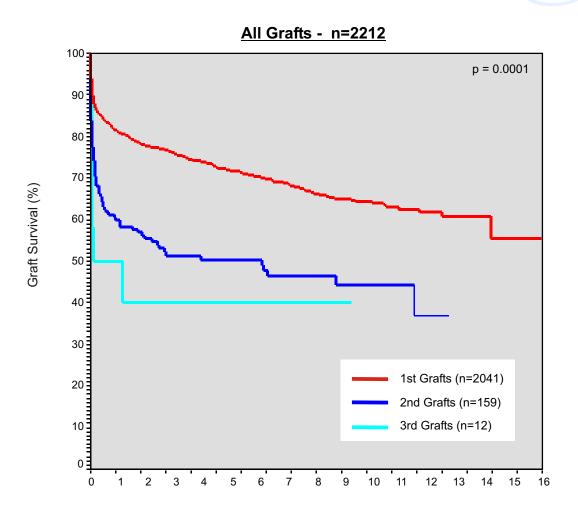


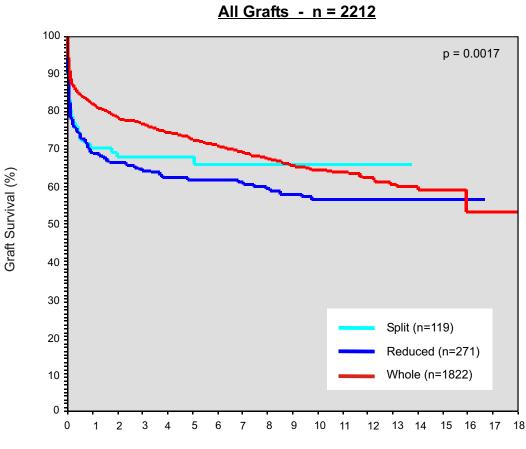




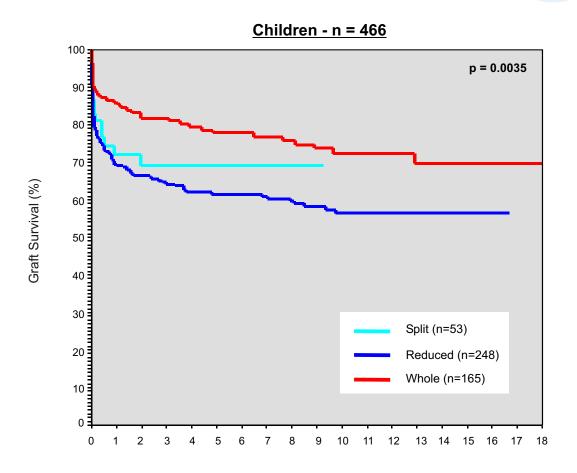
# Section 4

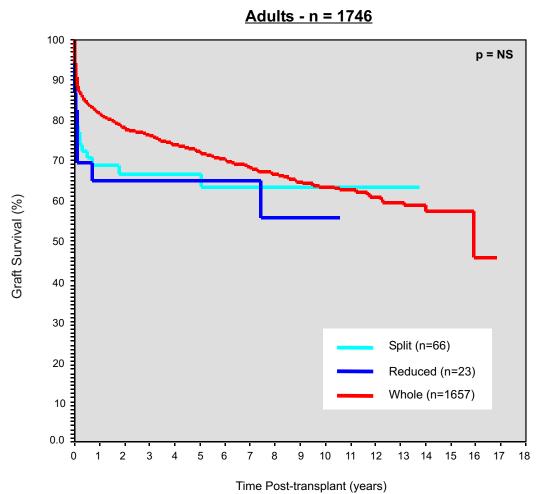
Graft Outcome

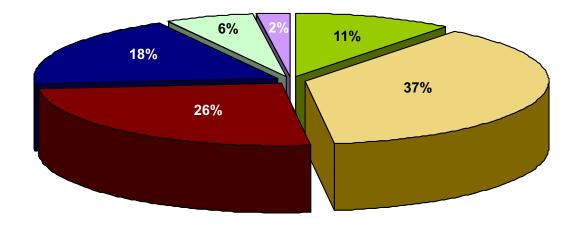




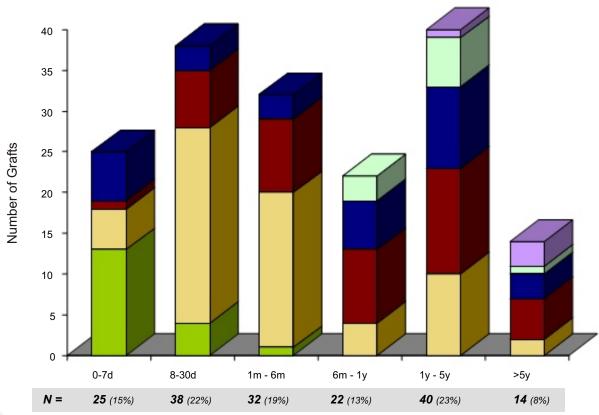
Time Post-transplant (years)







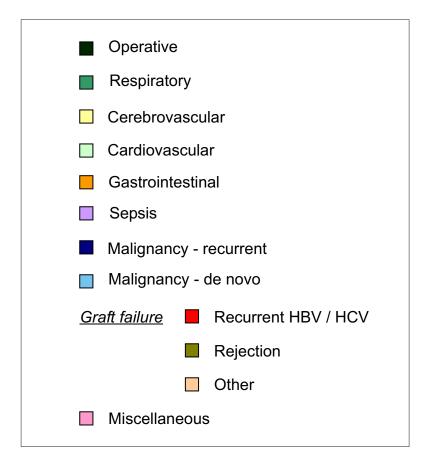
Recurrent PBC / PSC / CAH:AI
 Recurrent HBV / HCV
 Other
 Rejection
 Vascular
 PNF / poor graft function

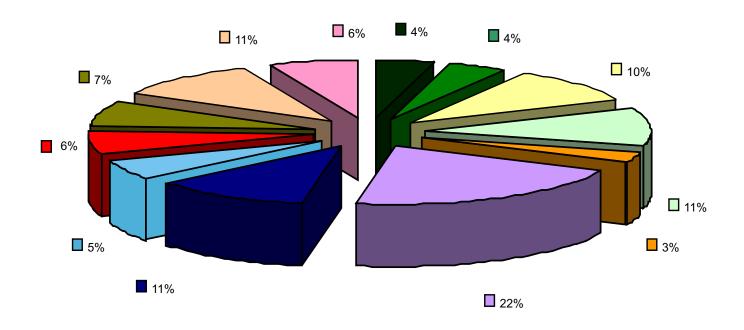


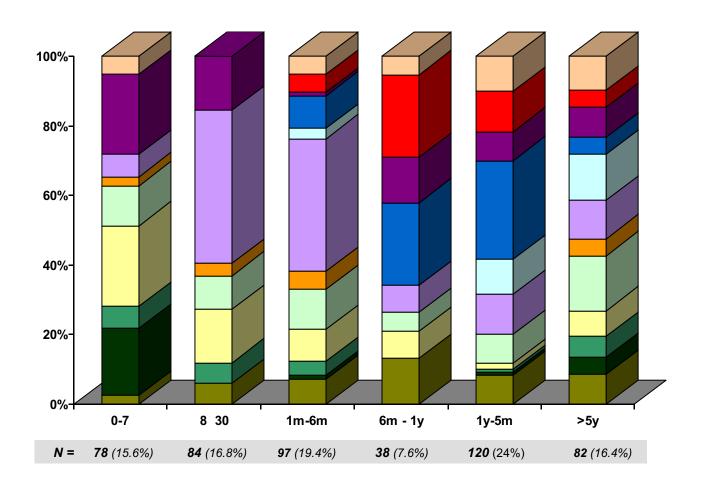
# Section 5

**Cause of Patient Death** 

#### All Patients n = 499 (?%)





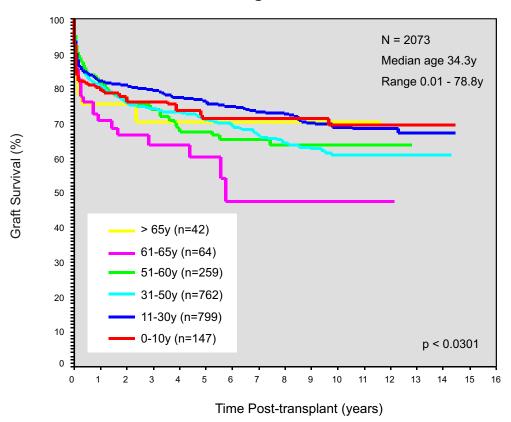




# Section 6

**Donor Information** 

#### **Donor Age vs Survival**



#### **Donation by Year**

	QLD	NSW	VIC/TAS	SA/NT	WA	NZ	TOTAL
1990	22	27	16	5		7	77
1991	29	35	20	6	8	11	109
1992	43	32	18	9	8	24	134
1993	28	40	25	12	6	16	127
1994	29	39	23	12	10	21	134
1995	29	44	24	17	8	21	143
1996	26	37	19	17	10	24	133
1997	31	49	19	19	8	22	148
1998	29	44	27	22	13	27	162
1999	15	31	31	29	11	27	144
2000	26	51	26	24	12	34	173
2001	37	40	26	14	9	29	155
2002	34	42	38	24	11	30	179
2003 (June)	18	19	20	5	10	15	87



### Appendix I

#### Liver Transplant Units of Australia and New Zealand

and

and

and

Australian National Liver Transplant Unit

Royal Prince Alfred Hospital

Missenden Road

**CAMPERDOWN NSW 2050** 

Email: anltu@cs.nsw.gov.au

http://www.cs.nsw.gov.au/Gastro/LiverTransplant/default.htm

The New Children's Hospital

Hawkesbury Road

WESTMEAD NSW 2145

Liver Transplant Unit

The Austin
Studley Road

HEIDELBERG VIC 3084

Royal Children's Hospital

Flemington Road

PARKVILLE VIC 3052

Queensland Liver Transplant Service

Princess Alexandra Hospital

Ipswich Road

WOOLLOONGABBA QLD 4102

Royal Children's Hospital

Bowen Bridge Road HERSTON QLD 4029

South Australian Liver Transplant Unit

Flinders Medical Centre

Flinders Drive

BEDFORD PARK SA 5042

http://www.flinders.sa.gov.au/flinders\_centre\_for\_digestive\_health/default.asp?NAVGRP=2135

WA Liver Transplantation Service

Sir Charles Gardiner Hospital

Verdun Street

NEDLANDS WA 6009

New Zealand Liver Transplant Unit

Auckland Public Hospital

Park Road

Auckland

New Zealand

Http://www.nzliver.org



## Appendix II

#### ANZLTR PRIMARY Diagnosis Metabolic disorders by Age Group and Country

Age group	Country			Total
Age group	AUSTRALIA	<b>NEW ZEALAND</b>	OTHER	
Children				
Wilson's disease	5	1	0	6
Haemochromatosis	0	1	0	1
1 Antitrypsin deficiency	23	4	0	27
Hypercholesterolemia	2	0	0	2
Tyrosinemia	4	0	0	4
Hyperoxaluria	4	0	1	5
Crigler-Najjer	3	0	0	3
Citrullinemia	1	0	0	1
Indian childhood cirrhosis	1	0	0	1
Urea cycle disorder	5	0	0	5
Other (mitochondrial disease,bile acid synthesis disorder,	4	1	0	5
Protein C deficiency, familial immunodeficiency)				
Total	52	7	1	60
Adult				
Wilson's disease	17	4	2	23
Haemochromatosis	19	2	0	21
1 Antitrypsin deficiency	29	1	0	30
Glycogen storage disease	1	0	0	1
Hypercholesterolemia	1	0	0	1
Familial / Amyloid Polyneuropathy	5	3	16	24
Hyperoxaluria	5	1	0	6
Crigler-Najjer	0	0	1	1
Citrullinemia	0	0	1	1
Total	77	11	20	108



### **Appendix III**

#### ANZLTR PRIMARY Diagnosis - Other by Age Group by Country

Age group		Country		
Age group	AUSTRALIA	NEW ZEALAND	OTHER	
Children				
PFIC	7	1	1	9
Secondary cirrhosis not specified	1	0	0	1
Secondary cirrhosis - cystic fibrosis	4	0	0	4
Caroli's	1	0	0	1
Choledochal cyst	0	0	1	1
Alagilles syndromic	13	5	3	21
Alagilles non-syndromic	1	1	0	2
Chronic Budd Chiari	1	0	0	1
Histiocytosis X	2	0	1	3
Neonatal hepatitis	1	1	1	3
Total	31	8	7	46
Adult				
PFIC	2	0	2	4
Secondary cirrhosis not specified	8	1	0	9
Secondary cirrhosis - cystic fibrosis	4	1	0	5
Secondary cirrhosis - hepatolithiasis	3	0	1	4
Caroli's	8	0	2	10
Alagilles	1	0	0	1
Cirrhosis specify	1	0	0	1
Cirrhosis - NAFLD or NASH	3	3	0	6
Cirrhosis - granulomatous hepatitis	1	1	0	2
Benign - adenomatosis	1	0	0	1
Benign-haemangioma	1	1	0	2
Other-specify #	5	2	1	8
Chronic Budd Chiari	15	6	1	22
Ductopenia	2	0	0	2
Nodular regenerative hyperplasia	3	0	0	3
Liver trauma	1	0	0	1
Polycystic liver disease	5	0	0	5
Polycystic liver & kidney disease	4	0	0	4
Total	68	15	7	90

<sup>#</sup> Vanishing bile duct syndrome
Haemangiotelangiectasia
Veno-occlusive disease
Chronic Active Hepatitis A
Non-cirrhotic portal hypertension
Kassabach-Merritt syndrome
Arterial-venous malformation
Hereditary haemorrhagic telengectasia



## **Appendix IV**

# ANZLTR PRIMARY Diagnosis Fulminant Hepatic Failure by Age Group by Country

Age group		Country		
Age group	AUSTRALIA	<b>NEW ZEALAND</b>	OTHER	
Children			,	
Acute - Wilson's	3	0	1	4
Acute - Drug	2	0	0	2
Acute Unknown/unspecified	21	7	0	28
Acute Post liver resection	0	1	0	1
Acute NonA-NonB	1	0	0	1
Acute - 1 Antitrypsin deficiency	2	0	0	2
Subacute Unknown/unspecified	1	1	0	2
Total	30	9	1	40
Adult				
Acute Hepatitis A	1	0	0	1
Acute Hepatitis B	11	6	1	18
Acute Autoimmune Hepatitis	1	2	0	3
Acute - BUDD CHIARI	1	1	0	2
Acute Wilson's	8	1	0	9
Acute - Paracetamol	5	1	0	6
Acute Other drugs	9	1	0	10
Acute - Herbs	2	0	0	2
Acute Unknown/unspecified	41	10	1	52
Acute Hepatitis E	1	0	0	1
Acute - NANB	6	3	0	9
Subacute Autoimmune hepatitis	3	1	0	4
Subacute - Hepatitis - A	0	0	1	1
Subacute Hepatitis B	5	1	0	6
Subacute Unknown/unspecified	12	8	0	20
Subacute - Drug	2	0	0	2
Subacute - Wilson's	2	0	0	2
Total	110	35	3	148