

AUSTRALIA & NEW ZEALAND

LIVER TRANSPLANT REGISTRY



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

DATA TO 31-12-2007

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STATISTICAL METHODS

Kaplan-Meier survival curves have been produced using SPSS® for Windows™ Release 16.0, SPSS Inc.

ACKNOWLEDGMENT

The Cancer Registry is maintained at Transplantation Services, Royal Prince Alfred Hospital, Sydney. Report prepared by Pamela Dilworth and Dr Deborah Verran.

Director: Professor G.W McCaughan
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Preface

We are pleased to present the 19th Report of the Australia and New Zealand Liver Transplant Registry (ANZLTR). This report contains data to the 31st December 2007 and analyses the cumulative data since the establishment of the first liver transplantation unit in Australia or New Zealand in 1985.

The Australia and New Zealand Liver Transplant Registry (ANZLTR) is a collaborative effort of the liver transplantation centres in Australia (Adelaide, Brisbane, Melbourne, Perth, Sydney) and New Zealand (Auckland). The Registry is supervised by the Management Committee who are involved in the ongoing supervision of the development of the Registry. The members of the Management Committee are listed on the front page.

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 the staff of all the Liver Transplant Units who now contribute their data by direct entry into the ANZLTR database. A full list of the Units and their contact information can be found in Appendix I. In particular we are grateful to the efforts of Pamela Dilworth, Program Manager for her continuing contribution to the maintenance of the Cancer Registry which is based at the Royal Prince Alfred Hospital, Sydney and who, together with Dr Deborah Verran, prepares the Cancer Report.

The registry now has financial support and we are grateful to the Commonwealth Department of Health and Aging [DHA] for their financial contribution. Recent additional support from the DHA is allowing expansion of the information collected in the data base and we look forward to incorporating the new data in future reports.

Comments are always welcome and should be forwarded to the Coordinating Centre at the contact information listed on the front page as should requests for further copies of this Report. The report is now also available on the ANZLTR public web site www.anzltr.org from where the report can be downloaded. Slides are available on request from the Coordinating Centre.

Stephen Lynch
Glenda Balderson

Summary

Page

5. Between January 1985 and 31st December 2007, 3076 orthotopic liver transplants (OLT) were performed in Australia and New Zealand on 2850 patients, 2332 adult patients (> 15 years) [82%] and 518 children [18%]. The median age of all recipients was 46.2 years. The ages ranged from 24 days to 73.1 years. There is a significant difference in gender distribution between children (M=47%) and adults (M=63%).
6. There was a decrease in the total number of new patients transplanted in 2007 compared with the previous 3 years, particularly for adult recipients. but there was an increase in the number of new paediatric patients compared with 2006.
7. The trend to increasing age of adult recipients in recent years continued and the overall adult median age is now 49.1 years. The median age of new adult recipients in 2005-07 was 51.4 years.
- 8-9. Four fewer transplants were performed in 2007 then in 2006. Split grafts now make a significant contribution to the total number of paediatric transplants performed providing 16 of 32 [50%] grafts in 2007 and 111 of 592 [19%] overall. In children, other reduced size grafts have been used in 290 [49%] cases including 24 living donor grafts. One child has been treated with liver cell implantation. Of adult patients, 152 have received reduced size grafts - 125 split liver grafts (including 1 as auxiliary graft), 24 other reduced size grafts (1 as auxiliary graft) and 5 living donor grafts. One domino transplant of a whole liver has been performed.
- 10-11. 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 hepatitis C [CVH : HCV] is the primary disease in 19% of recipients and chronic hepatitis B [CVH : HBV] in 7 %. Full details of specific diagnoses categories by age group are listed in the Appendices for - Metabolic disorders (Appendix II), Other diseases (Appendix III), Fulminant Hepatic Failure (Appendix IV). The number of patients transplanted for non alcoholic fatty liver disease [NAFLD/NASH] continued to increase with 6 new patients transplanted in 2007 (Appendix III).
- 12-14. The number of adult patients transplanted with a primary diagnosis of chronic viral Hepatitis B, C or B/C/D remained static in 2005-07 compared with the previous era.- 2000-04, 35% primary diagnosis CVH [25% Hepatitis C, 8% Hepatitis B and 2% Hepatitis B,C,D]; in 2005 -07, 34% primary diagnosis CVH [27% Hep C, 5% Hep B, 2% Hep B/C/D]. When patients with either primary or secondary diagnosis of Hepatitis B ,C or both are included, the overall incidence of CVH in new adult patients in 2007 was 45%.
15. Current 1 year patient survival of all patients is 87% at 1 year, 79% at 5 years and 71% at 10 years. Children had a significantly better survival rate than adults.
16. Whilst older children had superior survival than infants and babies, older adult recipients (60-65 and >65 years) had poorer longer term outcomes.
- 17-18. Patient survival in 2000-04 cohort shows continued improvement in outcome for the first 5 years compared with earlier cohorts. This is seen in both children and adults.
19. The type of primary graft,(whole , reduced or split liver), had no effect on patient survival in either children or adults.
20. Children weighing < 8 kg at the time of transplant had inferior early survival compared to heavier patients.
21. Adult patients transplanted for biliary atresia or hepatitis virus coinfections had the best long term survival while those whose primary disease was malignancy had a significantly lower survival rate. Longer term survival for patients transplanted for Hepatitis C was also lower.
22. 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 [acute and sub-acute] with 5 year survival of 74%.
23. 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.

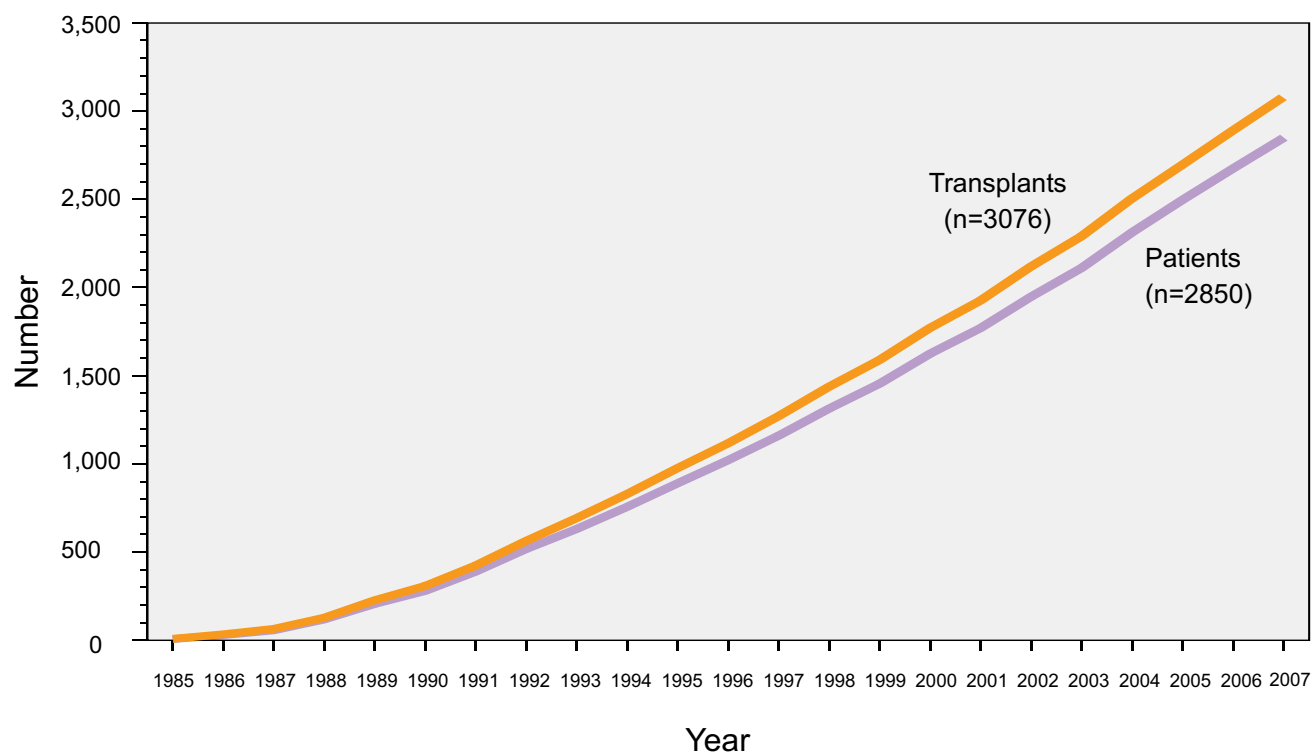
Summary

24. Graft survival was significantly worse in second and third grafts.
25. Both split and other reduced grafts had lower graft survival in the early post-transplant years in both children and adults but had an improving longer term outcome particularly for split grafts.
26. Vascular complications and rejection were the commonest indications for retransplantation. Ten percent of retransplants were due to poor early graft function. Recurrent disease was the indication for retransplantation in 11% of cases [5% PSC,PBC and 6% HBV,HCV].
- 27-28. Overall, sepsis is the most frequent cause of death. Full details of Miscellaneous and Other Graft Failure deaths are listed in Appendix V. Forty-one percent of all deaths occurred within 6 months of transplant. Early graft failure was due to poor or no early graft function. By 1 year malignancy and graft failure from recurrent disease or chronic rejection cause most deaths.
29. There was a fall in the in number of cadaveric donors in 2007 resulting in fewer transplants from deceased donors then in 2006. The number of transplantable grafts was increased by splitting sixteen deceased donor grafts and using livers donated after cardiac death [3 in 2007]. However for the first time , the number of people on the waiting list at 31 December 2007 exceeded the total number of transplants performed in 2007.
30. Donor age has increased significantly in recent years. Long term graft survival trends lower in several age groups but not for those over 65 years.
31. Thirty patients [24 children, 6 adults] have now received a living donor graft with 8 performed in 2007. Twenty eight were transplanted as a primary graft , 1 second and 1 as a third graft. The median age of the donors was 35.3 years with a range of 22.8 to 54.5 years. One adult graft was a domino graft.
32. The numbers of patients waiting for transplant increased markedly with 195 patients awaiting a transplant at the end of 2007 compared with 133 at 31st December 2006. Delistings due to death, becoming too ill or tumour (HCC) progression were increased to 12.5%. Fifty patients were listed as urgent in 2007 [18 Category 1 and 32 Category 2]. In 2007 the majority of urgently listed patients received a timely transplant.
- 33-34. Waiting times continue to increase with some patients waiting years to receive a graft. Blood group O patients tend to have the longest waiting times.
- 35-38. Five hundred and eighty six patients (21%) have had a pre- or post-transplant cancer. One hundred and forty four (5%) of patients were transplanted for liver malignancy and 33 [23% of these patients] have died from this cancer.
- 39-42. Two hundred and ninety one patients had liver cancer as a secondary diagnosis with hepatocellular carcinoma the most common. However those with cholangiocarcinoma had significantly poorer survival.
- 42-43. De novo non skin cancers (170) have developed in 161 (6%) patients and 61 [38%] have died from this cancer. Cancers of the alimentary tract (54, 34%) and lymphoma (54, 34%) predominate. Patients with either de novo non skin cancers or liver cancers have significantly worse long term survival.
44. Lower GI cancers (35) account for 65% of alimentary tract cancers.
- 45-46. The incidence of de novo non skin cancers varies according to pre transplant liver disease, with the incidence of Primary Sclerosing Cholangitis and de novo malignancy being statistically significant ($p<0.0001$).
- 46-47. Three hundred and forty eight (12%) patients have developed 2223 skin cancers with 147 patients having multiple skin cancer types.
47. The cumulative risk of diagnosis on any cancer post transplant is approaching 40% by 20 years.

Section 1

Demographic Data

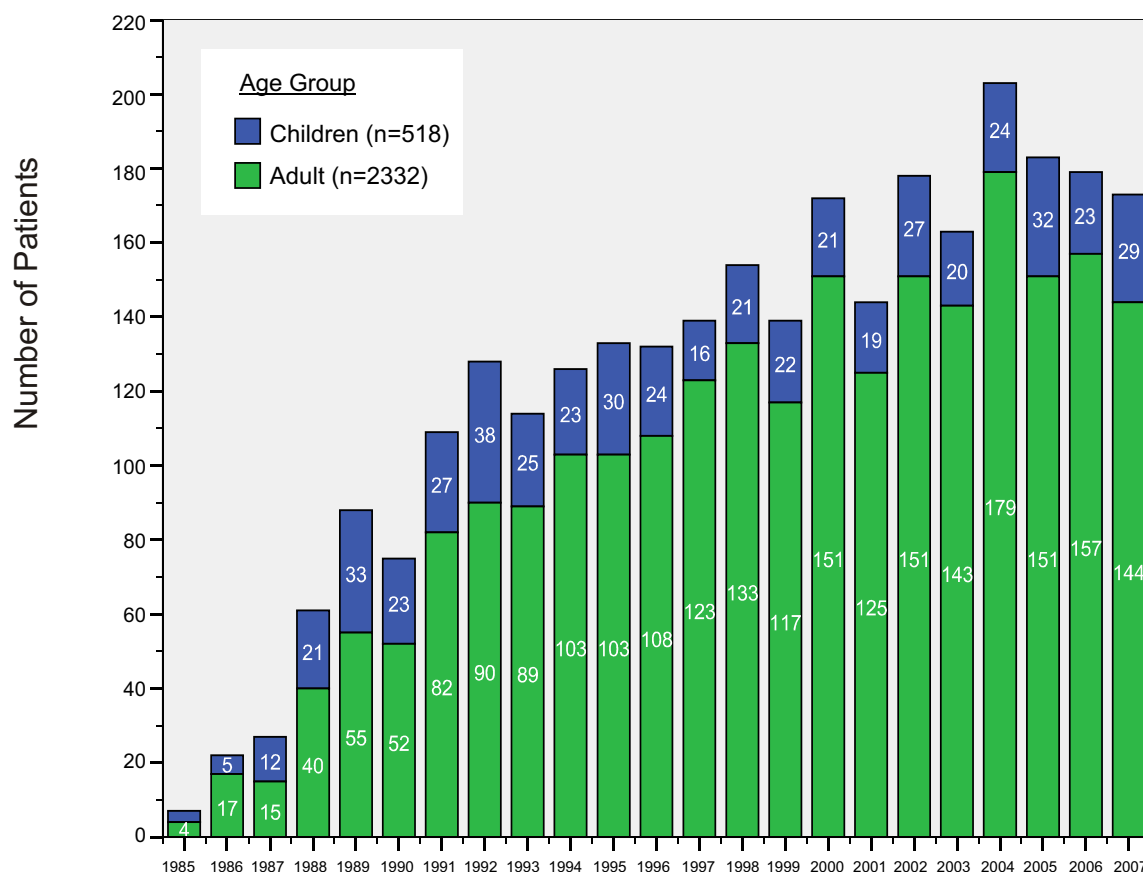




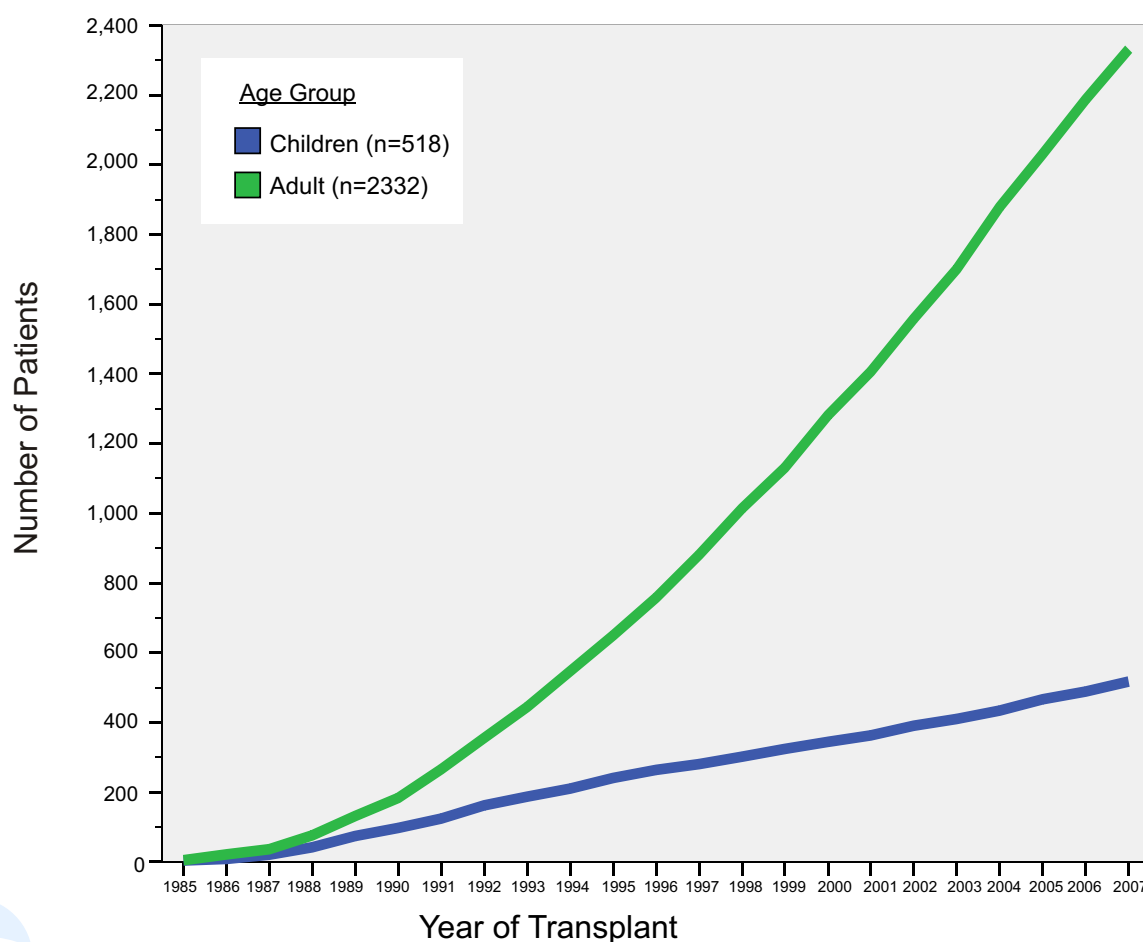
Summary Statistics - Age and Gender

ALL PATIENTS TRANSPLANTED

	Children	Adults	Total
<i>Patients</i>	518	2332	2850
Age			
<i>Mean ± SD</i>	4.3 ± 4.2y	47.3 ± 11.8y	39.5 ± 19.8y
<i>Median</i>	2.4y	49.1y	46.2y
<i>Range</i>	24d -14.9y	15.0 - 73.1y	24d - 73.1y
Gender			
<i>Female</i>	275 (53%)	871 (37%)	1146 (40%)
<i>Male</i>	243 (47%)	1461 (63%)	1704 (60%)
Surviving	411 (79%)	1708 (73%)	2119 (74%)

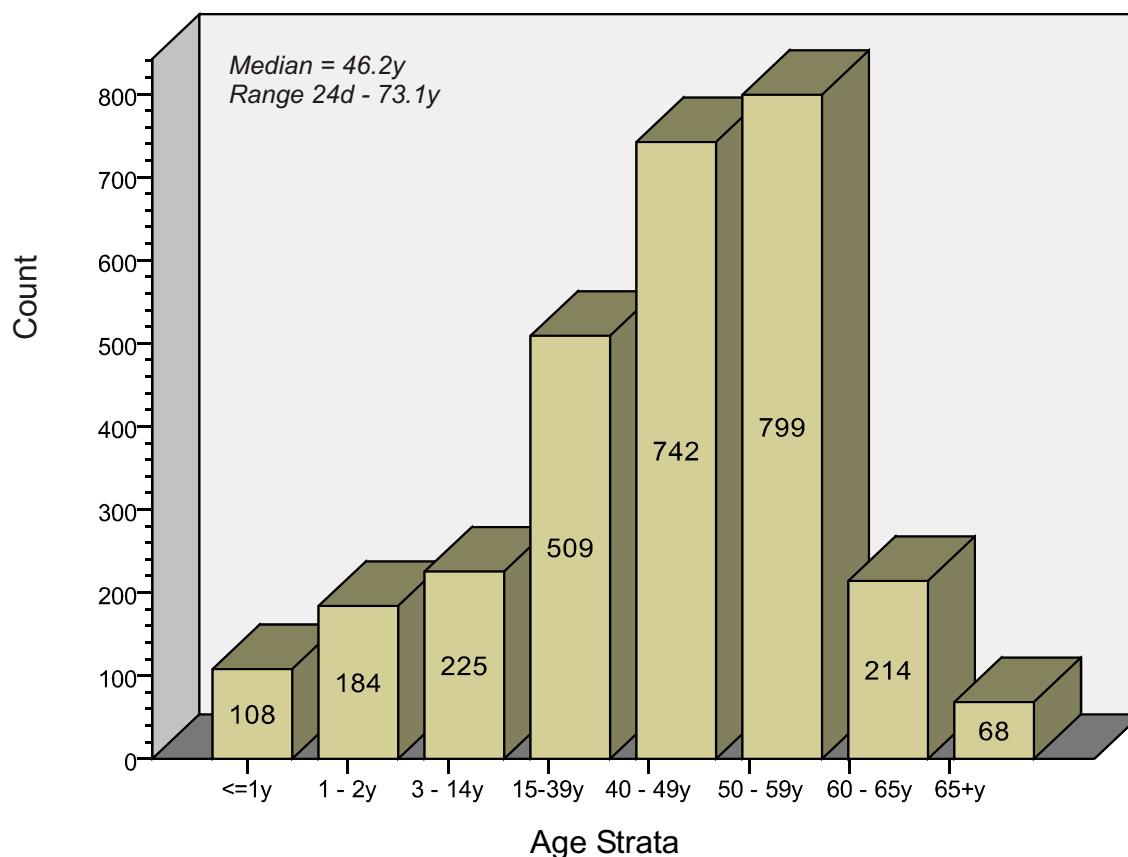


Cumulative Number of New Patients Transplanted

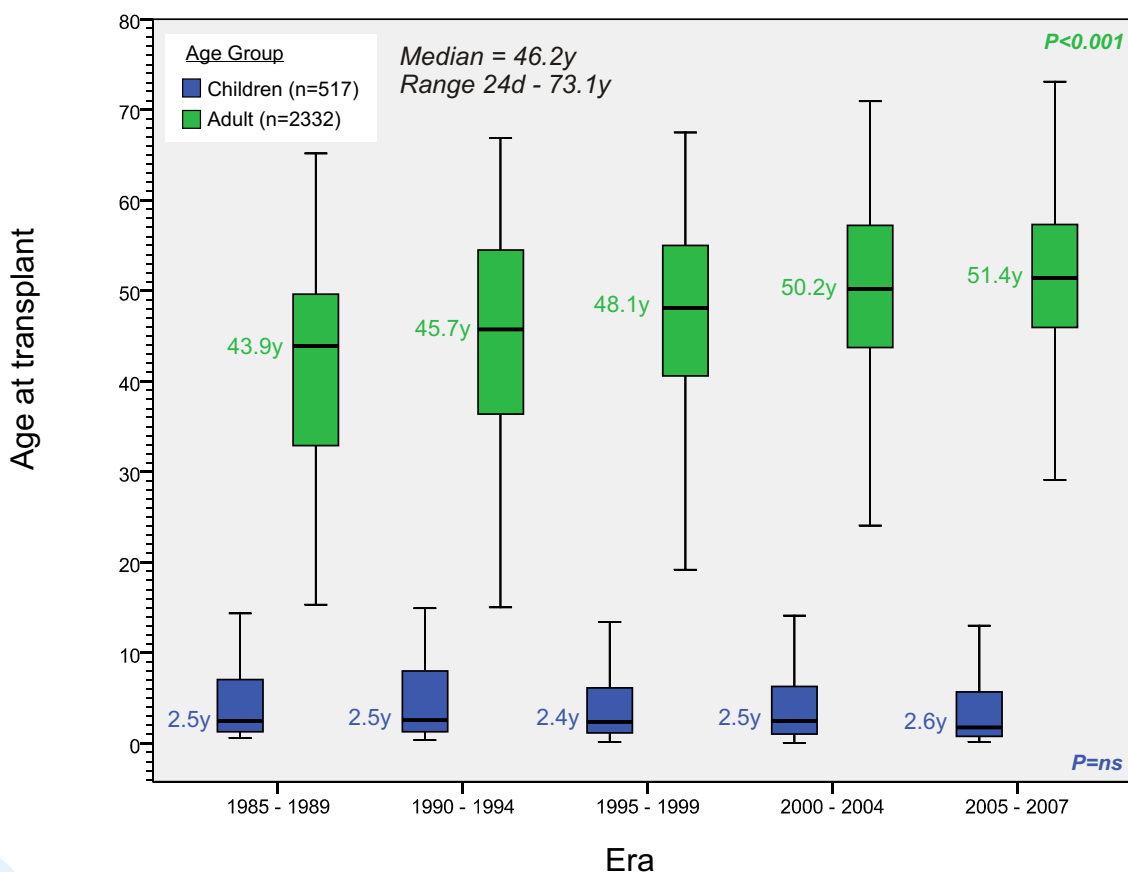


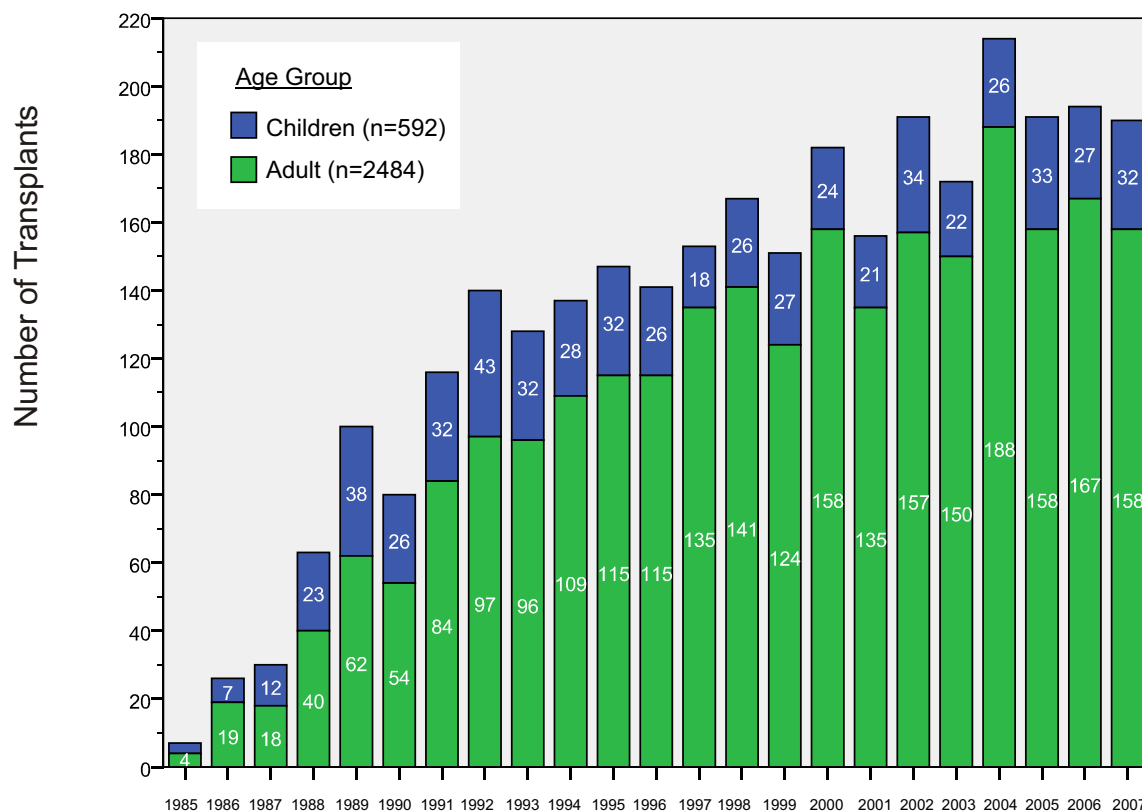
Number of Recipients By Age at Primary Transplant

N=2849

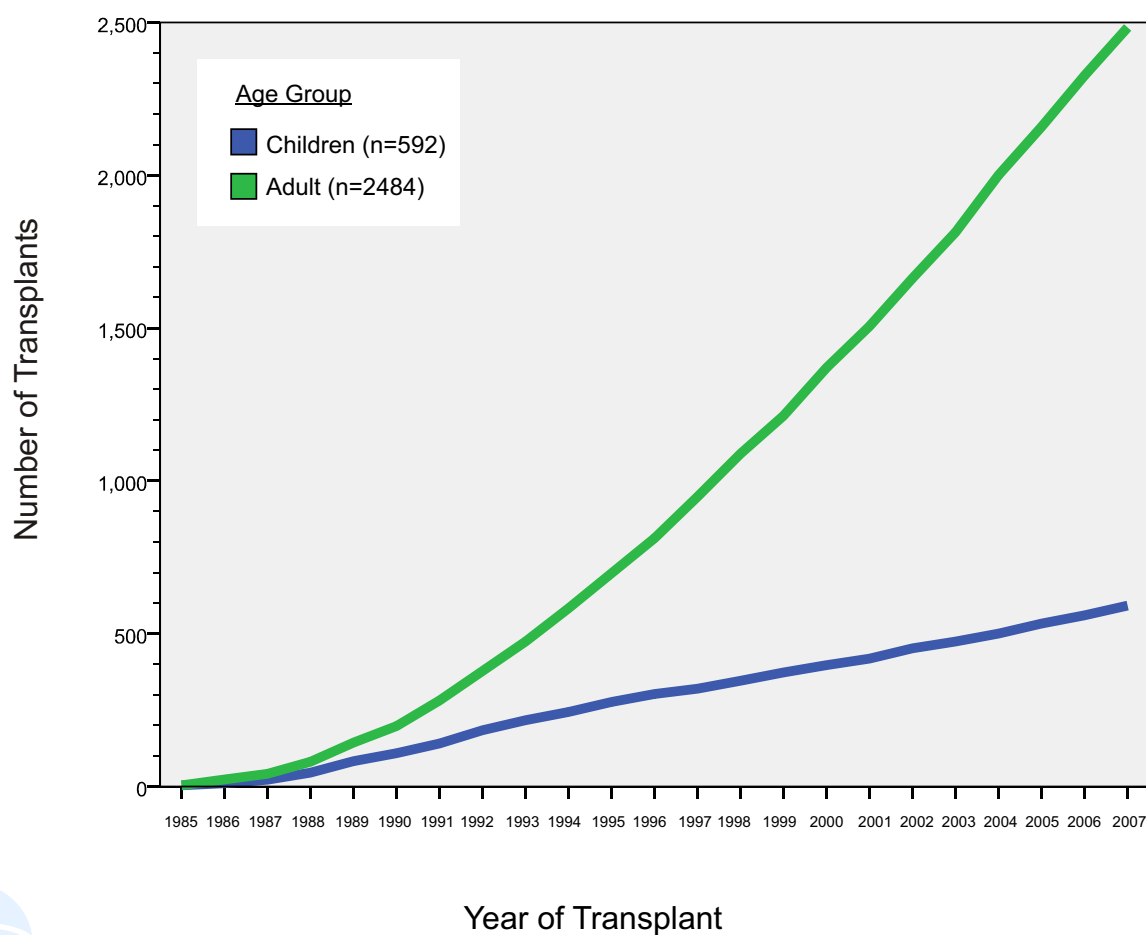


Age at Primary Transplant by Era



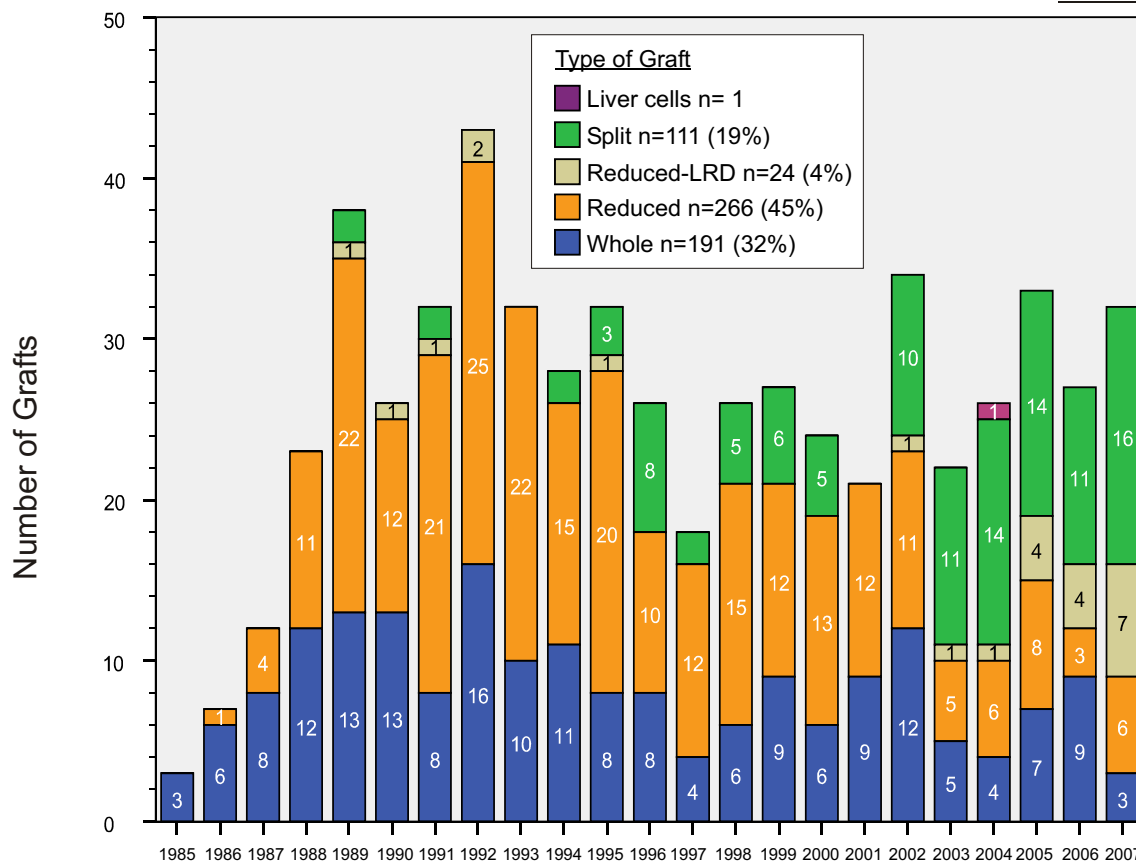


Cumulative Number of Transplants

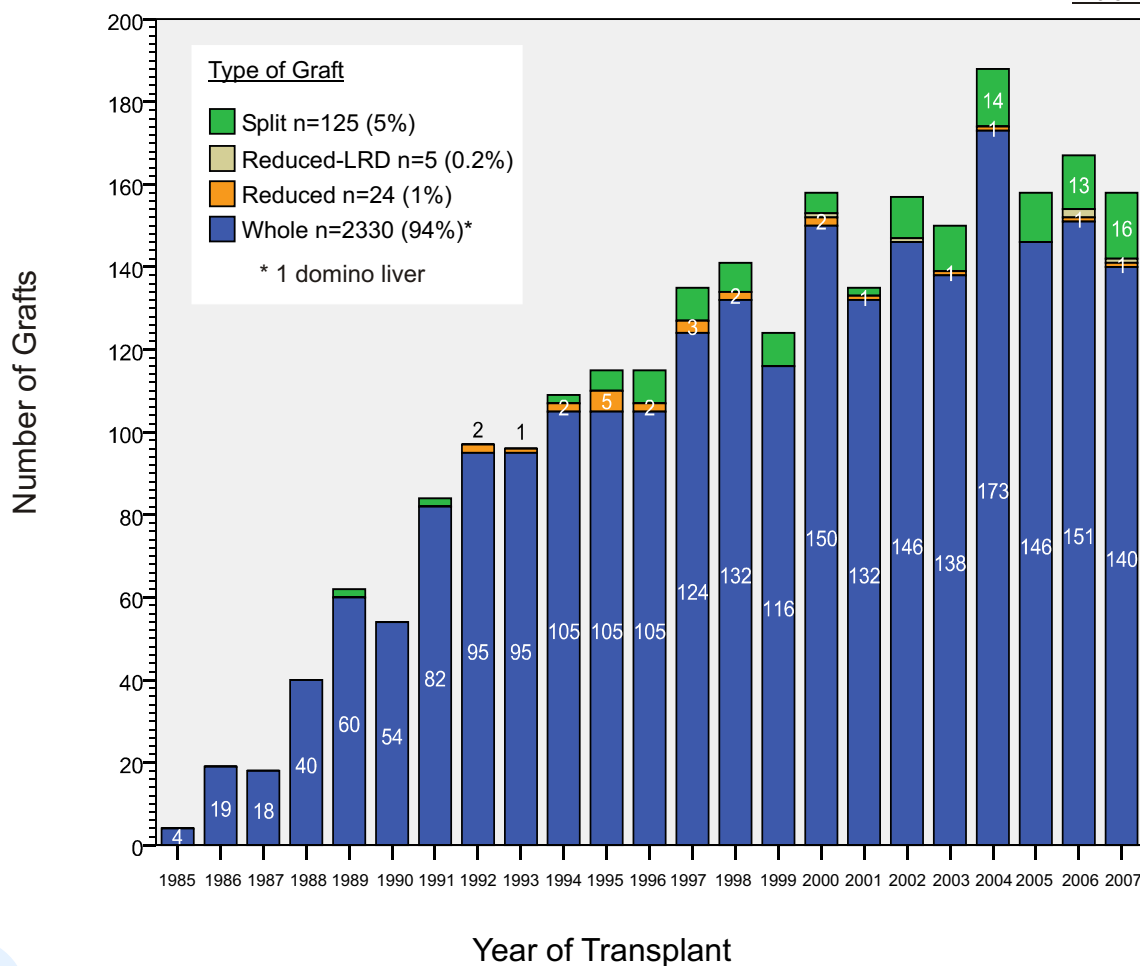


Type of Graft by Year Split vs Reduced vs Whole

Children (n = 592)



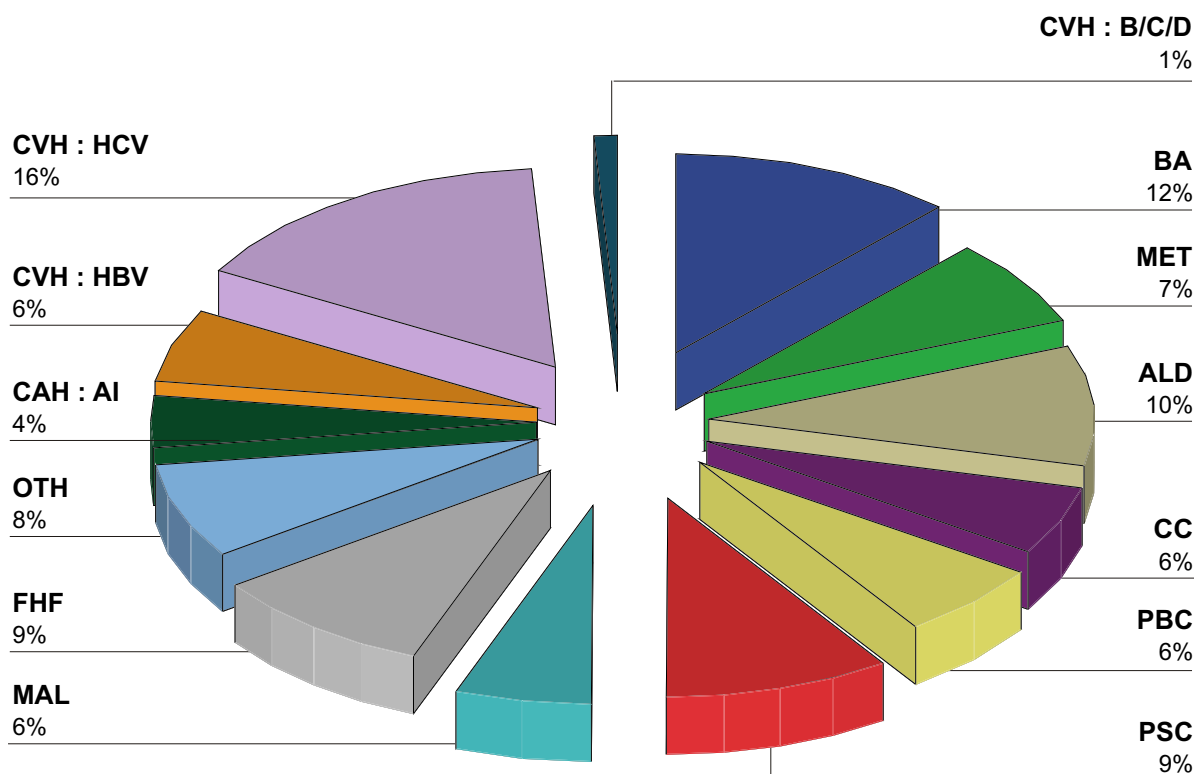
Adults (n = 2484)



Section 2

Primary Diagnosis





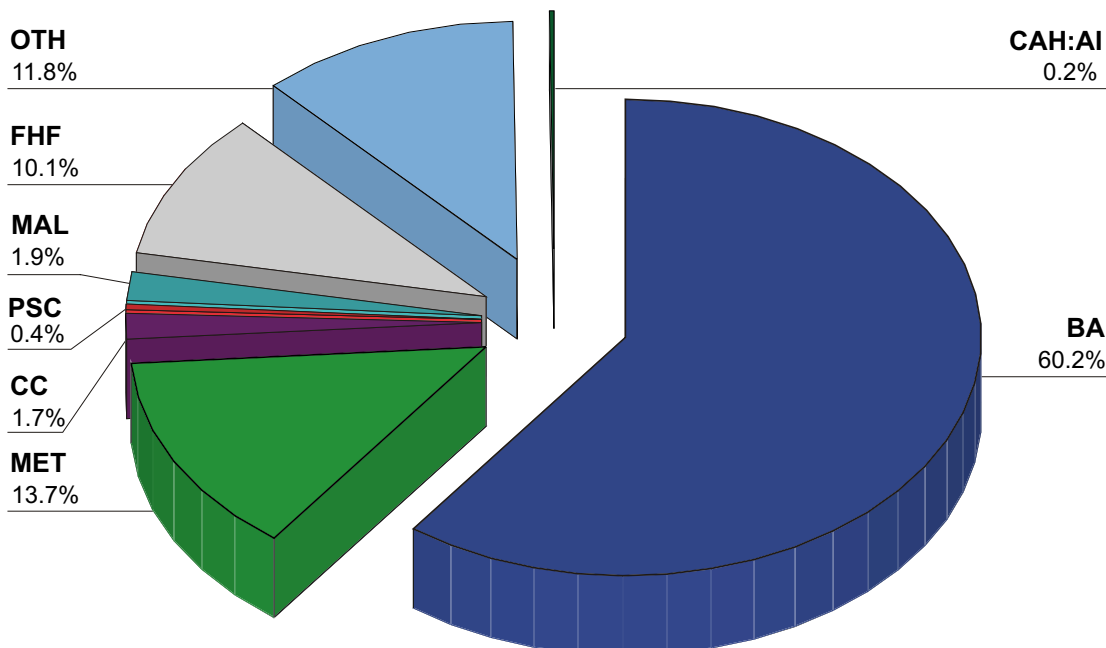
Diagnosis Group

BA	- Biliary atresia
MET	- Metabolic diseases*
ALD	- Alcoholic cirrhosis
CC	- Cryptogenic cirrhosis
PBC	- Primary biliary cirrhosis
PSC	- Primary sclerosing cholangitis
MAL	- Malignancy
FHF	- Fulminant hepatic failure*
OTH	- Other diseases*
CAH : AI	- Chronic active hepatitis [autoimmune]
CVH : HBV	- Chronic viral hepatitis B
CVH : HCV	- Chronic viral hepatitis C
CVH : B/C/D	- Chronic viral hepatitis B / C / D

* See Appendices for details

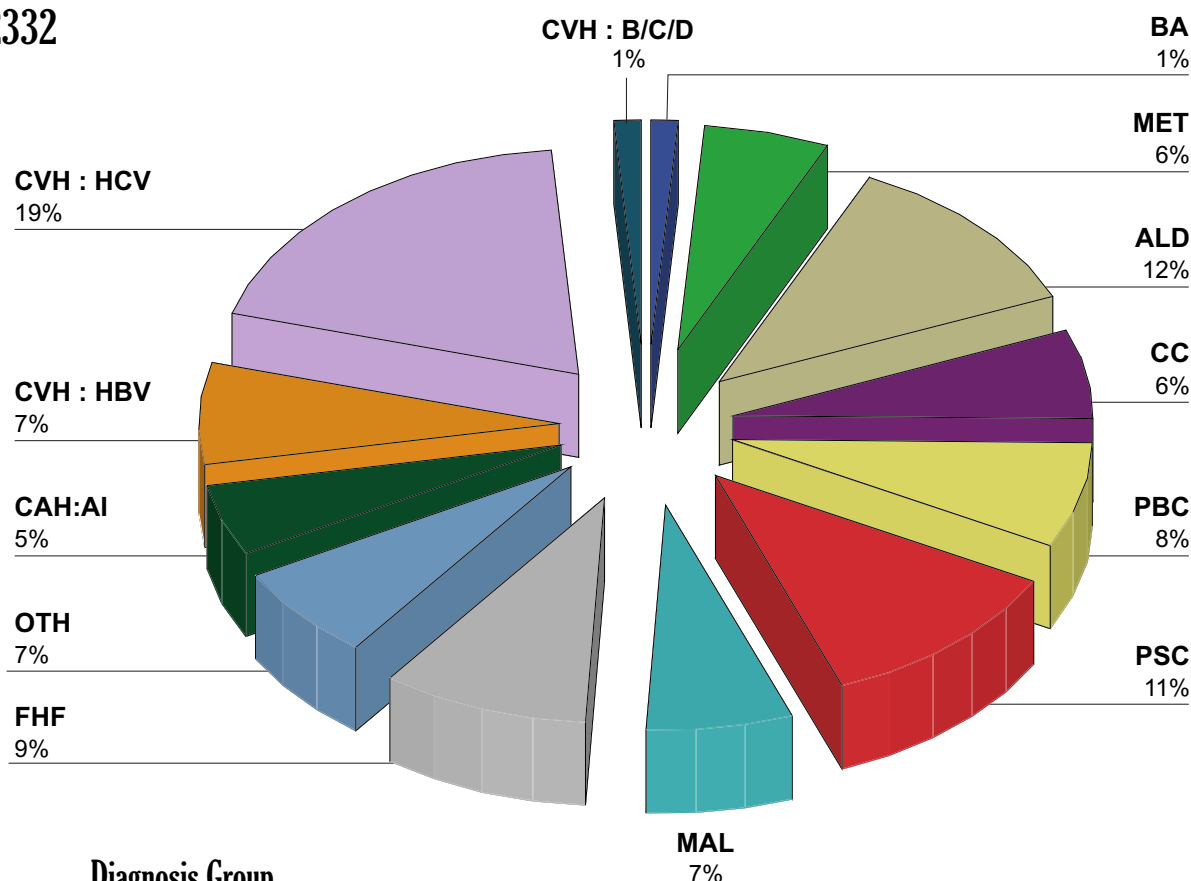
Primary Diseases of Children

n = 518



Primary Diseases of Adult Recipients

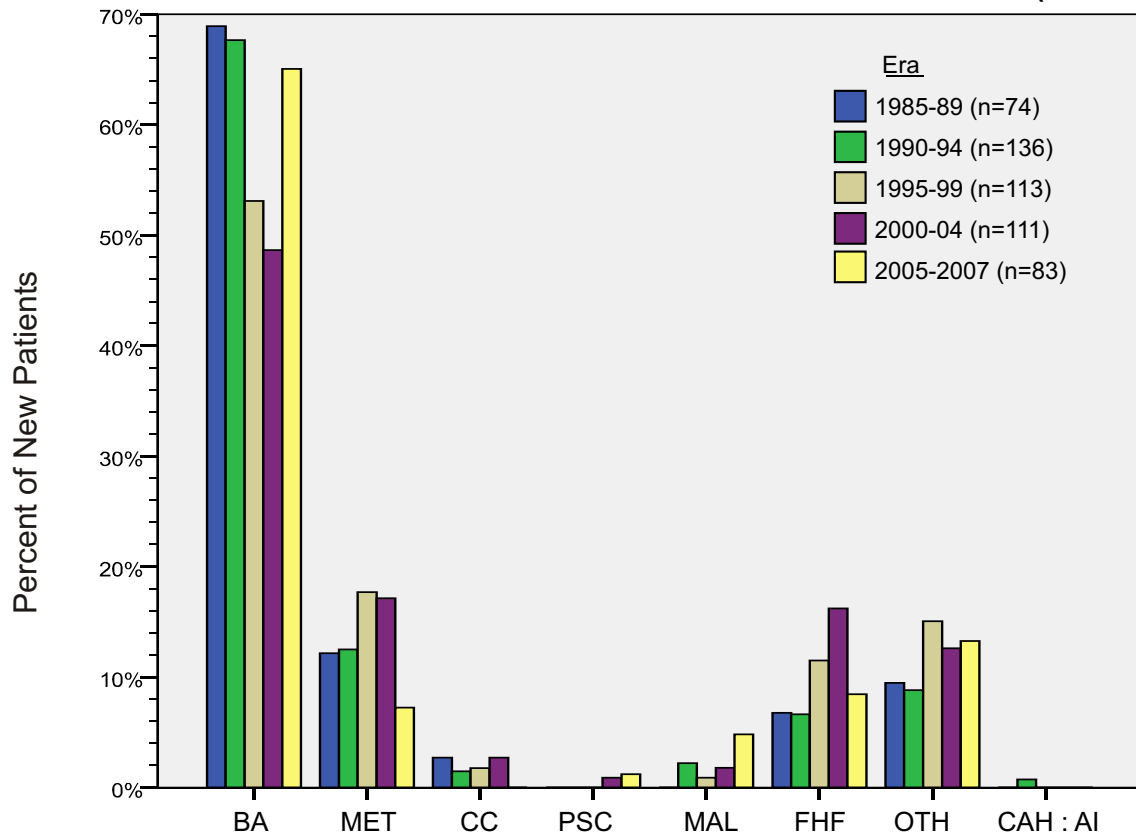
n = 2332



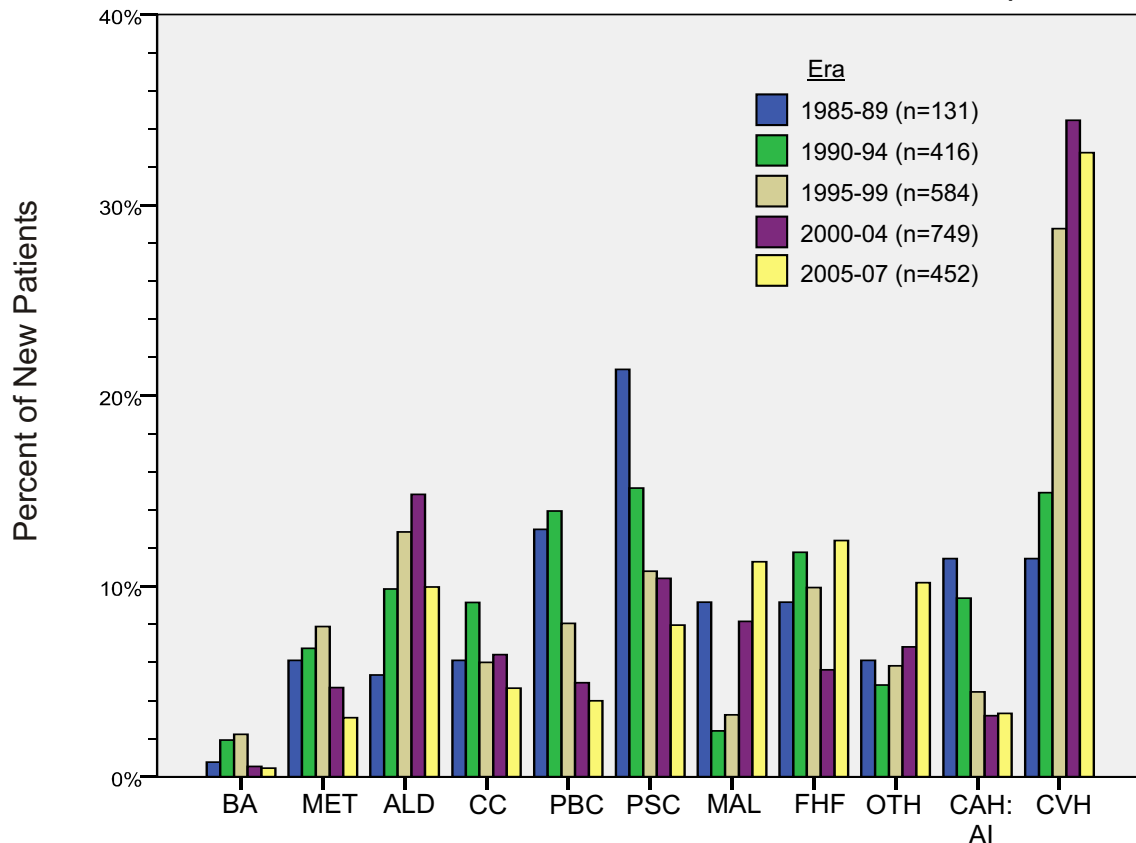
Diagnosis Group

BA	- Biliary atresia	MAL	- Malignancy
MET	- Metabolic diseases	FHF	- Fulminant hepatic failure
ALD	- Alcoholic cirrhosis	OTH	- Other diseases
CC	- Cryptogenic cirrhosis	CAH : AI	- Chronic active hepatitis [autoimmune]
PBC	- Primary biliary cirrhosis	CVH : HBV	- Chronic viral hepatitis B
PSC	- Primary sclerosing cholangitis	CVH : HCV	- Chronic viral hepatitis C
		CVH : B/C/D	- Chronic viral hepatitis B / C / D

Children (n=517)

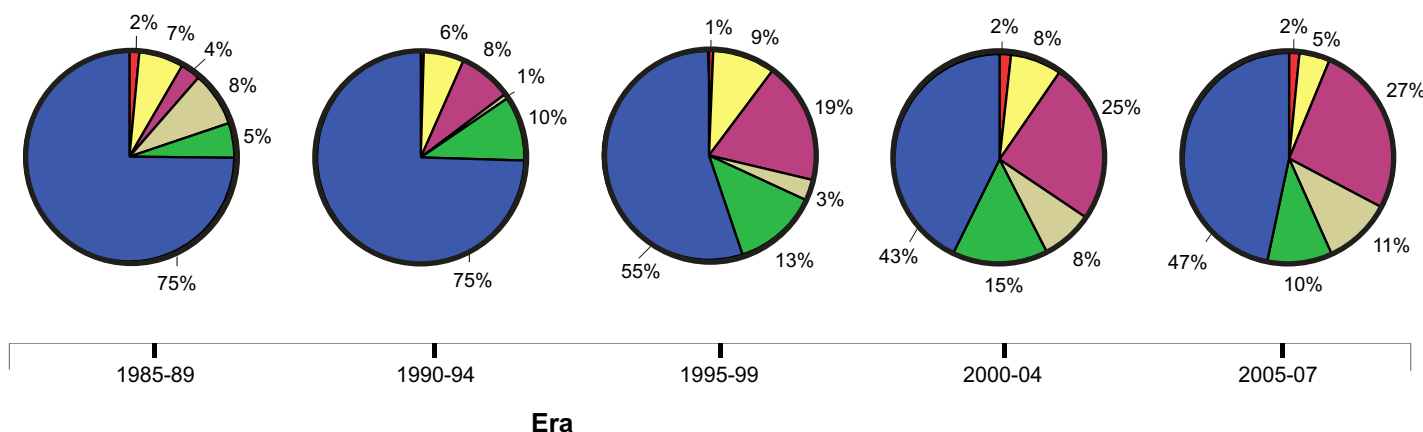


Adults (n = 2332)

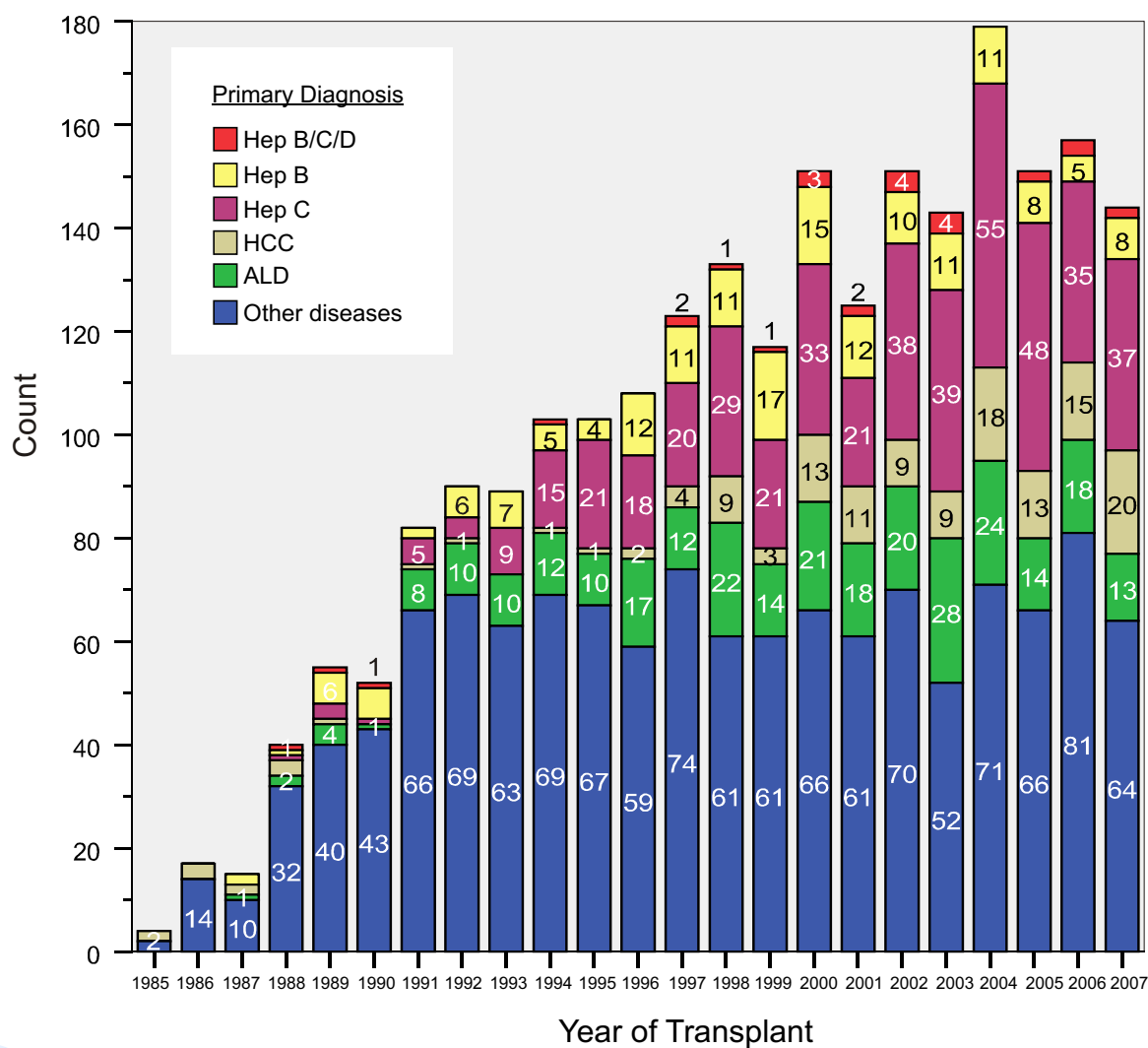


Primary Diagnosis Group

Adult Diagnosis

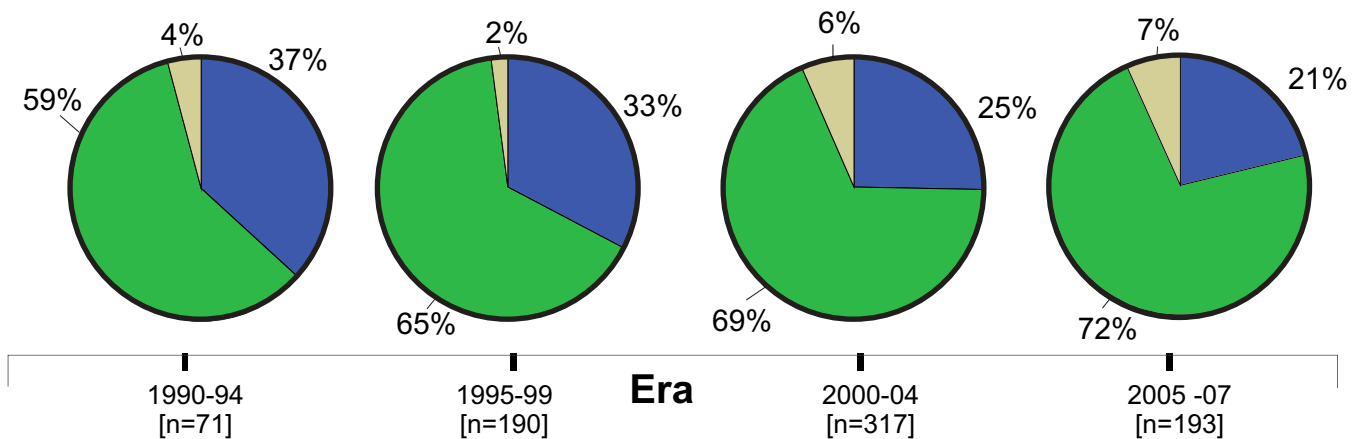


Adult Primary Diagnosis by Year

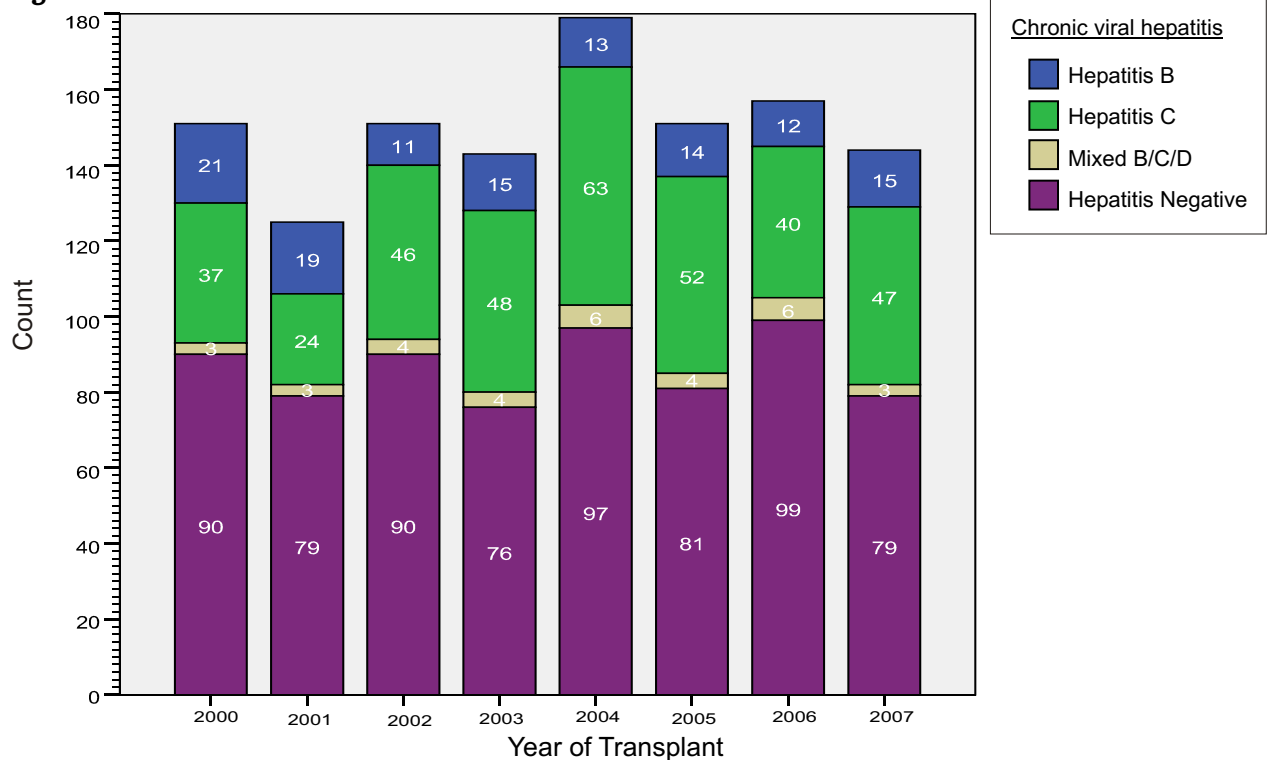


Primary Diagnosis		n =	Secondary / Tertiary diagnosis				
			Hepatitis C	Hepatitis B	Hepatitis B,C	HCC	ALD
Hepatitis C	453			6		89	107
Hepatitis B	170		4			47	4
Hepatitis BD/BC/BCD	28					3	6
HCC + cirrhosis	141		61	52	4		14
ALD	279		10	2		25	
Other	1261		11	4		39	20
TOTAL	2332						

Type of Chronic Viral Hepatitis in Adult Patients



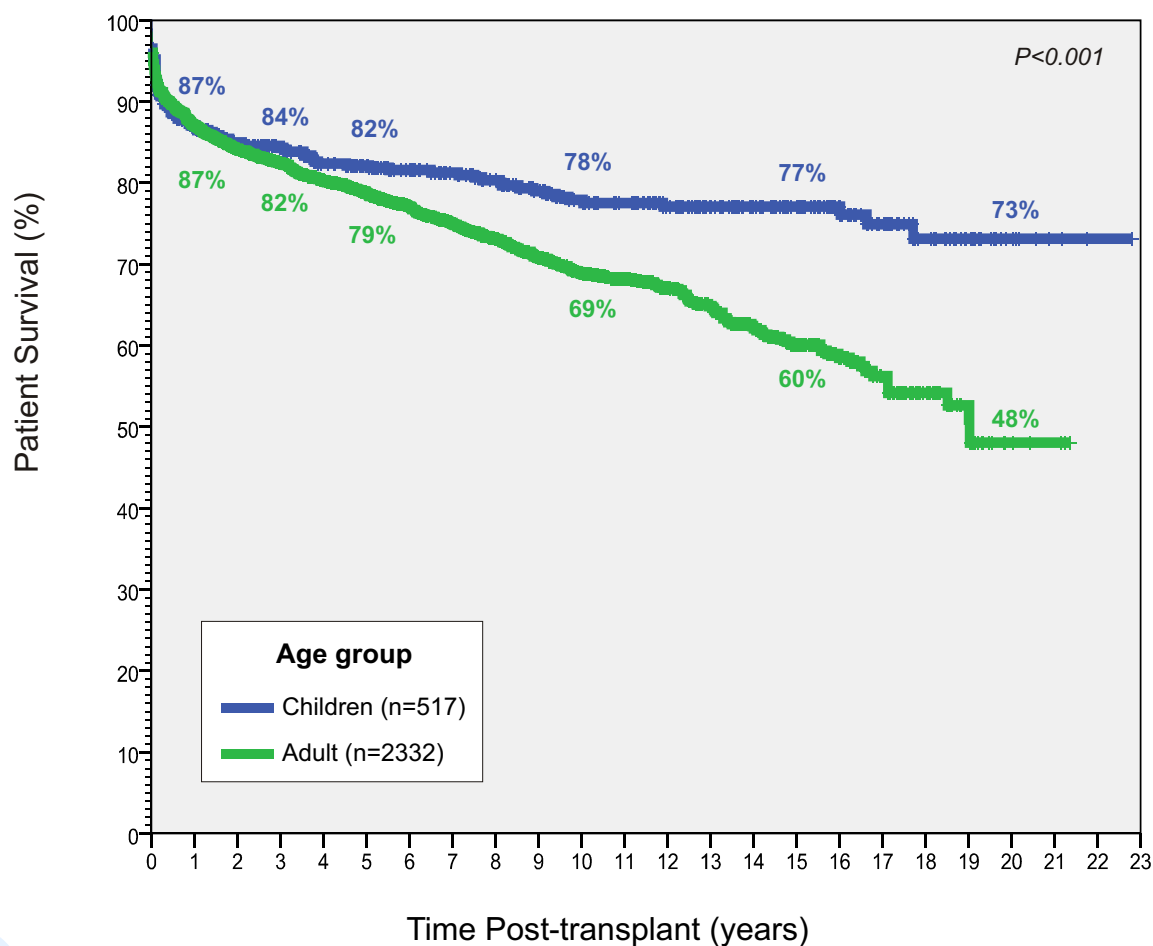
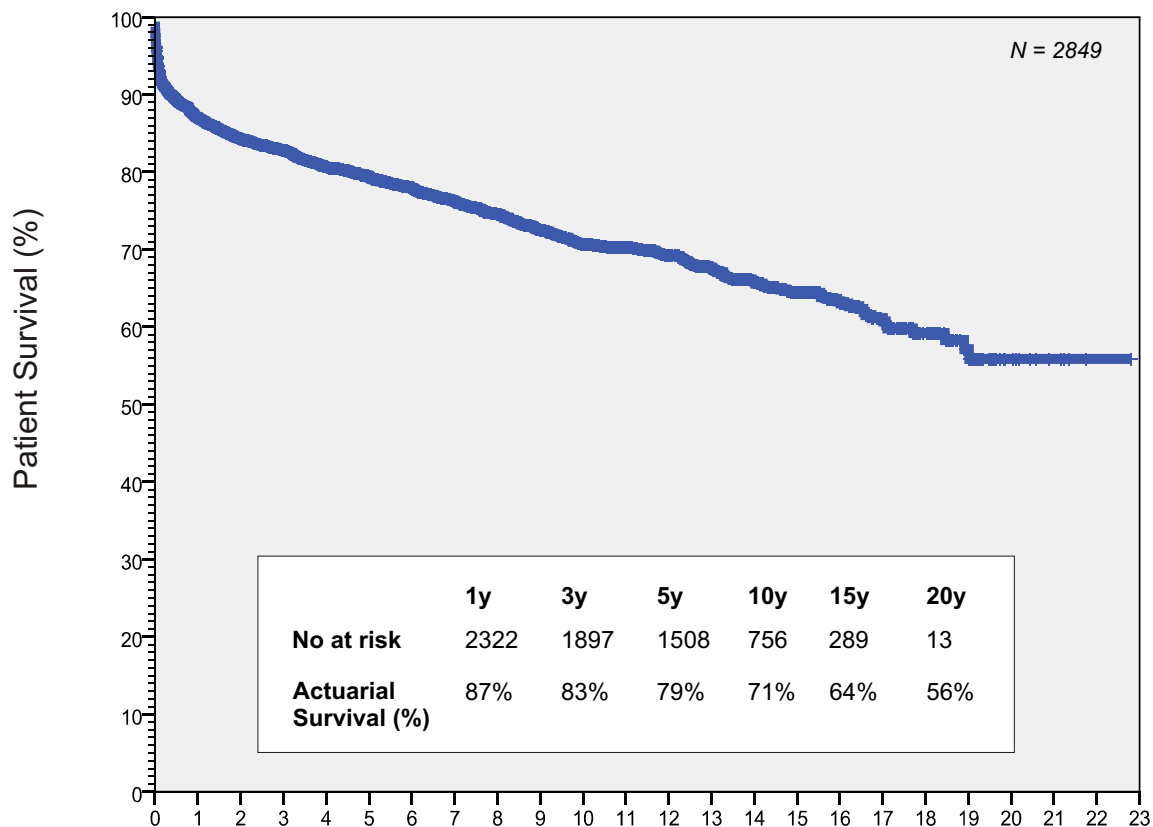
Hepatitis diagnosis

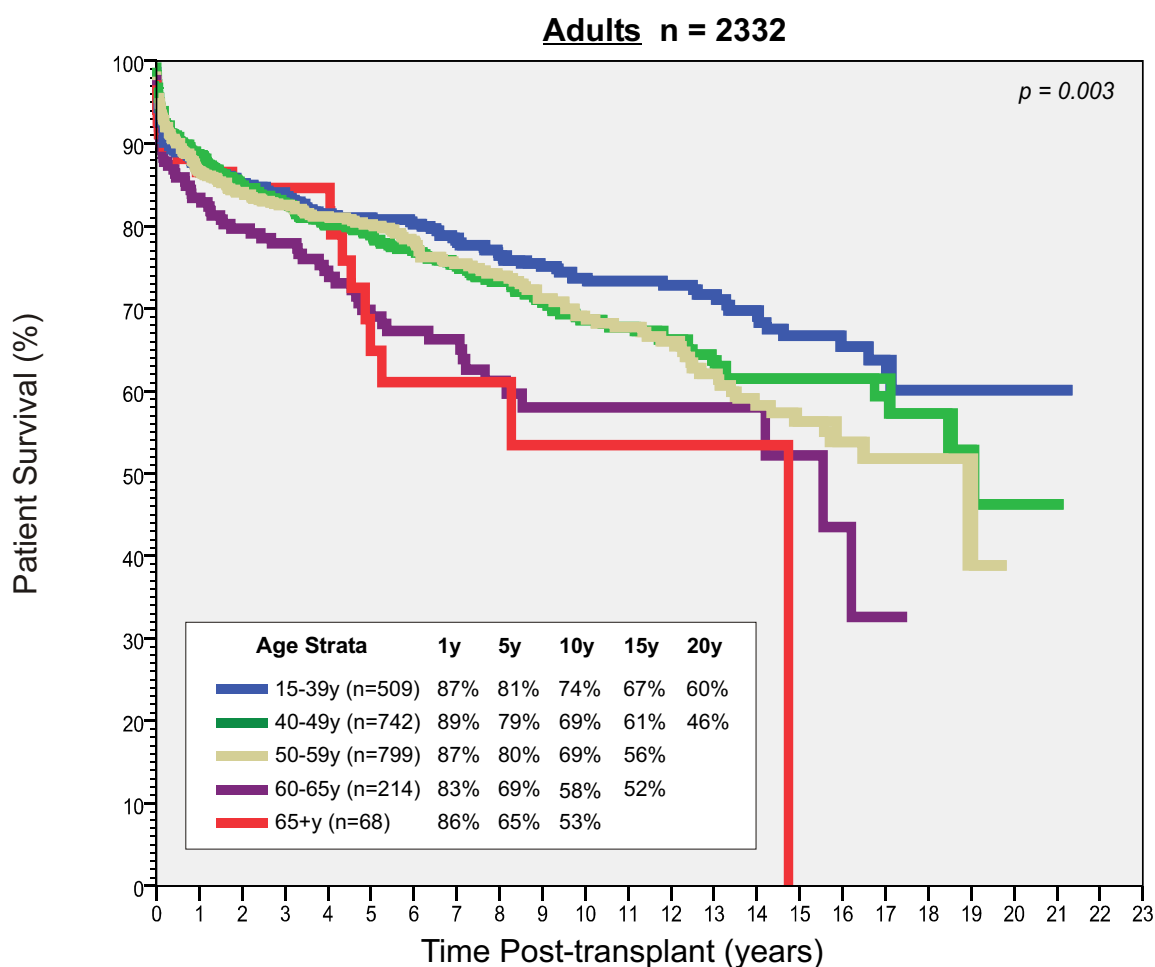
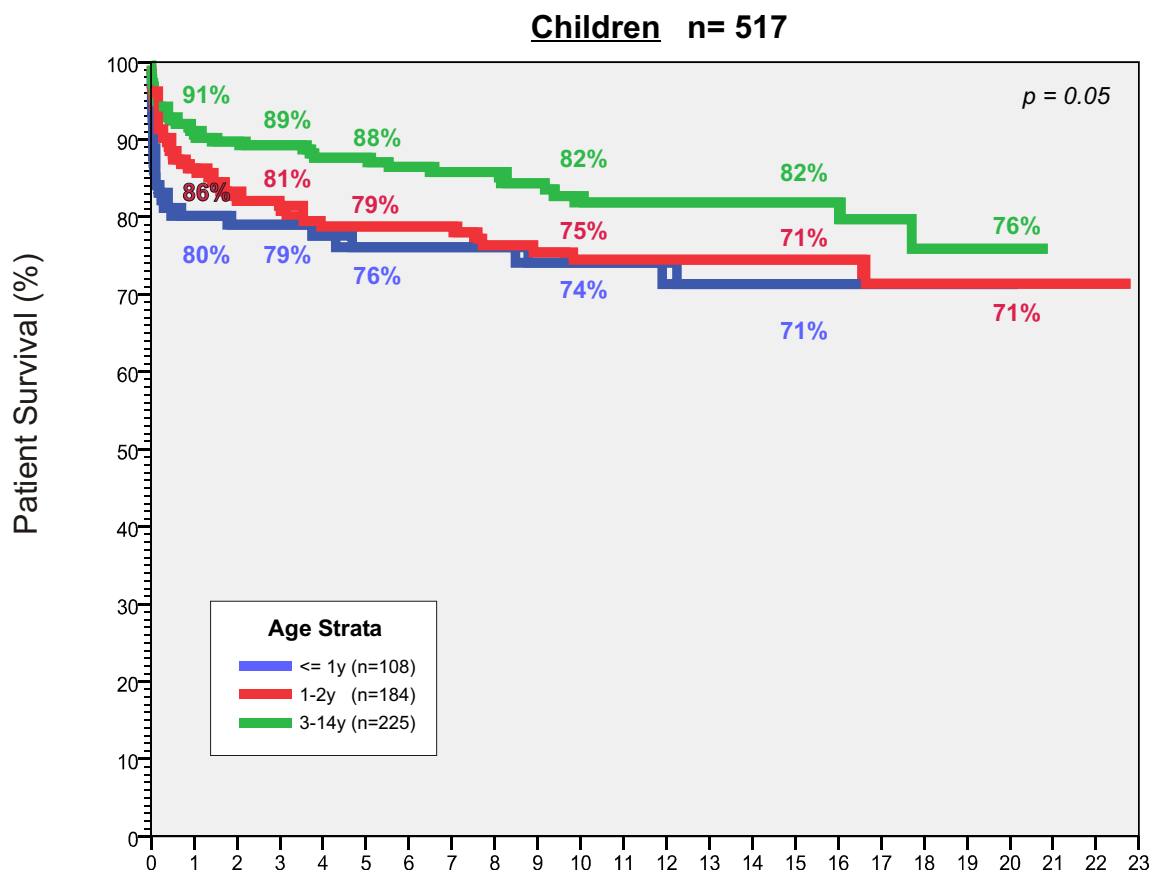


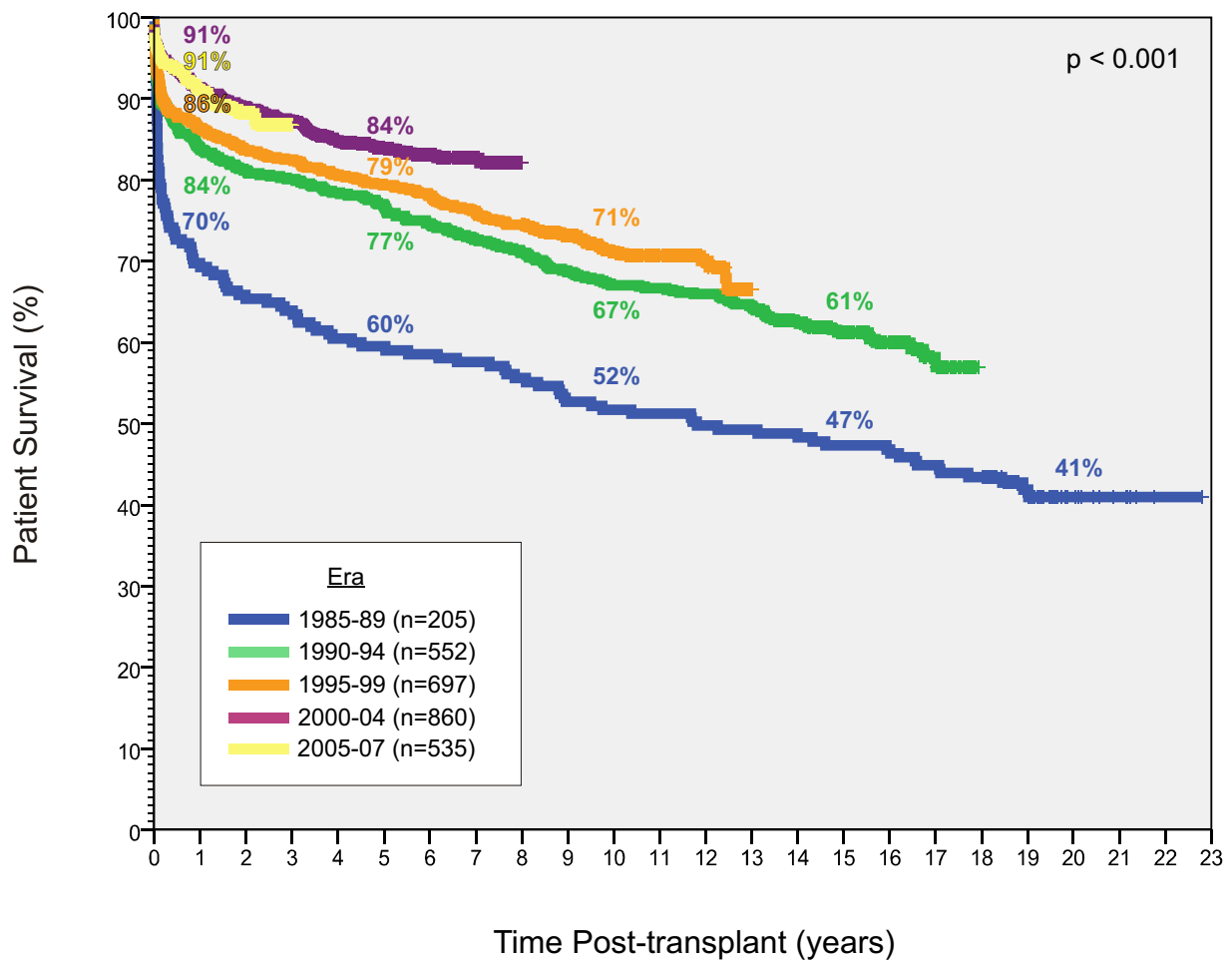
Section 3

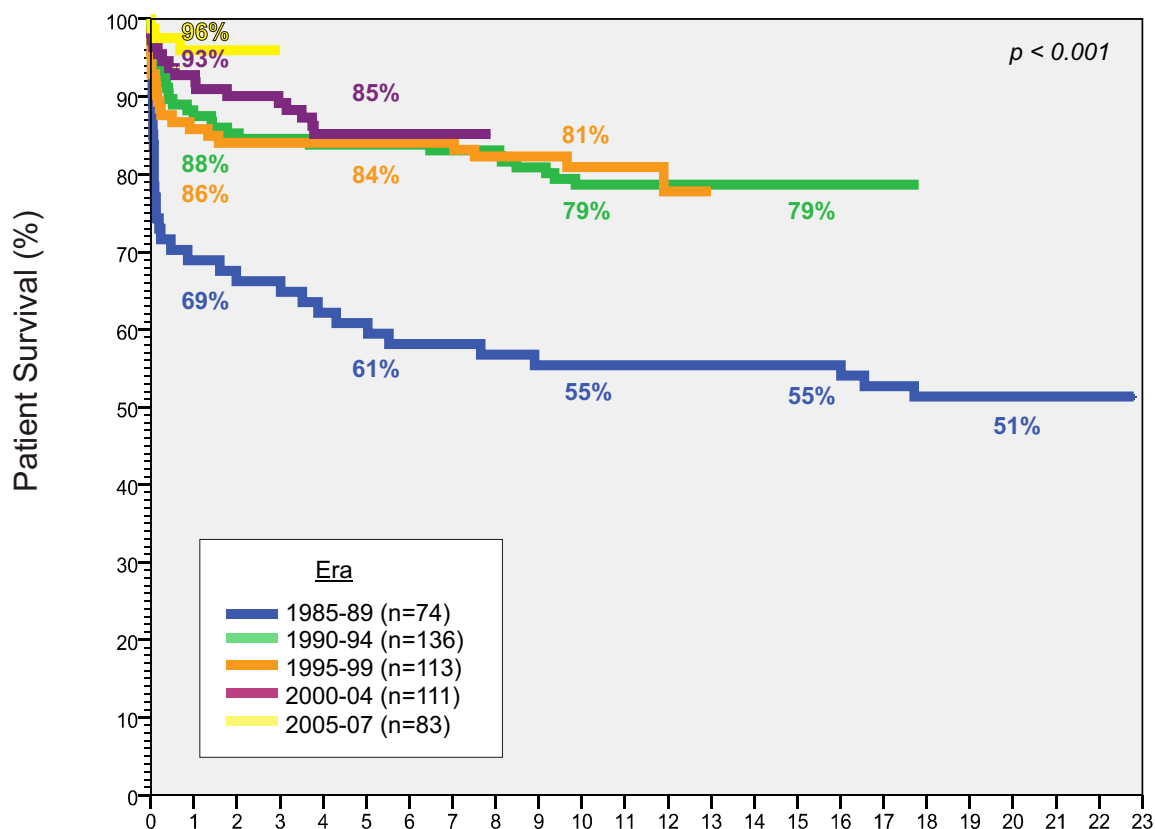
Patient Survival



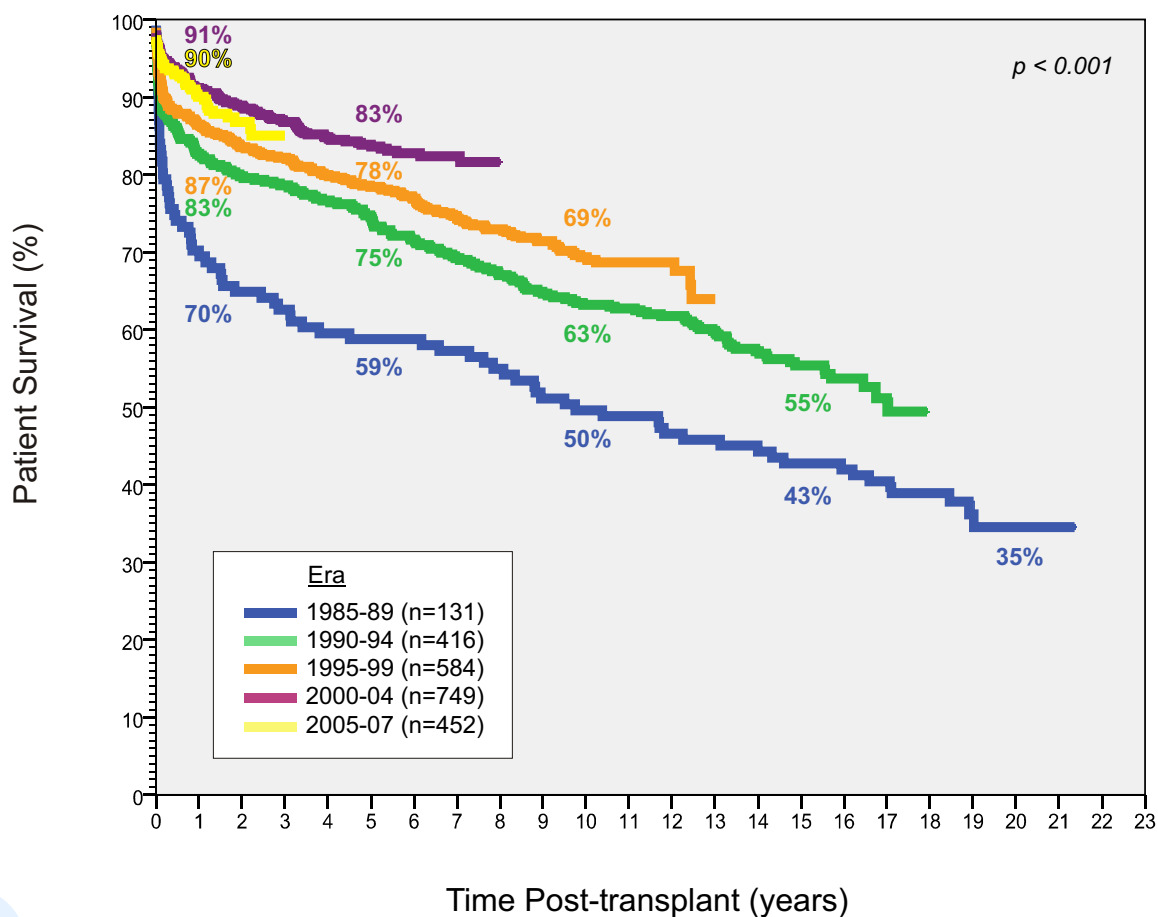




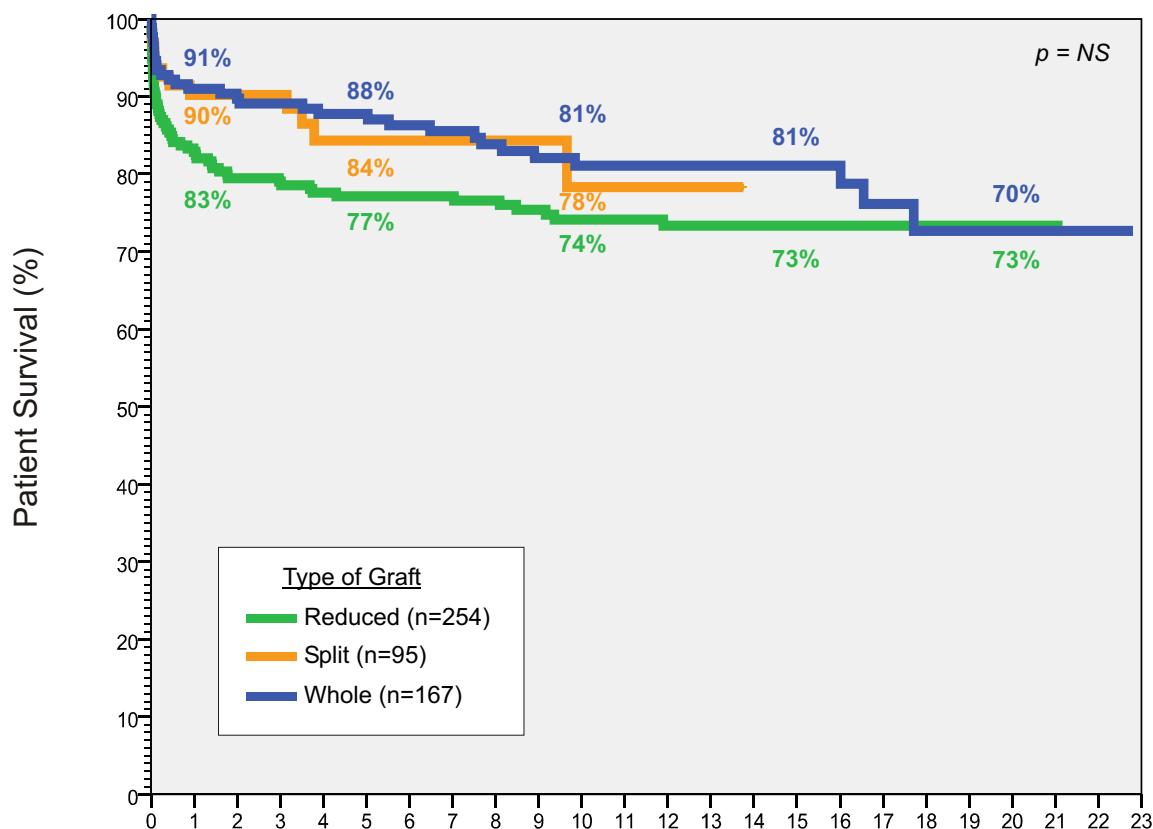




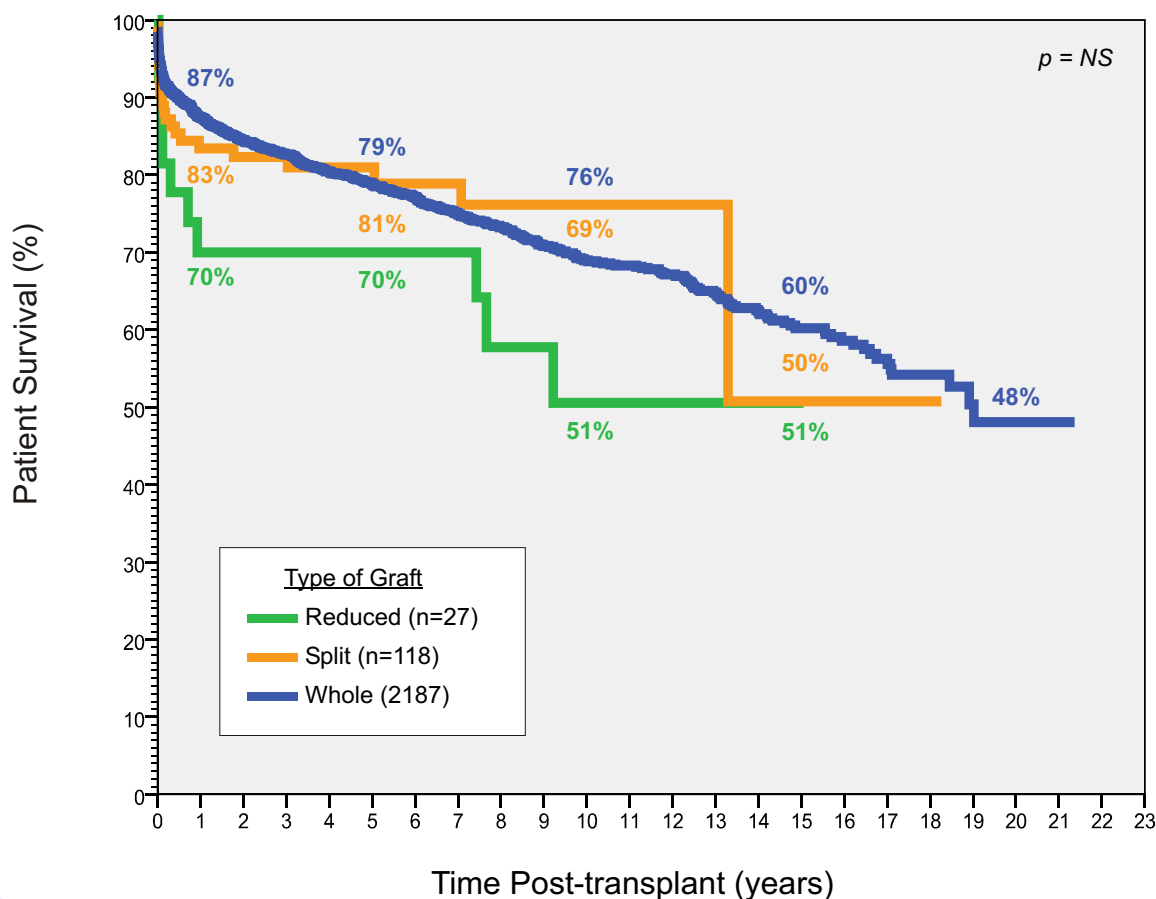
Patient Survival - Adults

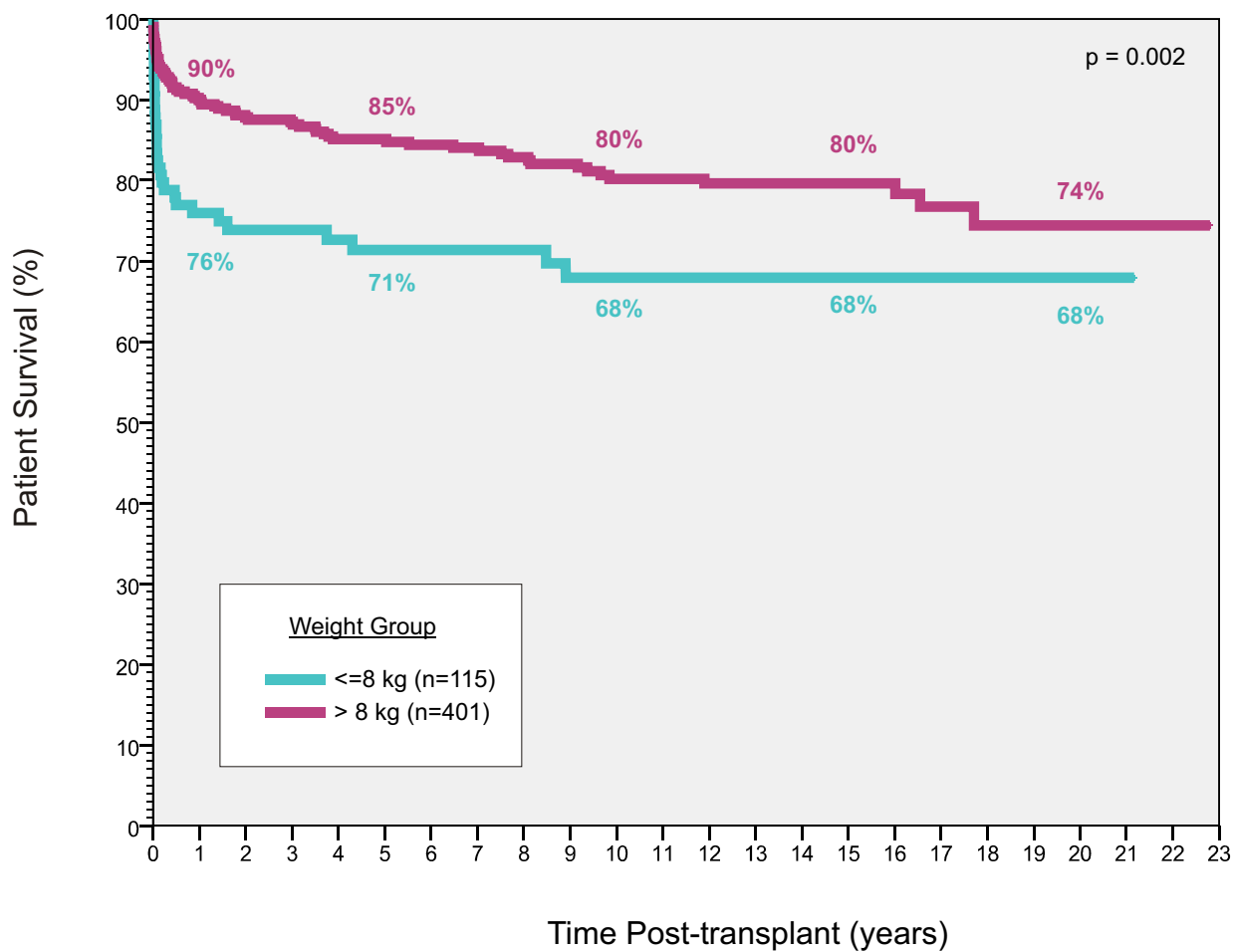


Children - n = 516

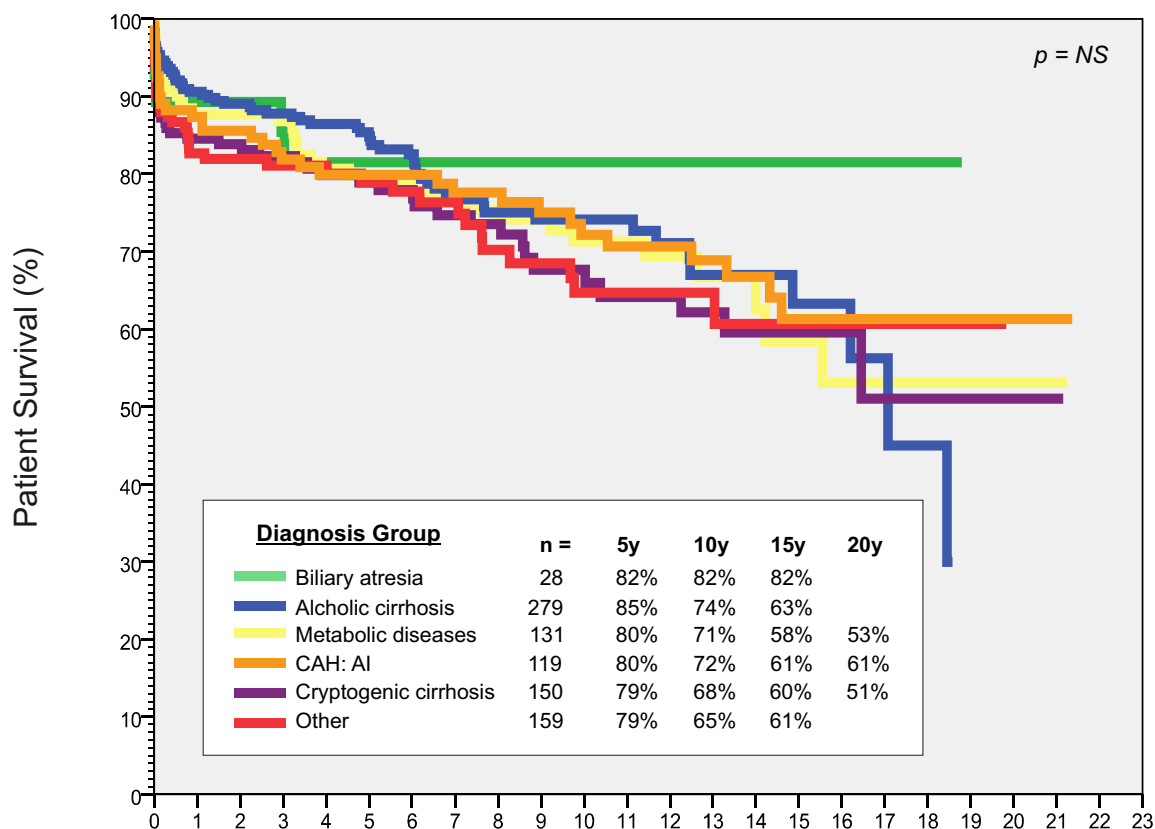


Adults - n = 2332

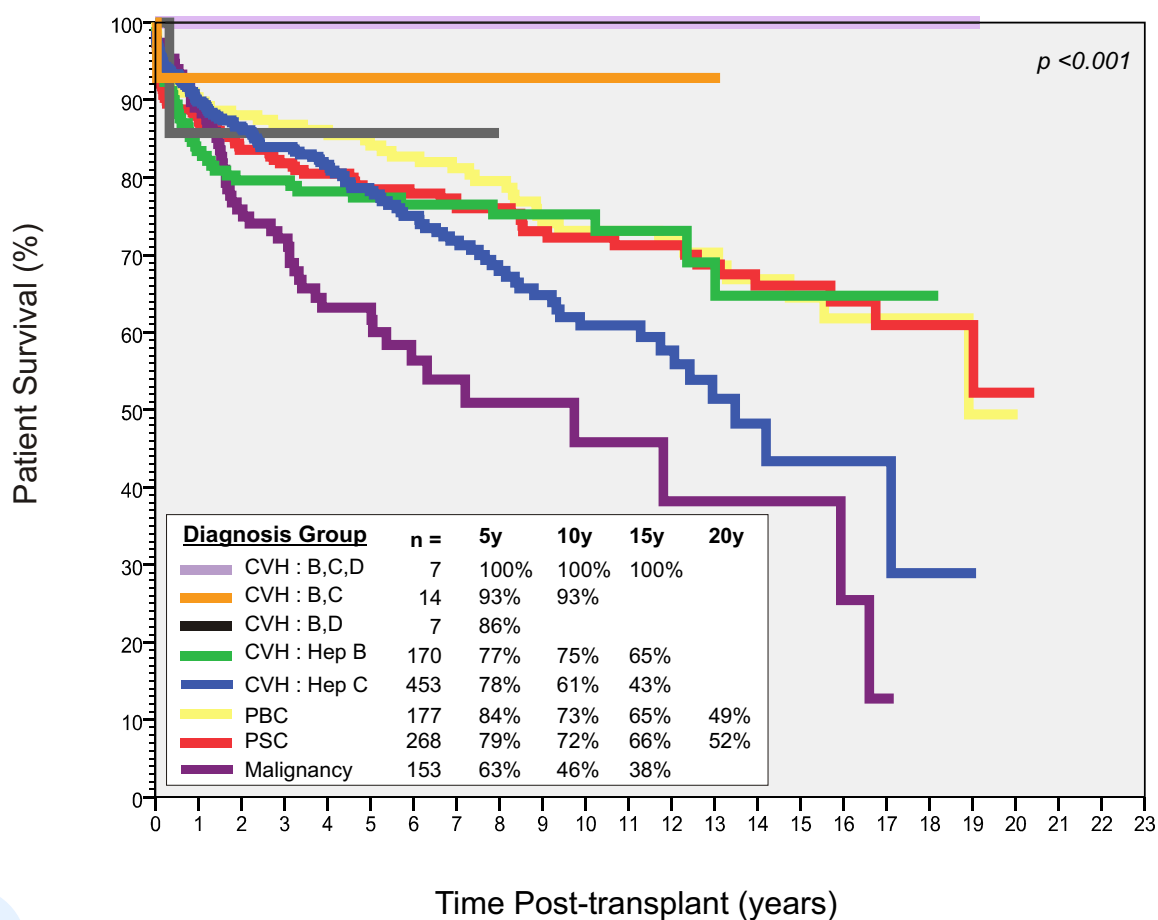




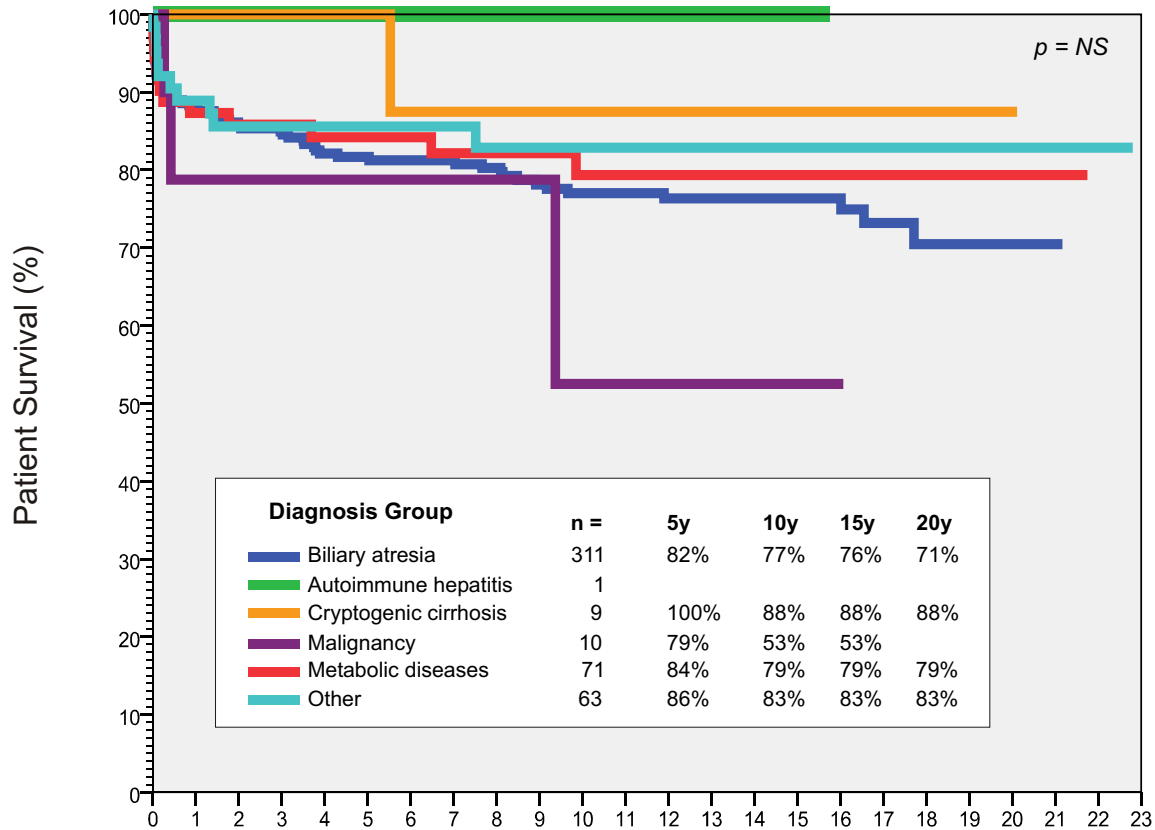
(1) Adults [excluding FHF] - n=866



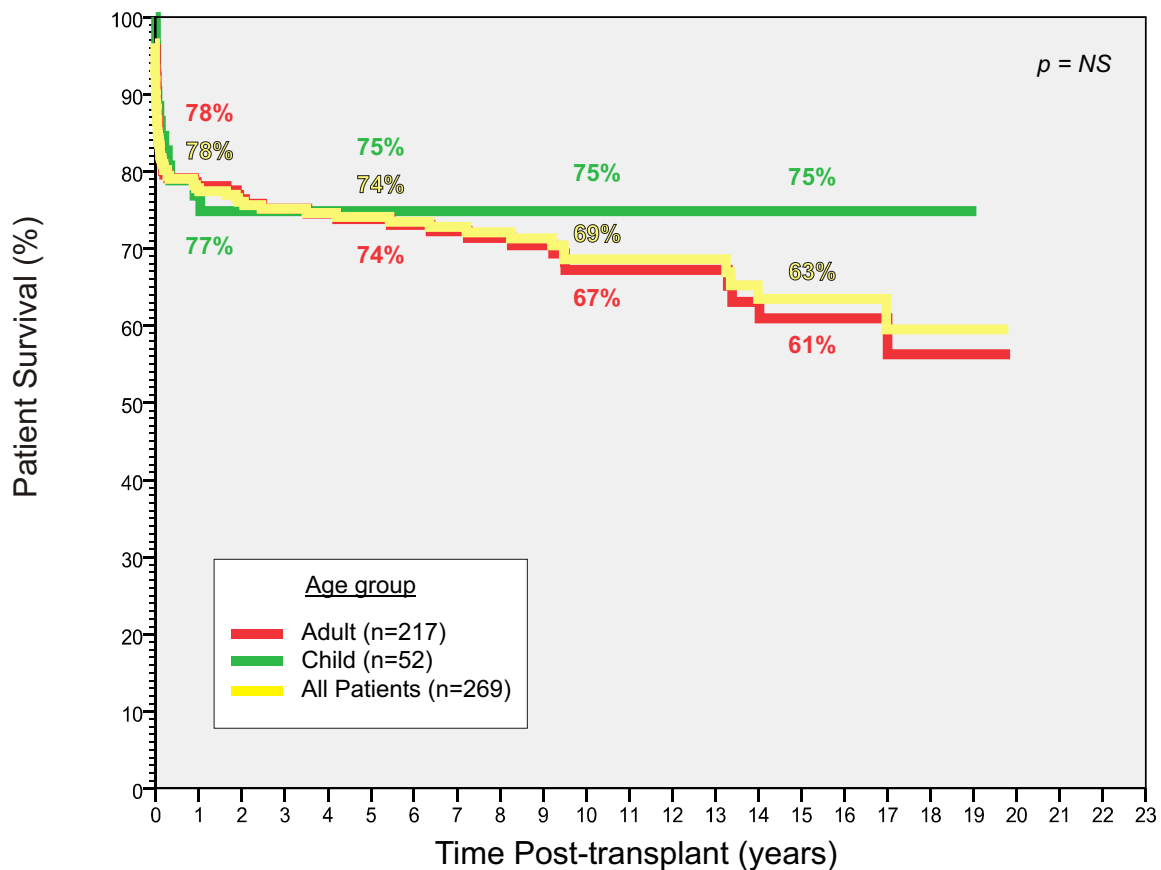
(2) Adults [excluding FHF] - n=1249

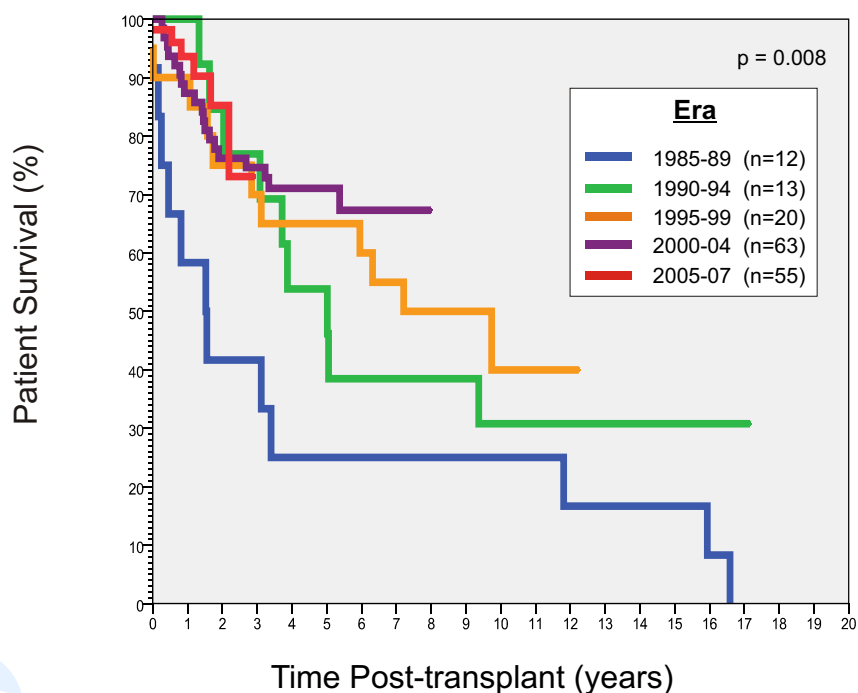
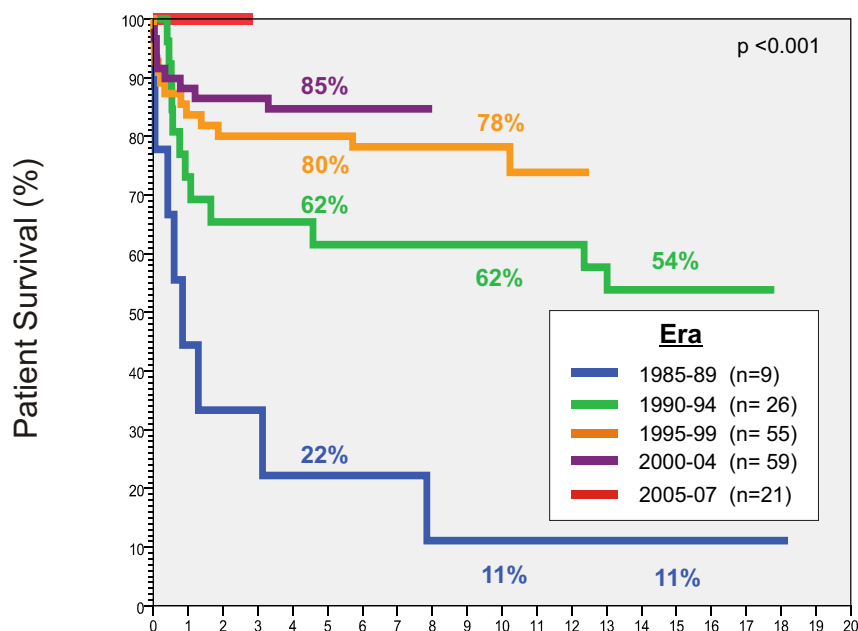
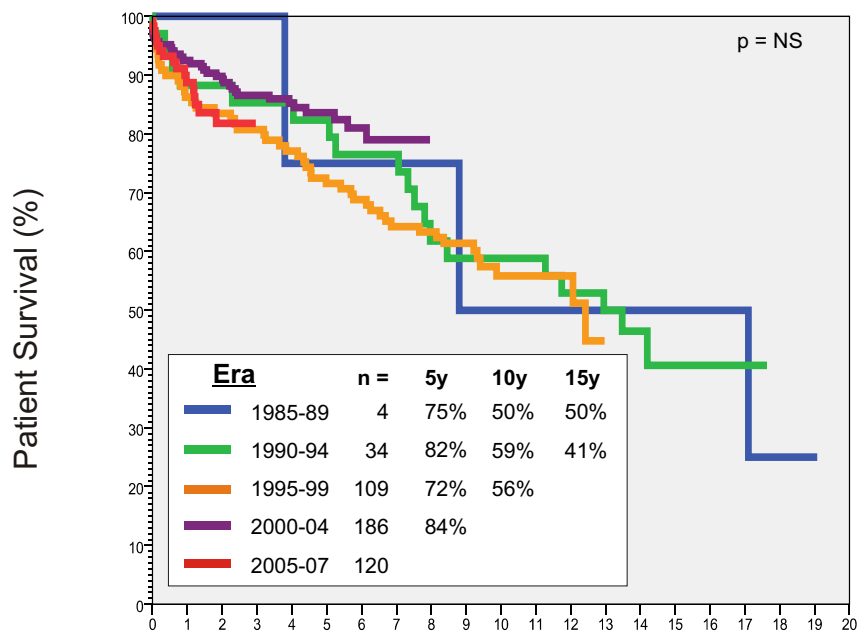


(3) Paediatric recipients [excluding FHF] - n=438



(4) Fulminant hepatic failure (n=269)

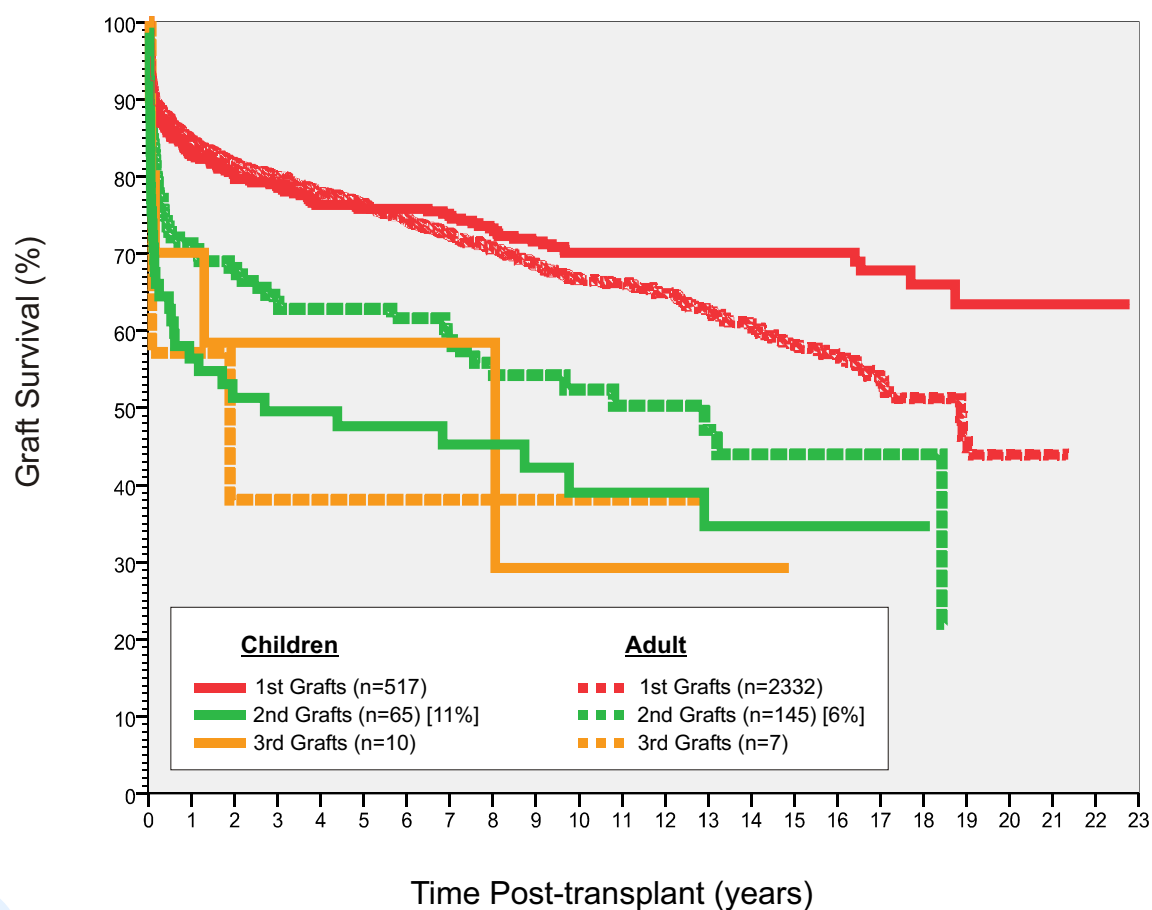
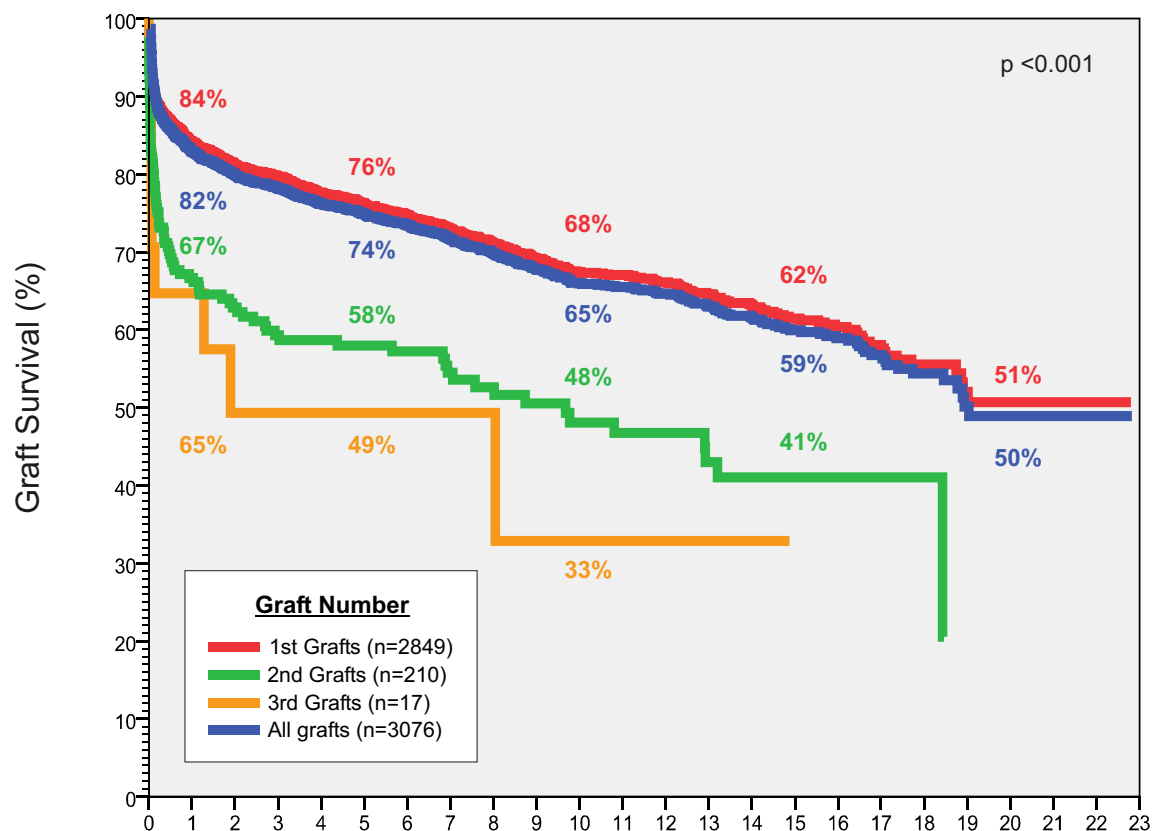




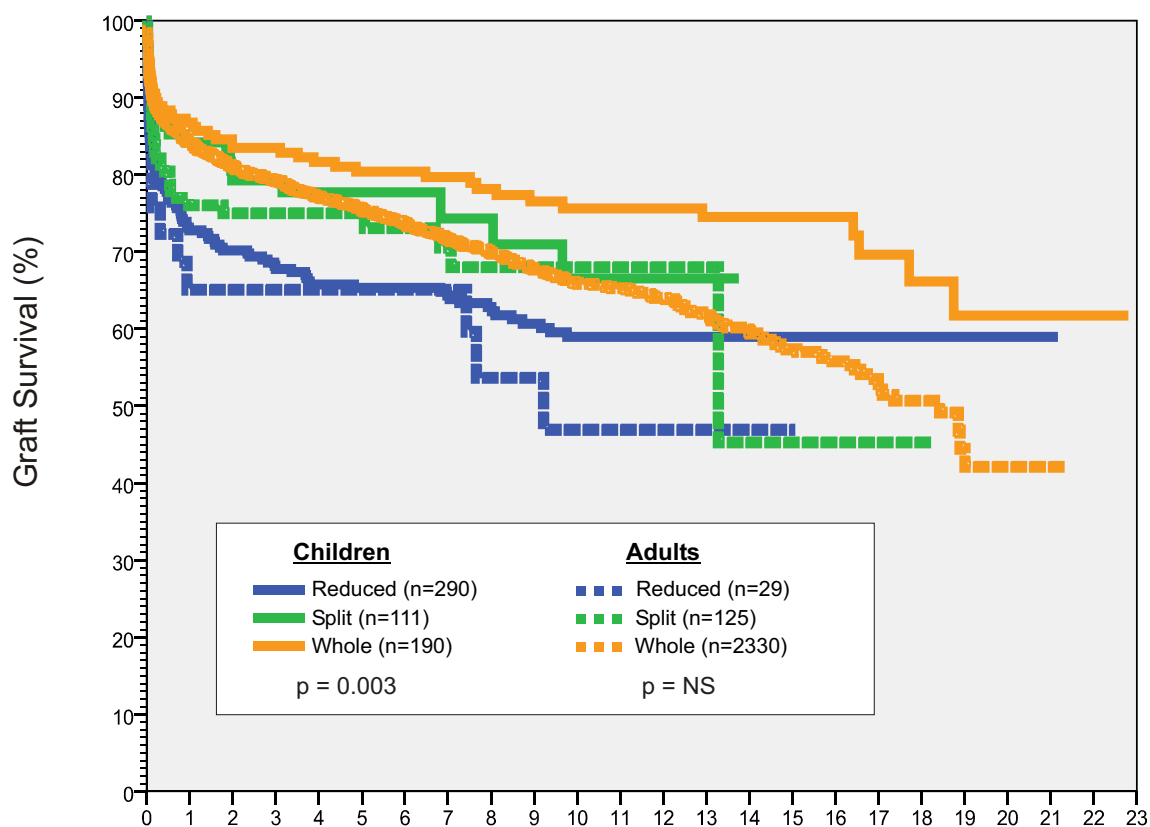
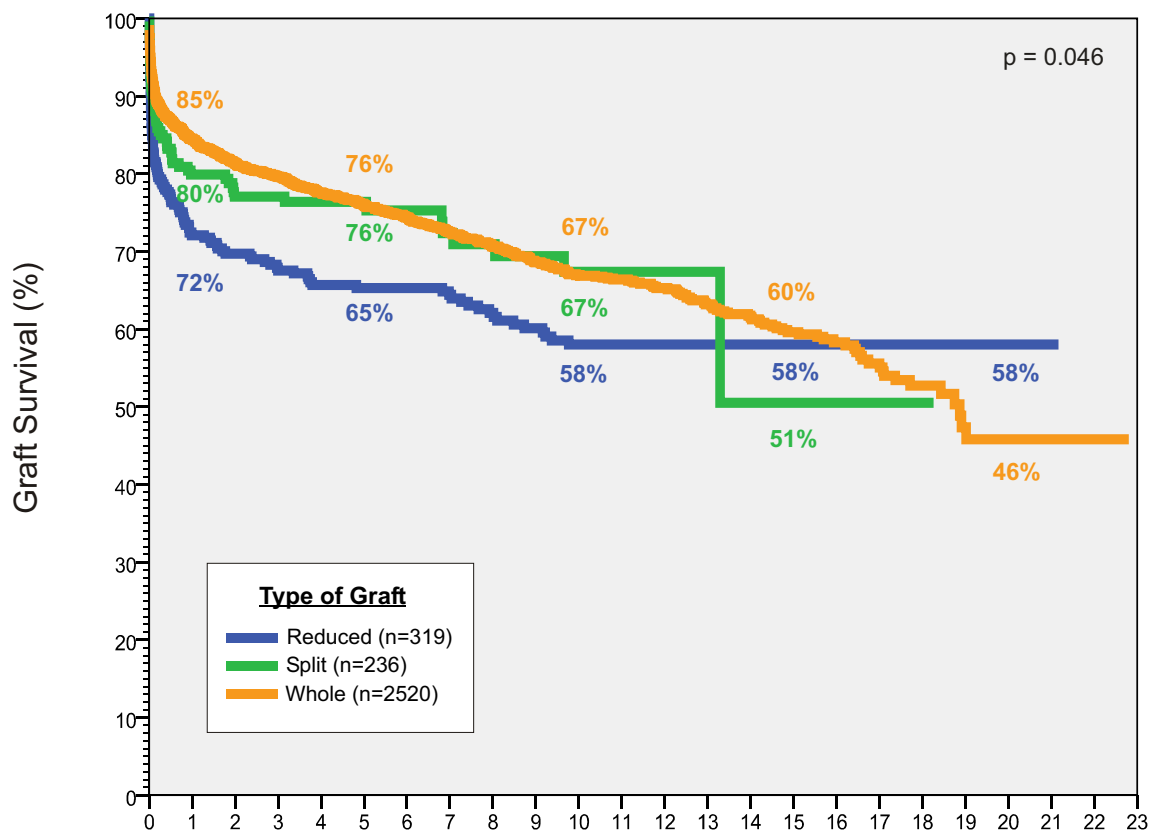
Section 4

Graft Outcome



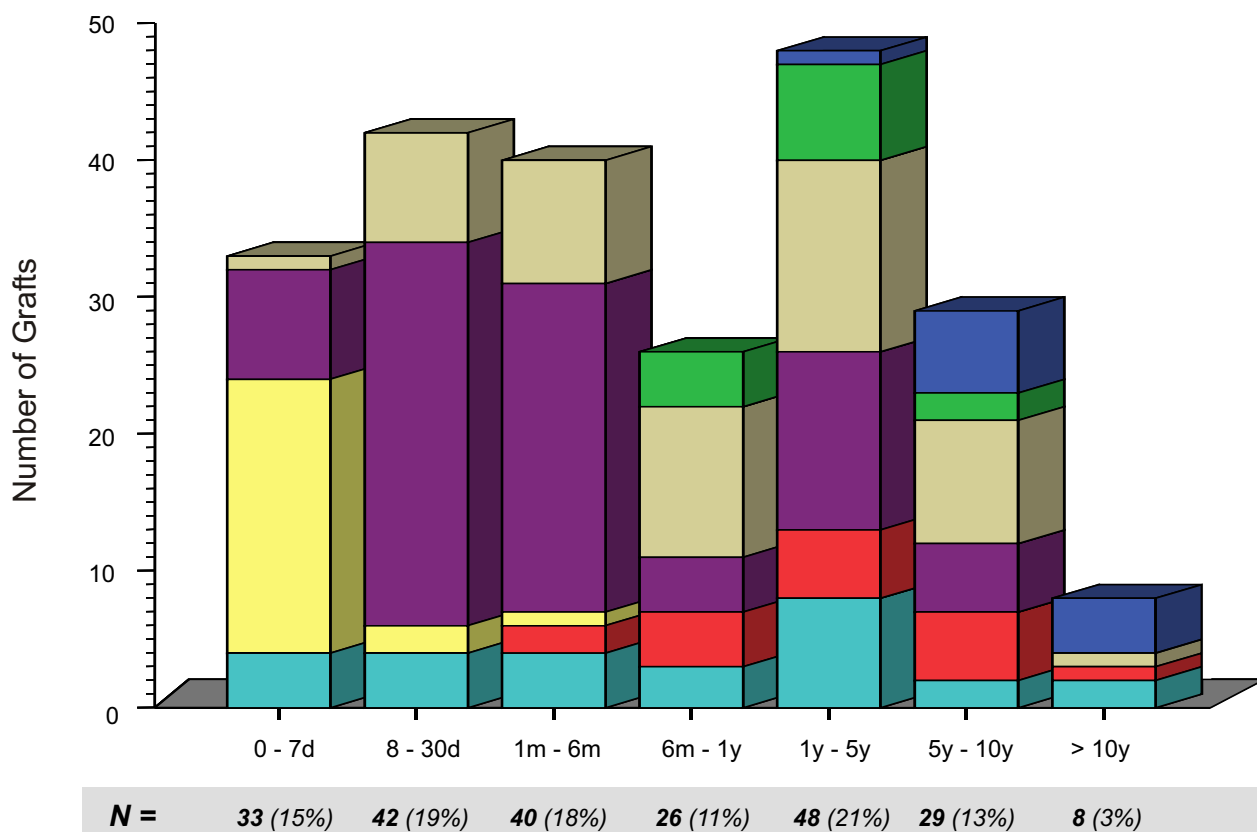
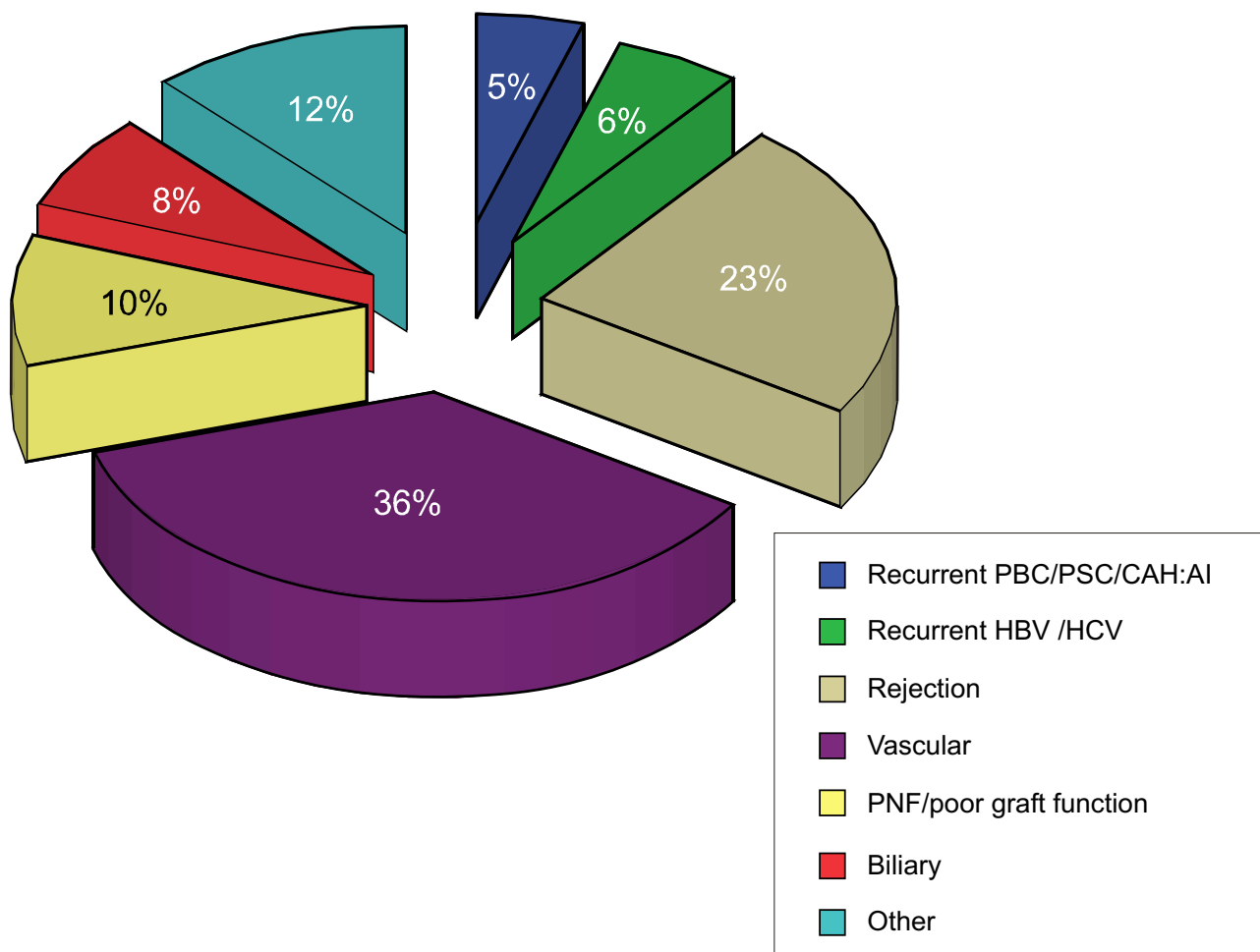


All grafts (n = 3075)



Indication for Retransplantation

n = 226 (209 2nd grafts, 17 3rd grafts)

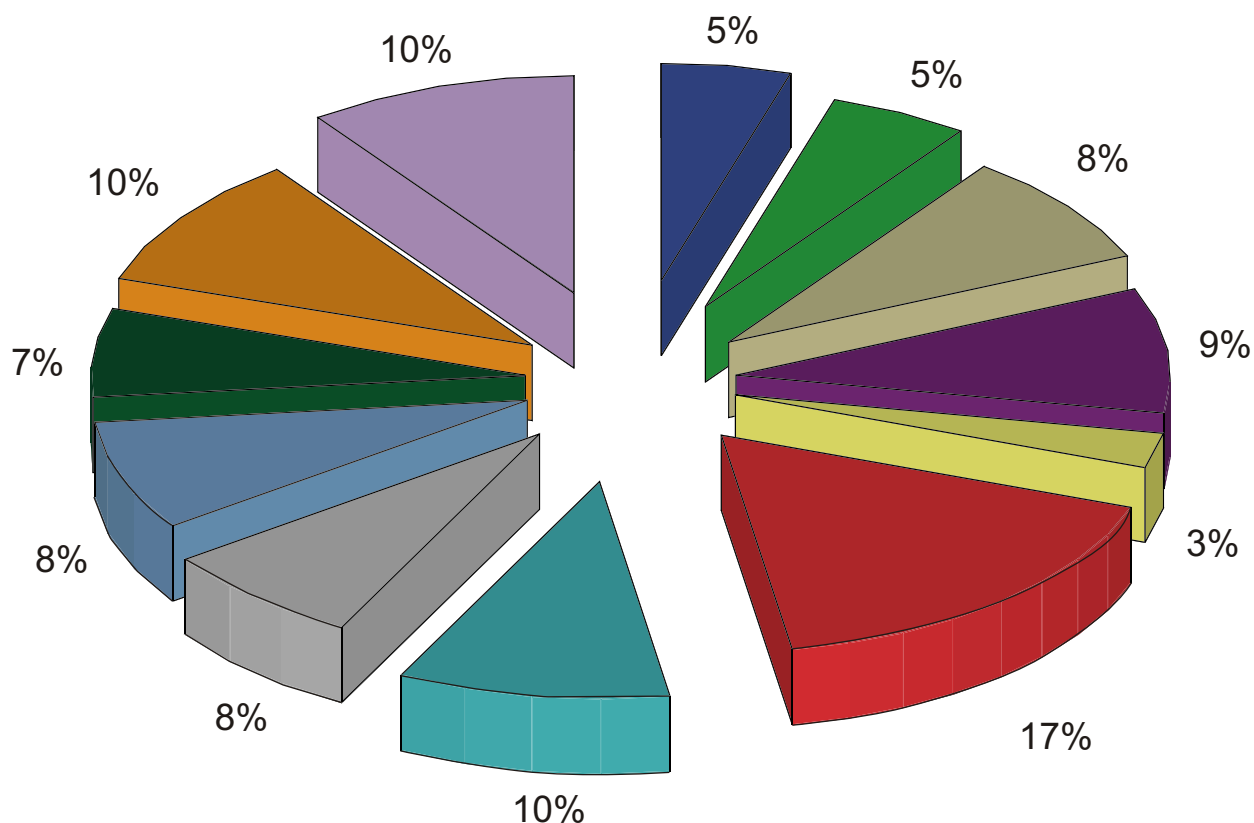
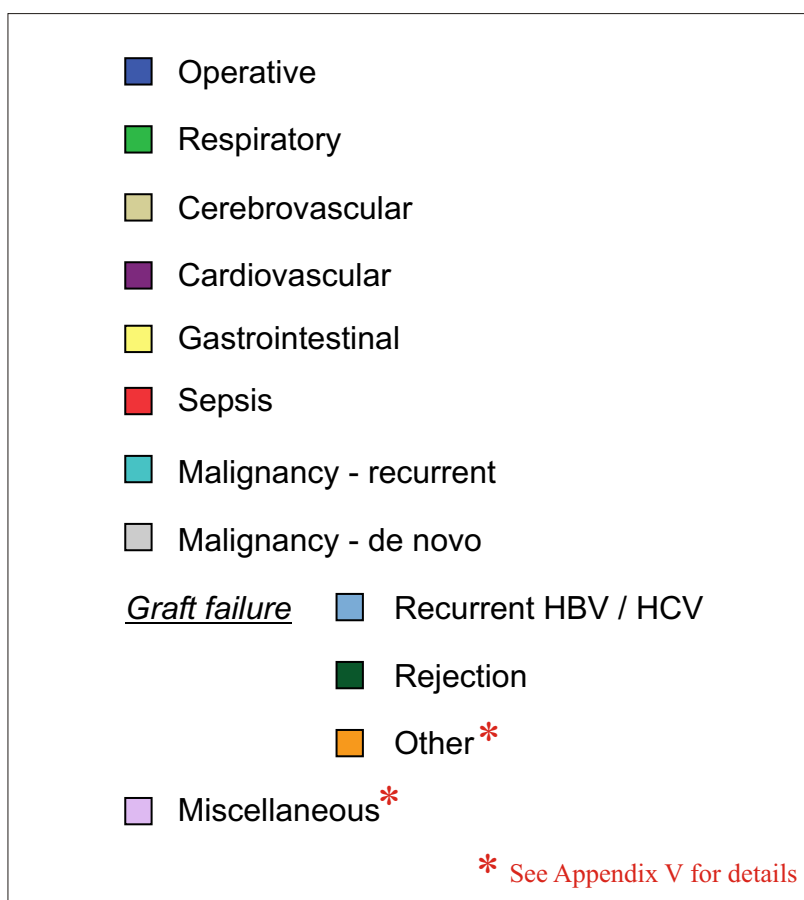


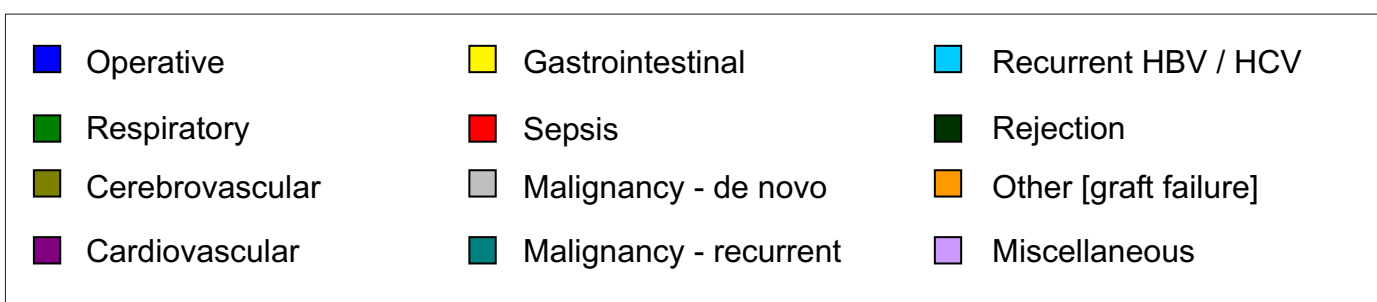
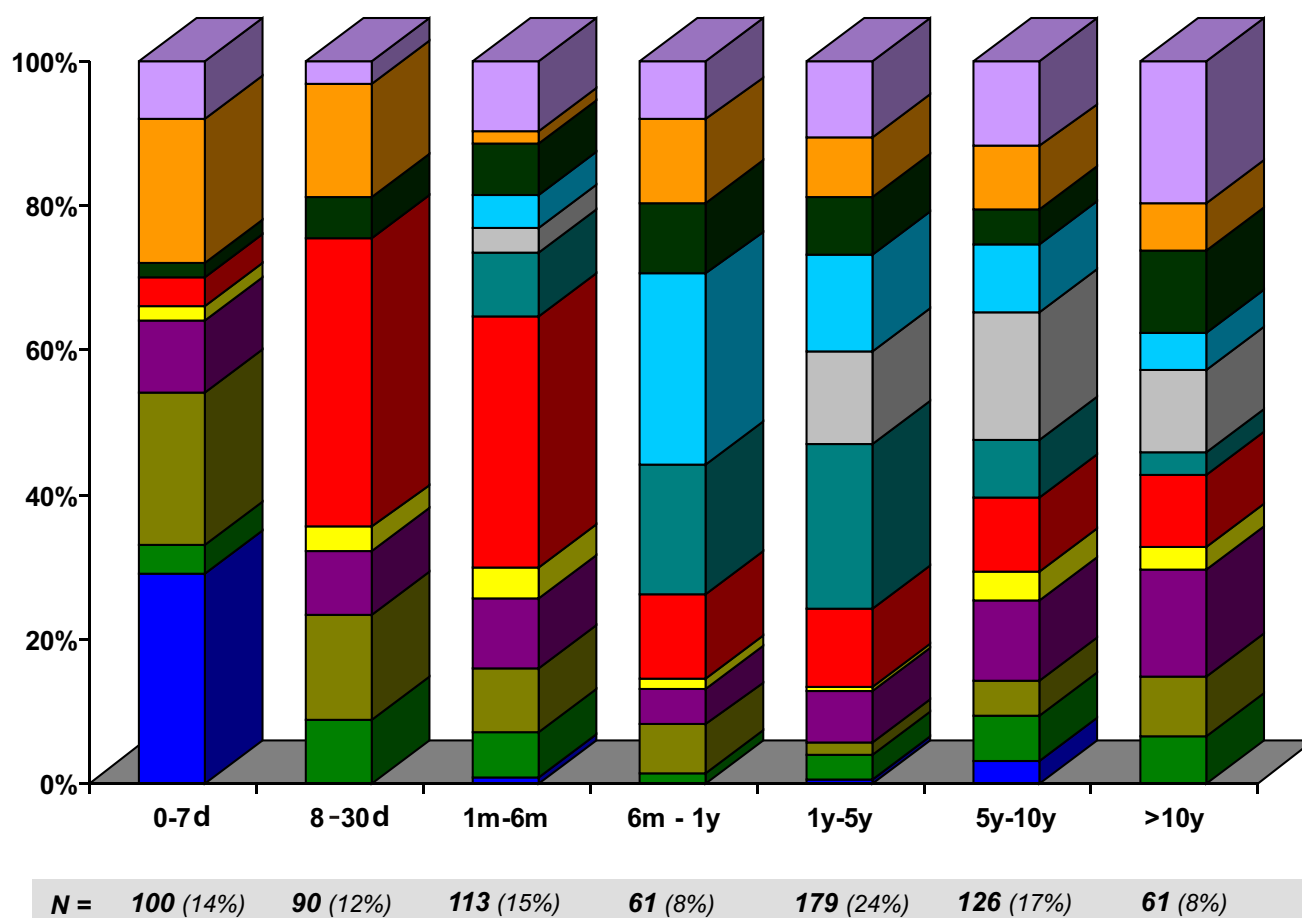
Section 5

Cause of Patient Death



All Patients n = 730





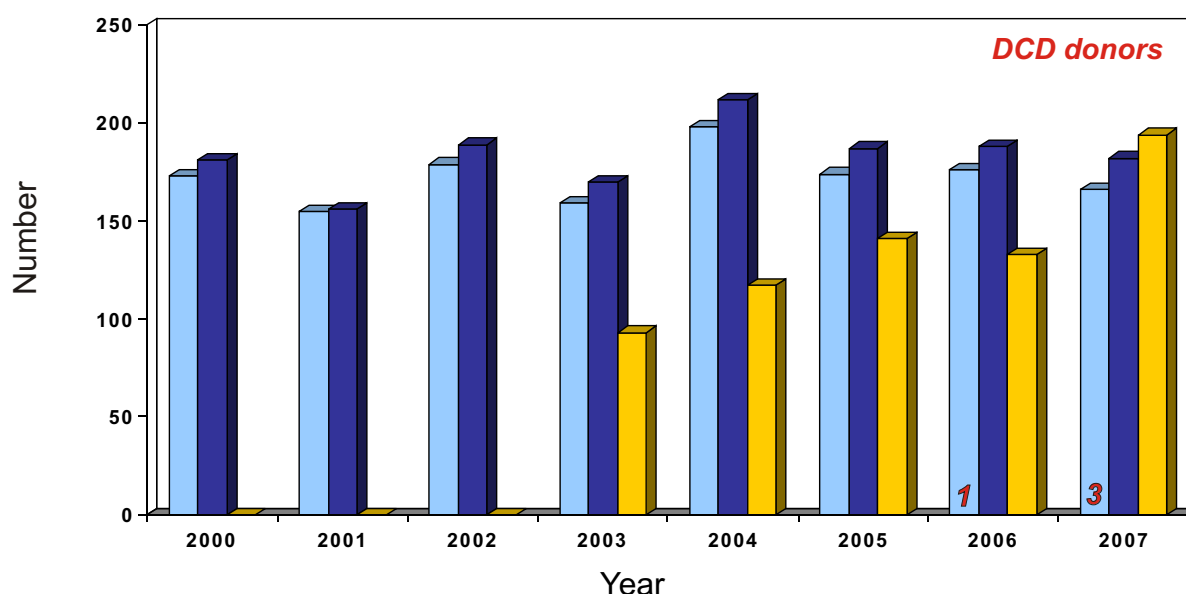
Section 6

Deceased Donor Information



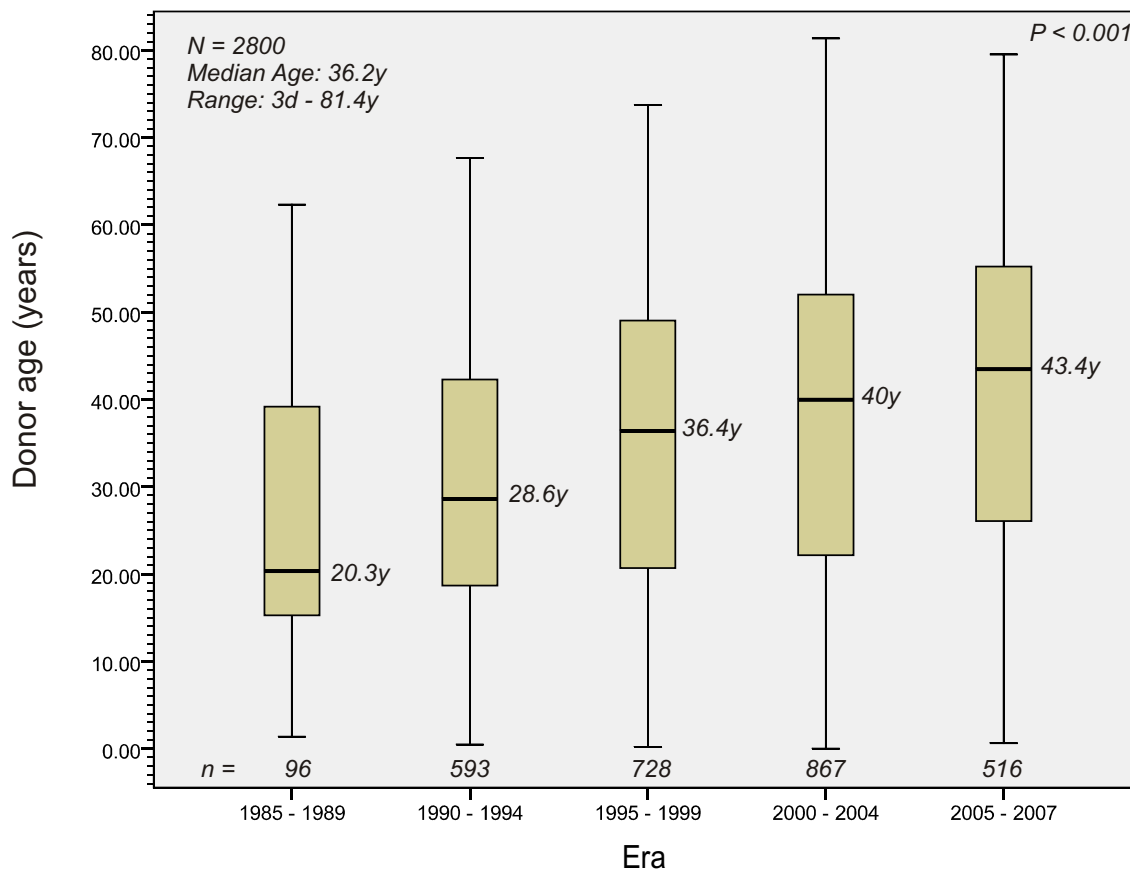
	QLD	NSW/ACT	VIC/TAS	SA/NT	WA	NZ	TOTAL
1990	22	27	16	5		7	77
1991	29	35	20	6	8	11	109
1992	43	32	18	9	8	24	134
1993	28	40	25	12	6	16	127
1994	29	39	23	12	10	21	134
1995	29	44	24	17	8	21	143
1996	26	37	19	17	10	24	133
1997	31	49	19	19	8	22	148
1998	29	44	27	22	13	27	162
1999	15	31	31	29	11	27	144
2000	26	51	26	24	12	34	173
2001	37	40	26	14	9	29	155
2002	34	42	38	24	11	30	179
2003	34	32/3	29/2	13	15	31	159
2004	30	49/4	35/1	26/1	17	35	198
2005	24	36/8	38/2	17/3	25	21	174
2006	28	34/3	39/6	25	17	24	176
2007	25	36/1	36	19/2	15	32	166

Grafts from deceased donors



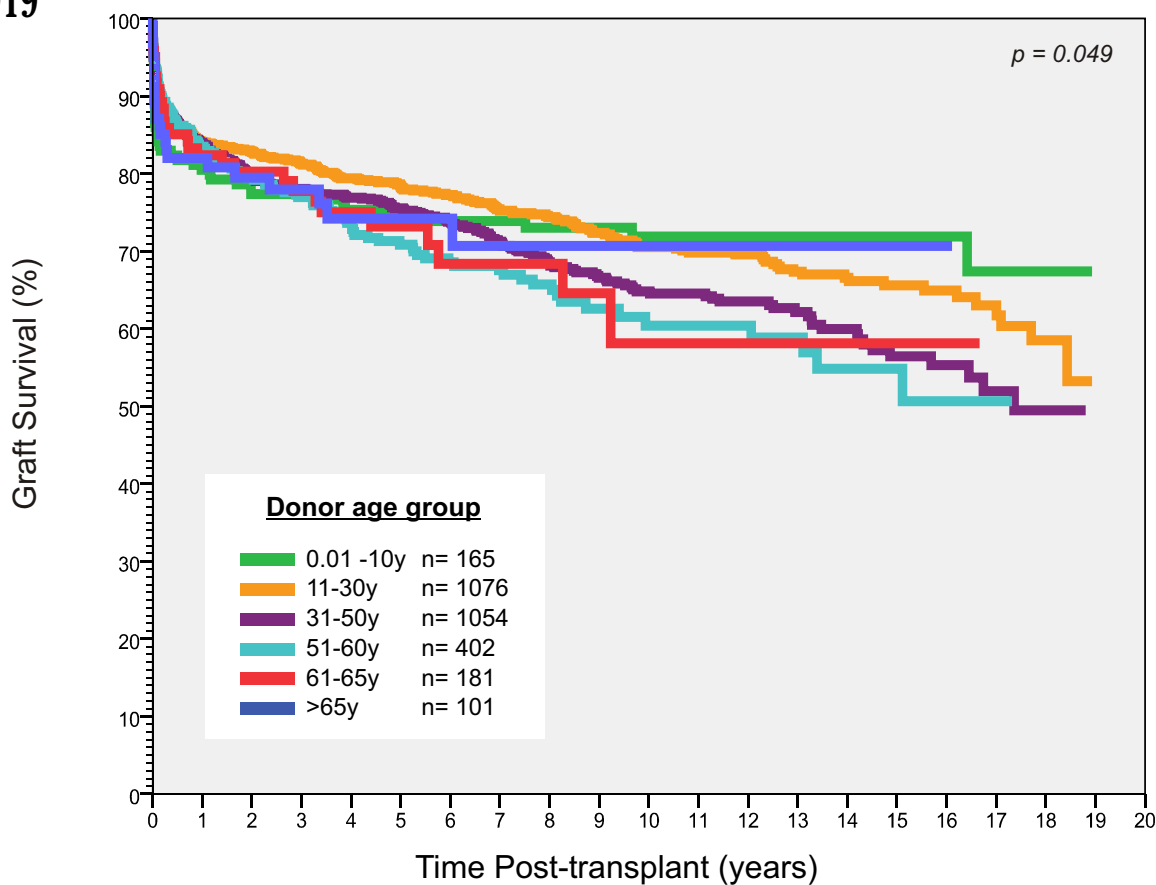
Donor Age by Era

N = 2800



Graft Survival by Donor Age

N = 2919



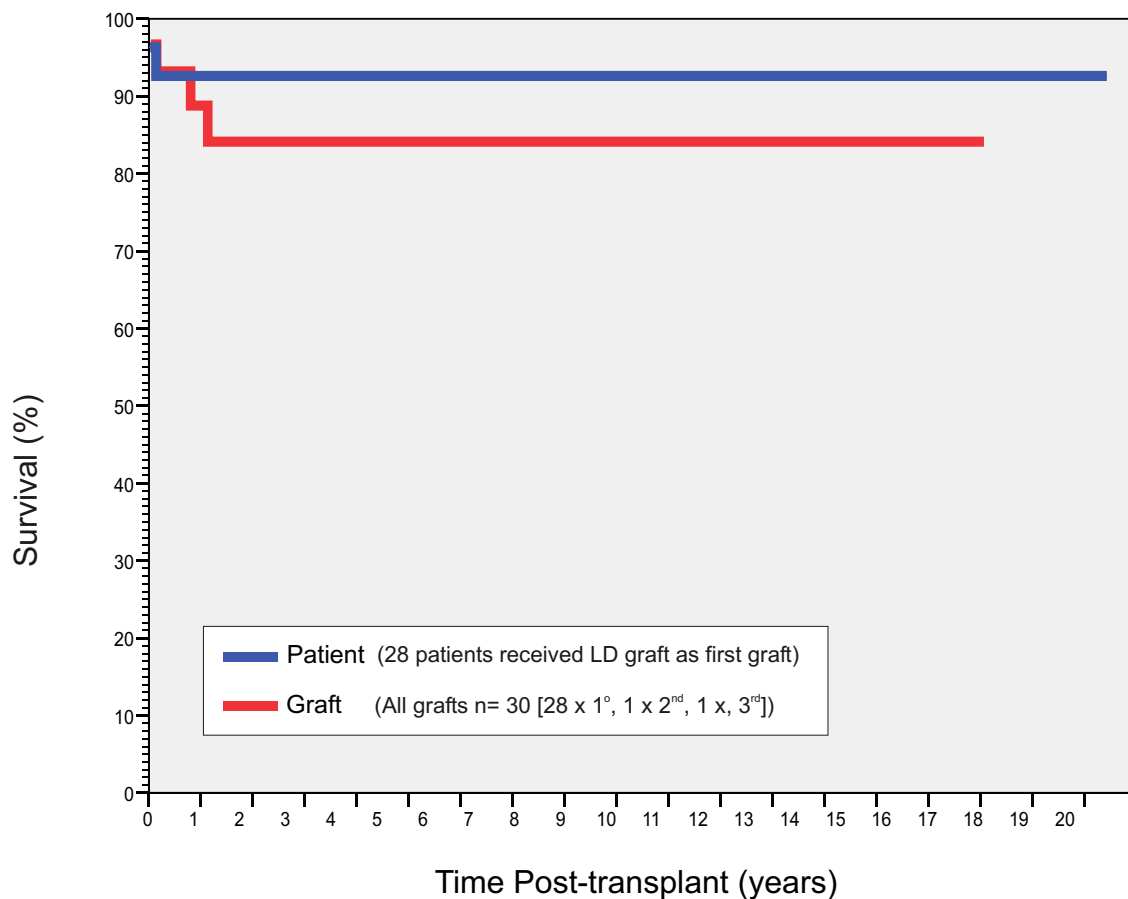
Section 7

Living Donor Transplantation



	Recipient Age Group		
	Child [n=24]	Adult [n=6]*	All [n=30]
Donor gender	-	-	-
Male	13	4	17
Female	11	2	13
Donor age	-	-	-
Median	35.9y	30.3y	35.3y
Range	29.7 - 54.5y	22.8 - 35.7y	22.8 - 54.5y
Donor relationship	-	-	-
Mother	5	-	5
Father	12	-	12
Son	-	1	1
Grandmother	1	-	1
Grandfather	1	-	1
Sister	-	2	2
Brother	-	2	2
Aunt	3	-	3
Family friend	2	-	2

* 1 x whole liver domino transplant



Section 8

Waiting List



Waiting List Activity

[Data 1/1/04 - 31/12/07]

Activity	2004	2005	2006	2007		
Listed at 1 January	93	117	145	133	-	TOTAL 2007
New listings	279	292	259	-	338	
TOTAL	372	409	404	133	338	471
OUTCOME						
Transplant	214 [58%]	191 [47%]	194 [48%]	67	123	190 [40%]
Delisted	41 [10%]	72 [18%]	77 [19%]	33	53	86 [18%]
Died on list	14	26	18	15	20	35
Too sick	8	9	13	4	9	13
Tumour progression	2	9	8	3	8	11
Improved	8	15	16	7	10	17
Other	9	13	22	4	6	10*
Still listed at 31 Dec	117 [32%]	146 [35%]	133 [33%]	33	162	195 [41%]

[*Other: Temporary delist - 4; Moved interstate - 2; Cardiac - 1; Respiratory - 1; Alcohol - 2; Patient wish - 1]

Outcome of Urgent Listing

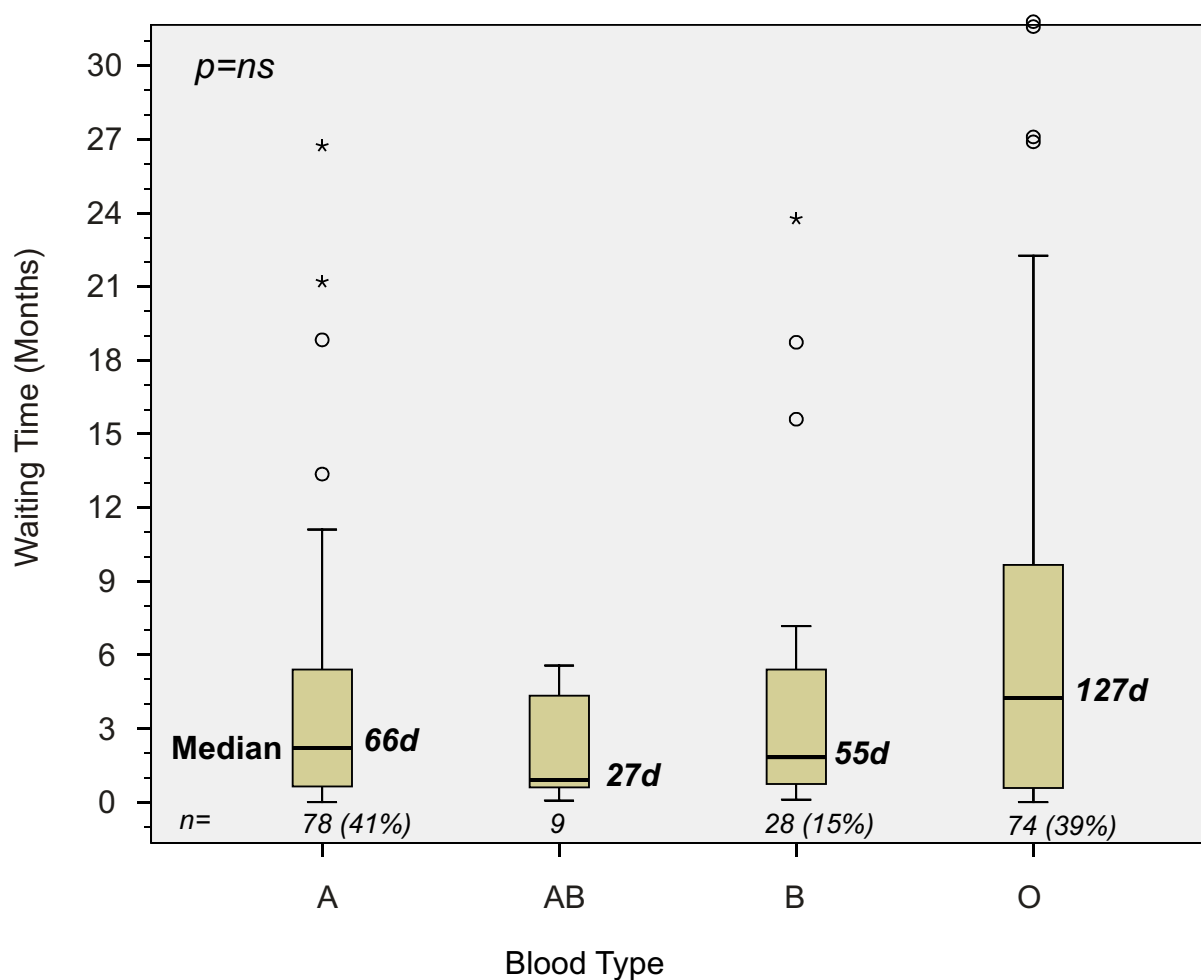
OUTCOME	CATEGORY 1			CATEGORY 2		
	2005 (n=14)	2006 (n=16)	2007 (n=18)	2005 (n=31)	2006 (n=26)	2007 (n=32)
TRANSPLANTED	4 } 64%	12 } 88%	10 } 67%	20 } 68%	21 } 88%	24 } 88%
IMPROVED	5 }	2 }	2 }	1 }	2 }	4 }
DIED	5	2	6	10	2	2
OTHER TREATMENT	-	-	-	-	1	-

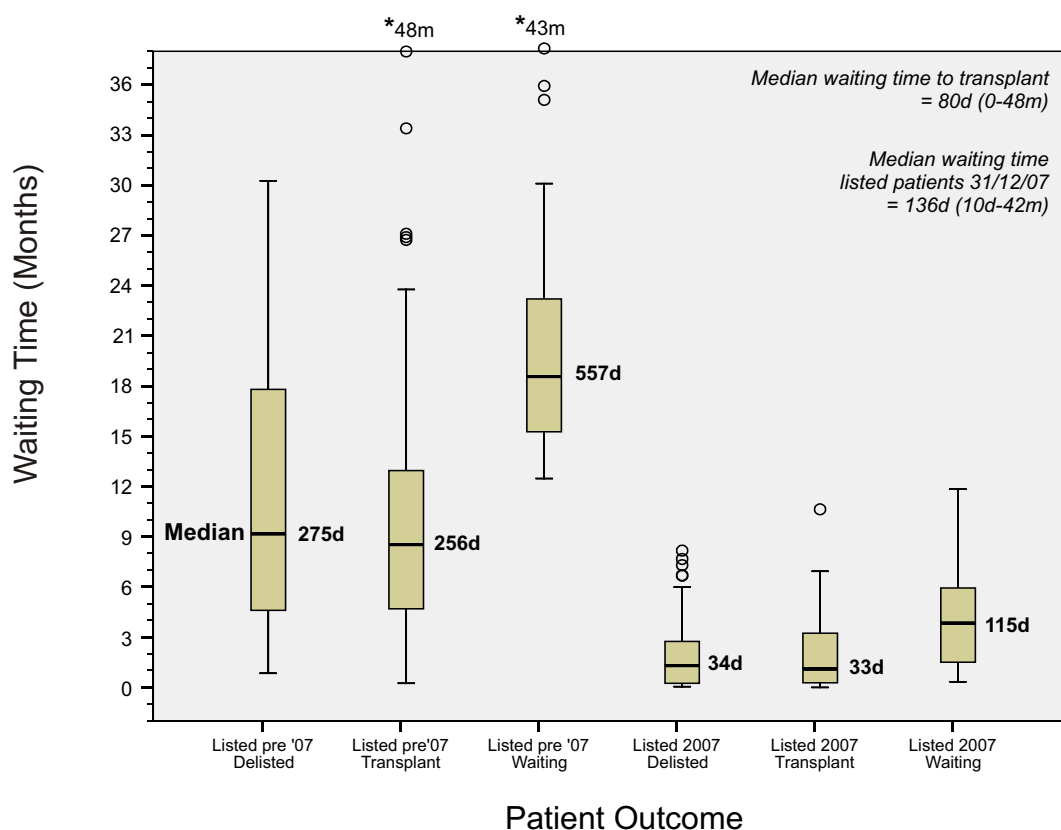
	Blood Group				
	A	O	B	AB	TOTAL
n=	167 (35.5%)*	218 (46%)	71 (15%)	15 (3%)	471
Not transplanted	89	144	42	6	281
Transplanted	78 (47%)**	74 (34%)	29 (41%)	9 (60%)	190

* % of total number listed

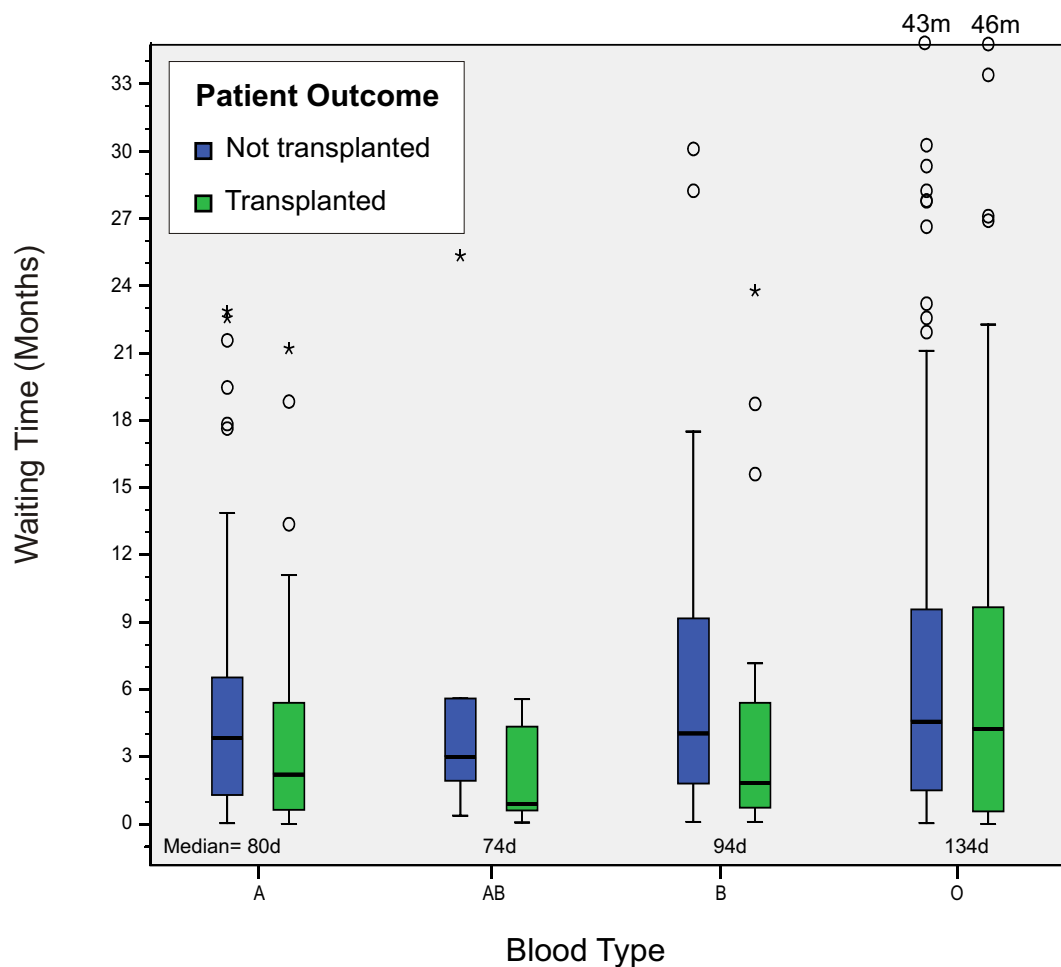
** % of blood group

Waiting Time to Transplant 2007





Waiting Time by Outcome & Blood Group



Section 9

Liver Transplantation and Cancer



Cancer in Liver Transplant Recipients

N = 2850

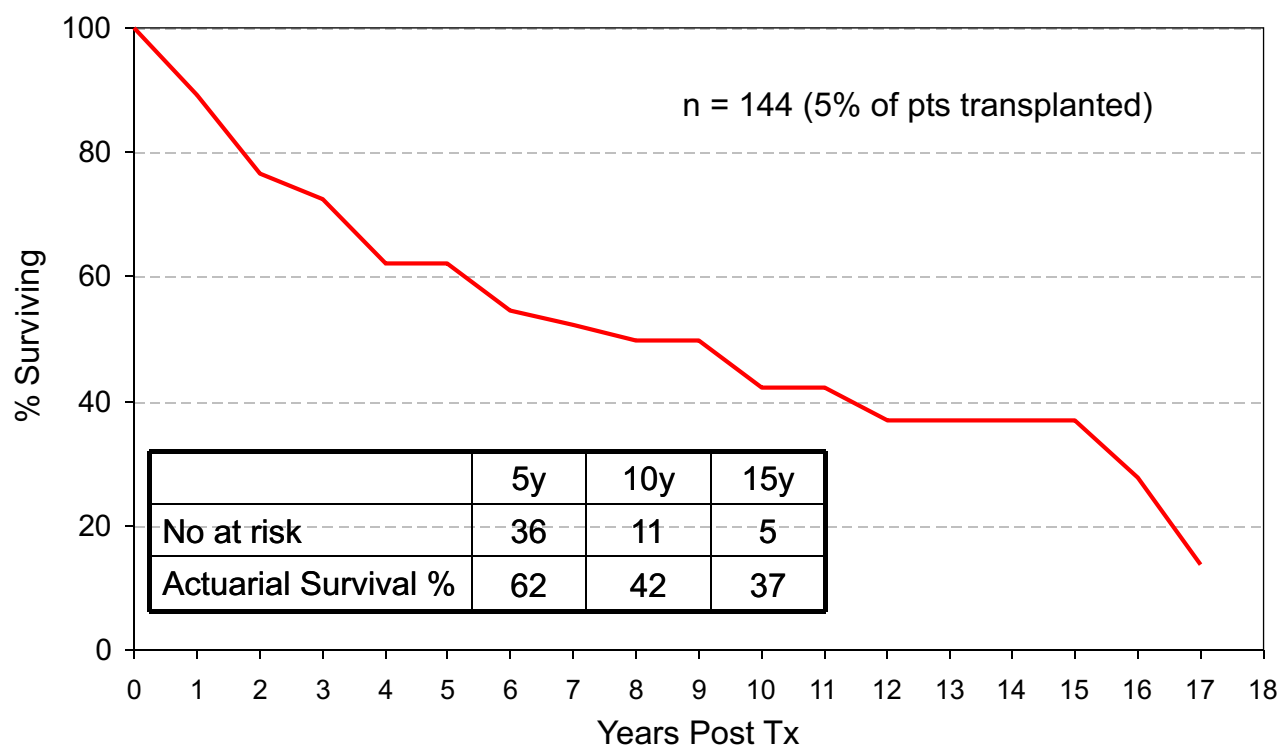
At Tx	
Tx for Liver Ca	144 (5%)
Liver Ca as a Secondary Diagnosis	291 (10%) 292 Ca
Total	435 (15%)
Post Tx	
Recurrent Liver Ca	77 (3% of all pts, 18% of pts with Ca at Tx)
De Novo Ca	161 (6%) 170 Ca
Skin Ca	348 (12%)
Total	586 (21%)
Multiple Ca	68
Pre-Tx cancer developed de novo cancer	15 (3% of pts with Ca at Tx)
Transferred from Donor	2
Developed non skin Ca < 90days	8

Liver Cancer as Primary Diagnosis

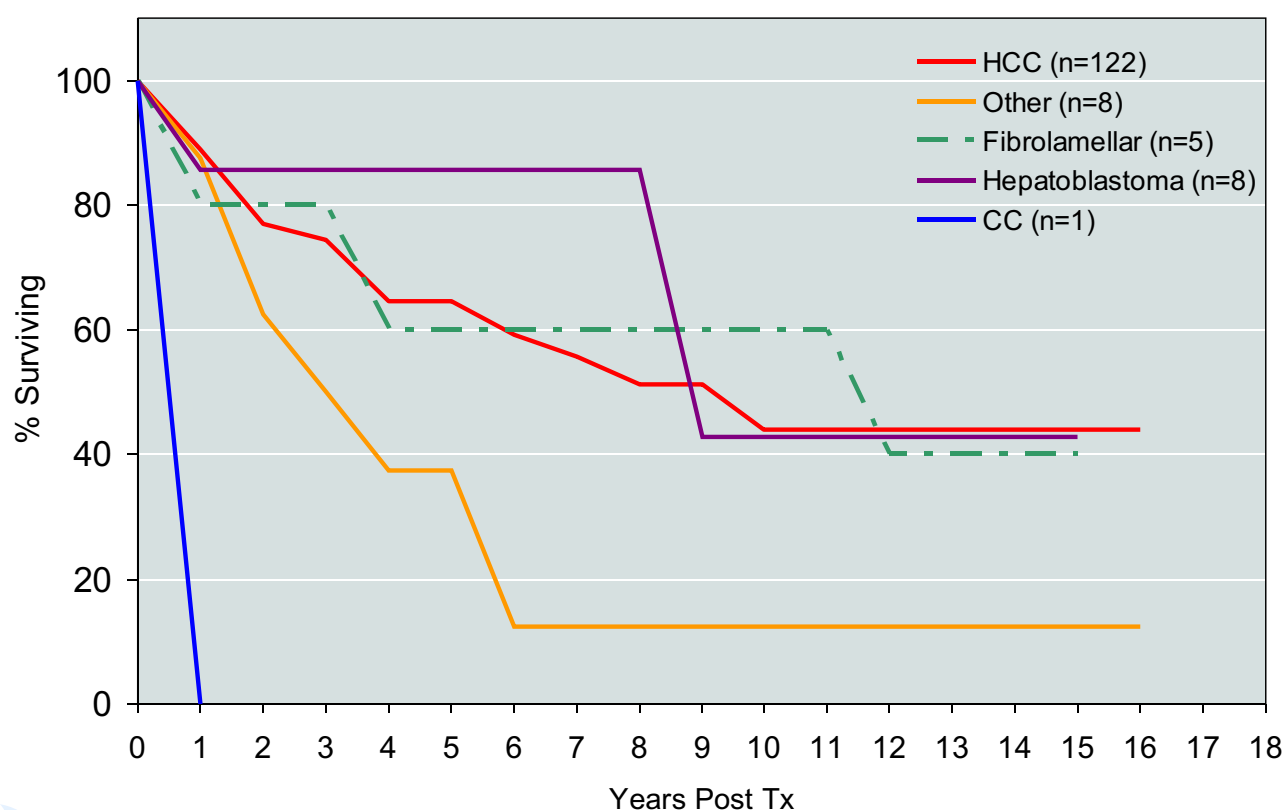
N= 2850

TYPE OF CA	No	DIED	DIED OF THIS CA
HEPATOCELLULAR CA	122	38	22 (18%)
HEPATOBLASTOMA	8	2	1 (12%)
FIBROLAMELLAR	5	5	2 (40%)
HEPATOBLASTOMA	8	2	1 (12%)
CARCINOID	4	4	4 (100%)
CHOLANGIOCARCINOMA	1	1	1 (100%)
ANGIOSARCOMA	1	1	1 (100%)
EPITHELOID HAEMANGIOENDOTHELIOMA	1	0	0
GASTRINOMA	1	1	1 (100%)
PANCREATIC ISLET CELL	1	1	1 (100%)
TOTALS	144 (5% of pts)	53 (37% of those with PCa)	33 (23% of those with PCa)

Overall Survival
Primary Liver Cancer
N = 144 (5% of patients transplanted)



Overall Survival
Primary Liver Cancer
N = 144 / 2850 (5%)



Primary Liver Cancer

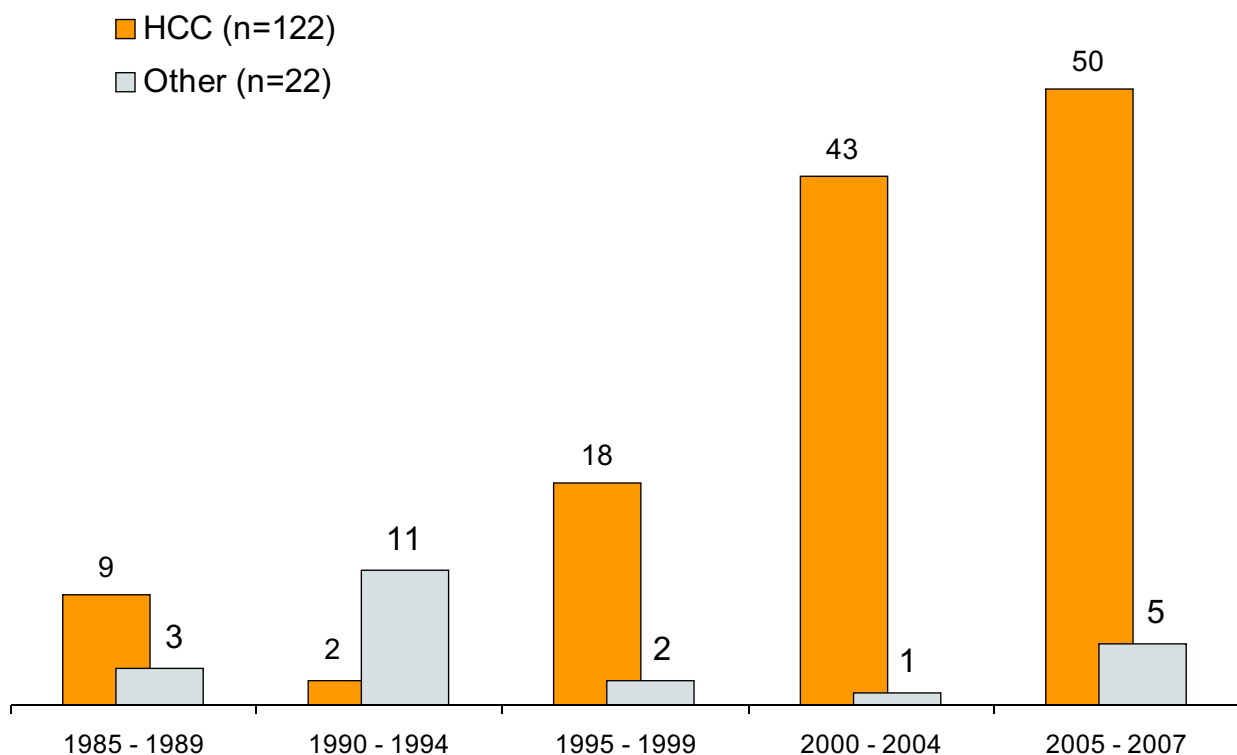
Actuarial Survival Summary

N = 2850

		1yr	5yr	10yr	15yr
HCC (n=122)	n	95	27	6	2
	%	89	65	44	44
Other (n=8)	n	8	4	2	2
	%	88	38	13	13
Hepatoblastoma (n=8)	n	6	4	2	2
	%	86	86	43	43
Lamella Variant (n=5)	n	5	4	4	2
	%	80	60	60	40
CC (n=1)	n	1			
	%	1			

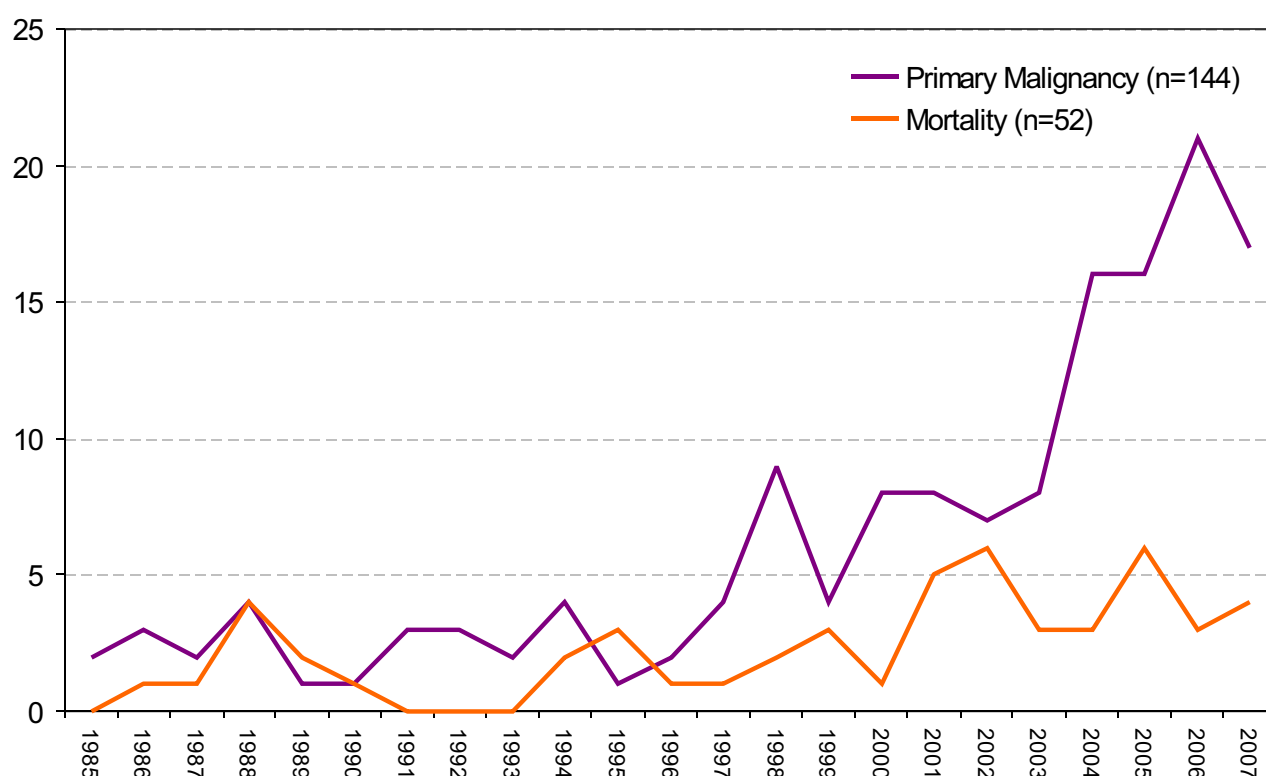
Liver Cancer as Primary Diagnosis

n = 144

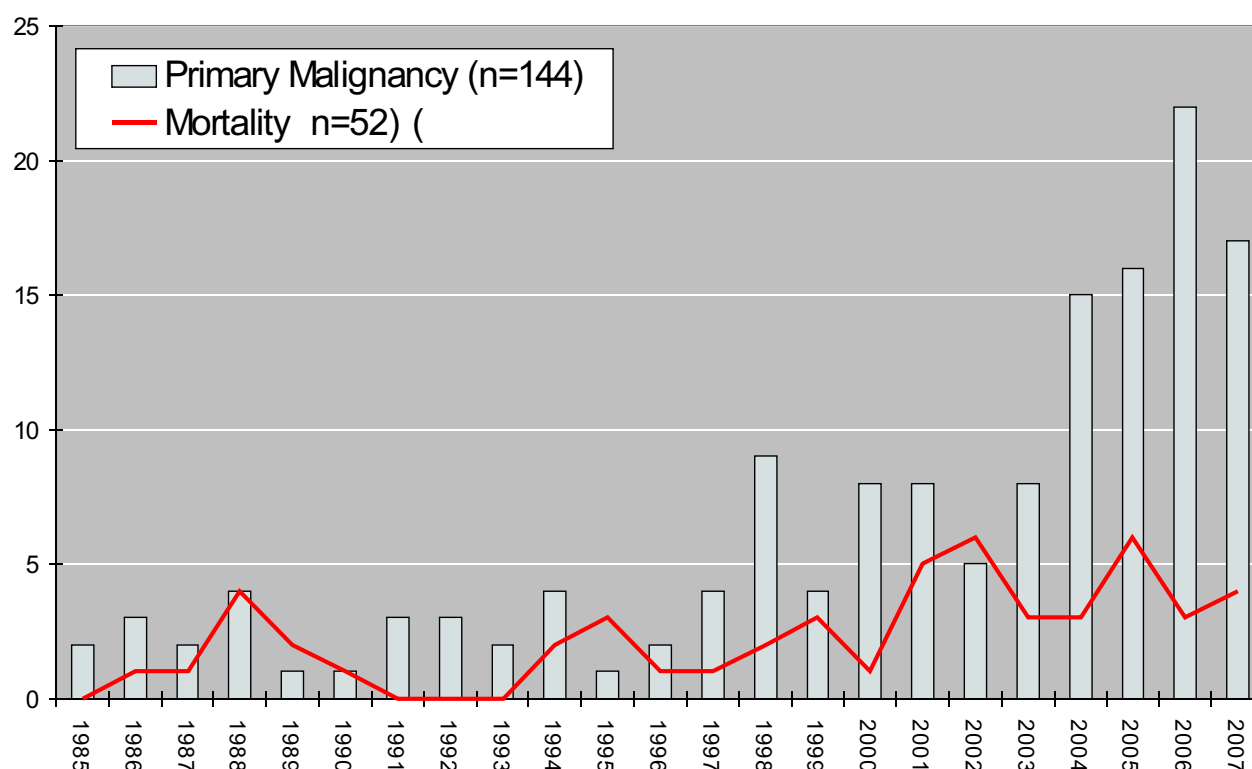


Primary Liver Cancer Incidence and Mortality

n=144/2850 (5%)



Primary Liver Cancer Incidence and Mortality



Liver Cancer as a Secondary Diagnosis

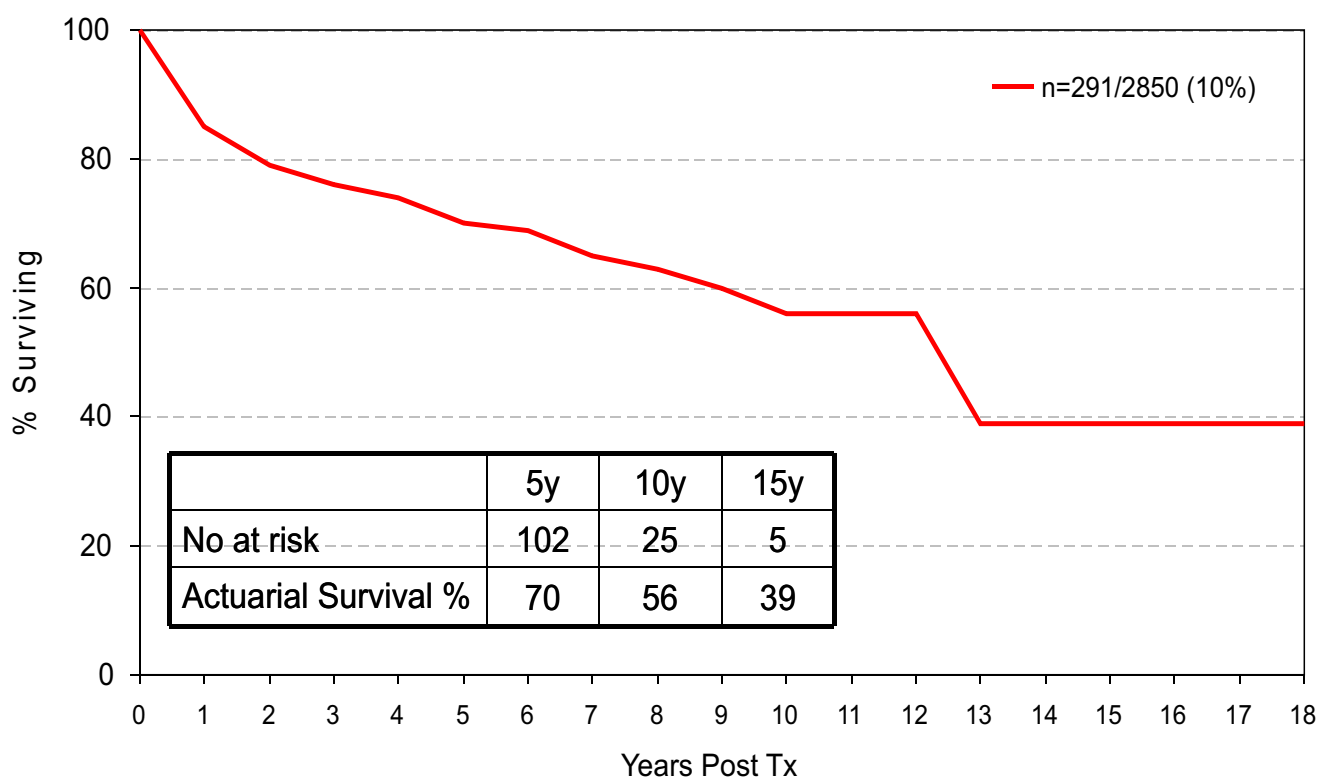
N = 2850

	No	Died	Died of This Cancer
HEPATOCELLULAR CA*	258	65	21 (8%)
CHOLANGIO CA	25	16	13 (52%)
ADENOCARCINOMA	3	3	0
HEPATOBLASTOMA*	2	1	0
FIBROLAMELLAR	2	1	1
ANGIOSARCOMA	1	1	1
EPITHELOID HAEMANGIOCA	1	0	0
Total	292* in 291 pts (10%)	88 (31% of pts with SCa)	36 (12.5% of pts with SCa)

* 1 patient had 2 secondary cancers

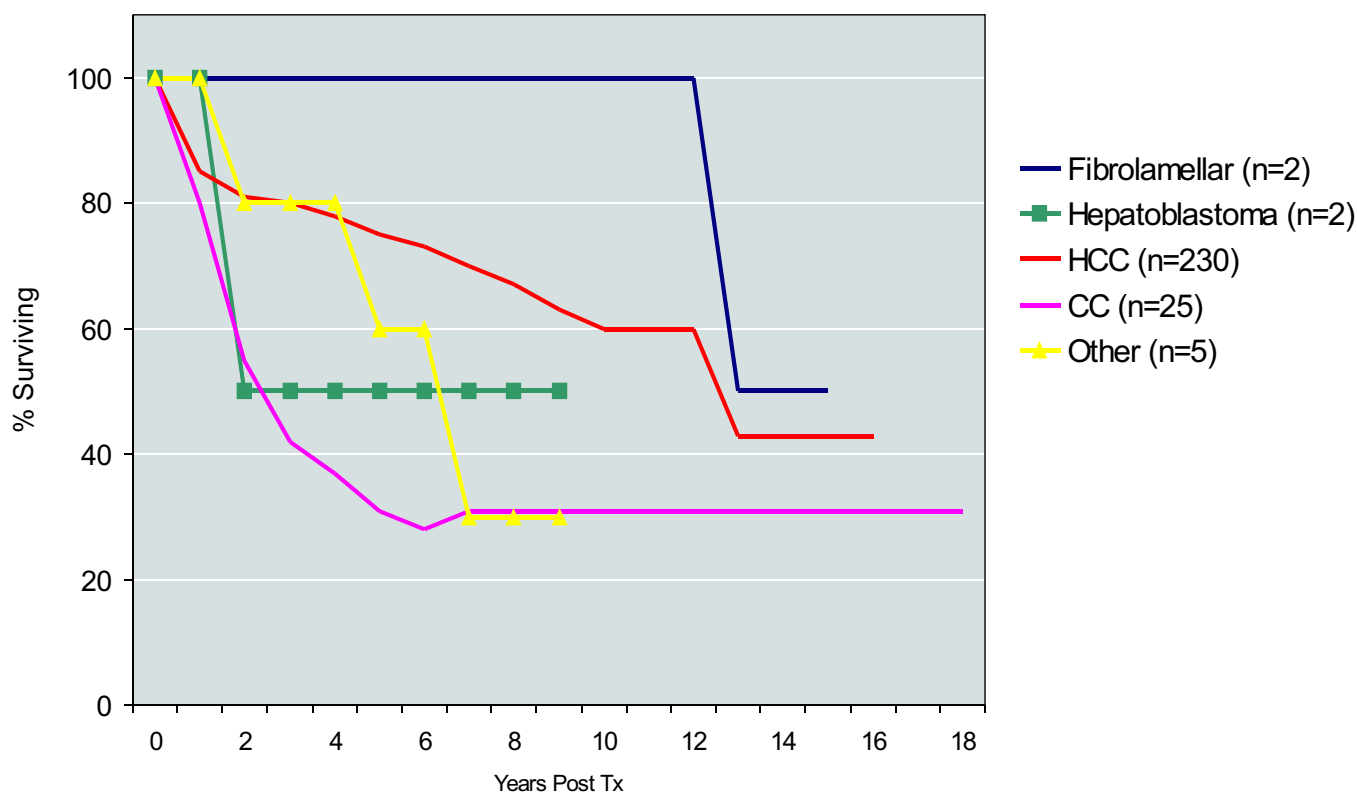
Overall Survival

Liver Cancer as a Secondary Diagnosis



Liver Cancer as a Secondary Diagnosis

N = 2850



Secondary Liver Cancer Actuarial Survival Summary

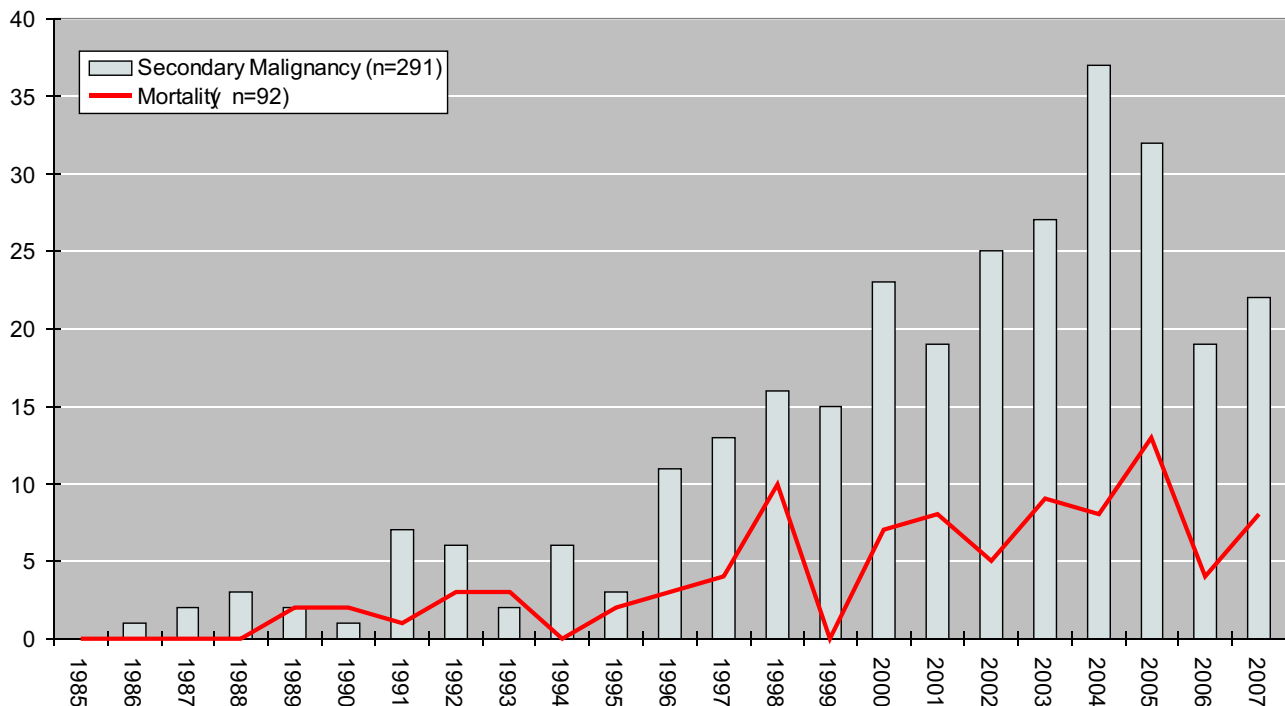
N = 2850

		1yr	5yr	10yr	15yr
CC (n=25)	n	20	6	4	2
	%	80	31	31	31
HCC (n=258)	n	201	92	19	3
	%	85	75	60	43
Hepatoblastoma (n=2)	n	2	2	2	1
	%	50	50	50	50
Lamella Variant (n=2)	n	2	2	2	1
	%	50	50	50	50
Other (n=5)	n	5	5		
	%	80	60		

Liver Cancer as a Secondary Diagnosis

Incidence and Mortality

n=291/2850 (10%)



Liver Cancer

(Primary or Secondary Diagnosis)

N = 2850

TYPE OF CA	NO	DIED	DIED OF THIS CA
HEPATOCELLULAR CA*	380	103	43 (11%)
CHOLANGIOCARCINOMA	26	17	14 (54%)
HEPATOBLASTOMA*	10	3	1 (10%)
FIBROLAMELLAR	7	6	3 (43%)
CARCINOID	4	4	4 (100%)
ADENOCARCINOMA	3	3	0
EPITHELOID HAEMANGIOENDOTHELIOMA	2	0	0
GASTRINOMA	1	1	1 (100%)
PANCREATIC ISLET CELL	1	1	1 (100%)
ANGIOSARCOMA	1	1	1 (100%)
TOTALS	435 (15% of pts)	140 (32% of those with Ca)	69 (16% of those with Ca at Tx)

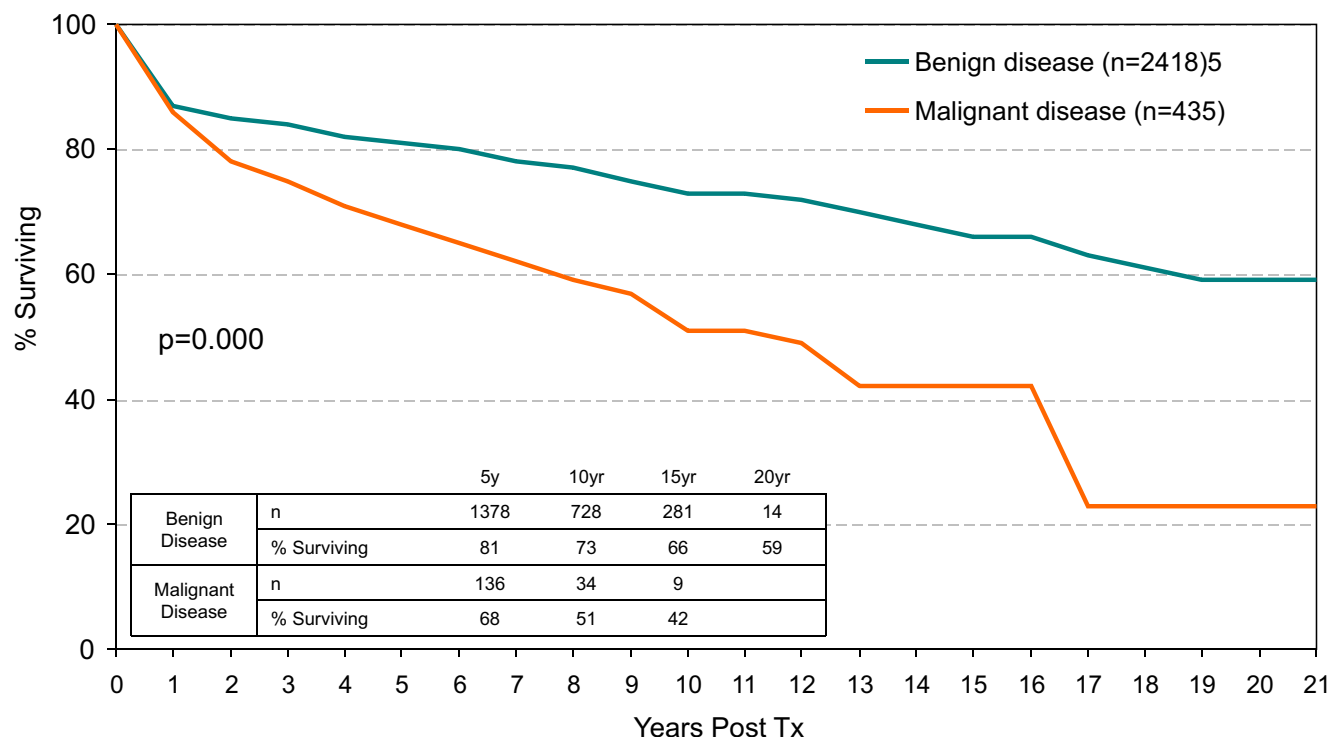
* 1 patient had 2 secondary cancers

Patient Actuarial Survival

Benign Disease vs Pre Transplant Liver Malignancy

N = 2850

n = 2850



De Novo Non Skin Cancer

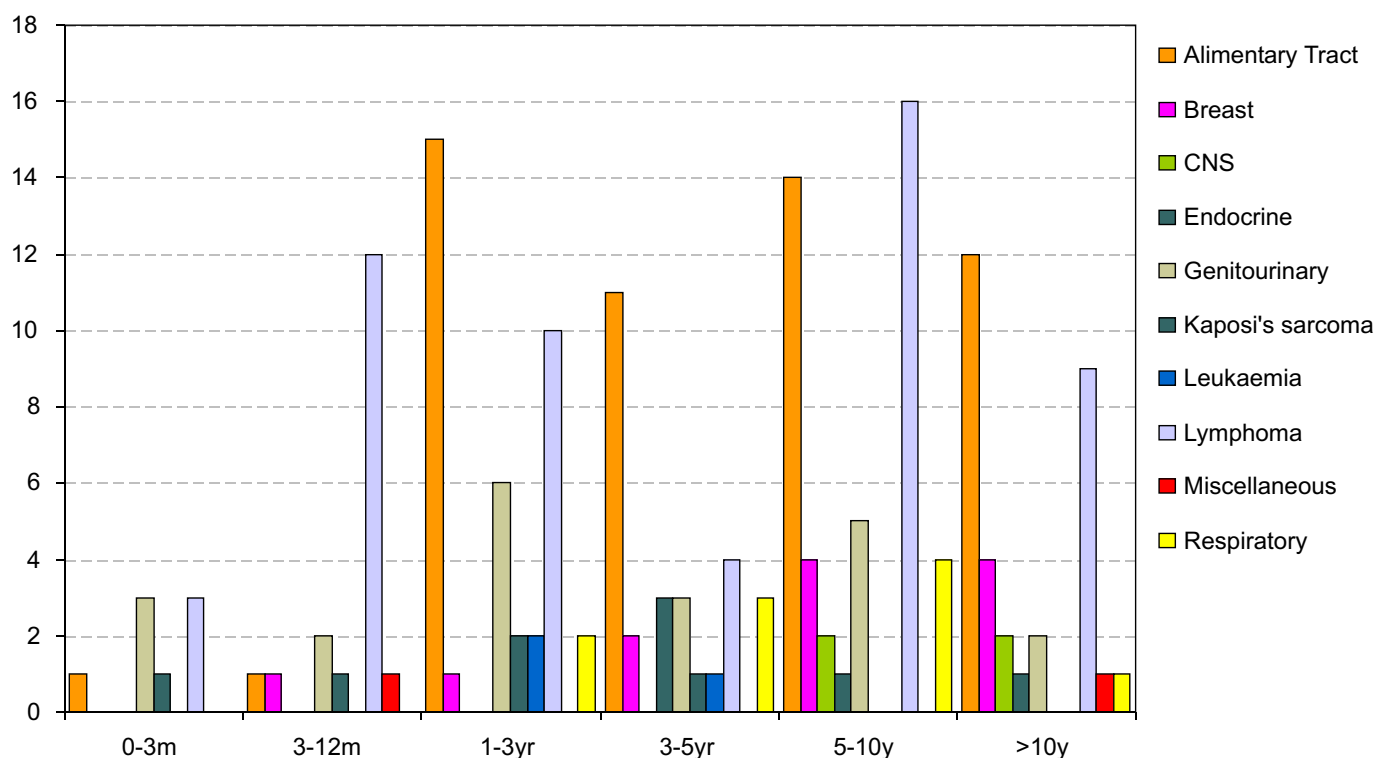
N = 2850

	No	Male	Female	Age of pts (yrs)	Time to diagnosis (mths)	Died of This Cancer
Alimentary*	54	38	16	12.6 – 78 (m 58)	3 – 207 (m 58)	24 (44%)
Lymphoma*	54	34	20	1.5 – 69 (m 45)	1 – 182 (m 51)	21 (39%)
Genitourinary*	21	11	10	38.5 – 70.5 (m 60)	2 – 164 (m 29)	2 (10%)
Breast	12	-	12	30 – 62.8 (m 50)	11 – 204 (m 80)	2 (17%)
Respiratory	10	7	3	29 – 61.1 (m 51)	13 – 170 (m 57)	7 (70%)
Kaposi's	5	4	1	32.1 – 64 (m 49)	2 – 48 (m 16)	0
Endocrine	5	2	3	36 – 70 (m 63)	47 – 144 (m 55)	2 (40%)
CNS	4	2	2	16.5 – 75 (m 50)	66 – 174 (m 120)	3 (75%)
Leukaemia	3	1	2	2.9 – 49.5 (m 37)	16 – 44 (m 30)	0
Miscellaneous	2	1	1	63 – 67 (m 65)	6 – 145 (m 75)	0
Total	*170 ca in 161 pts	100	70	1.5 – 78 (m 52)	1 – 207 (m 55)	61 (38% of pts with Ca)

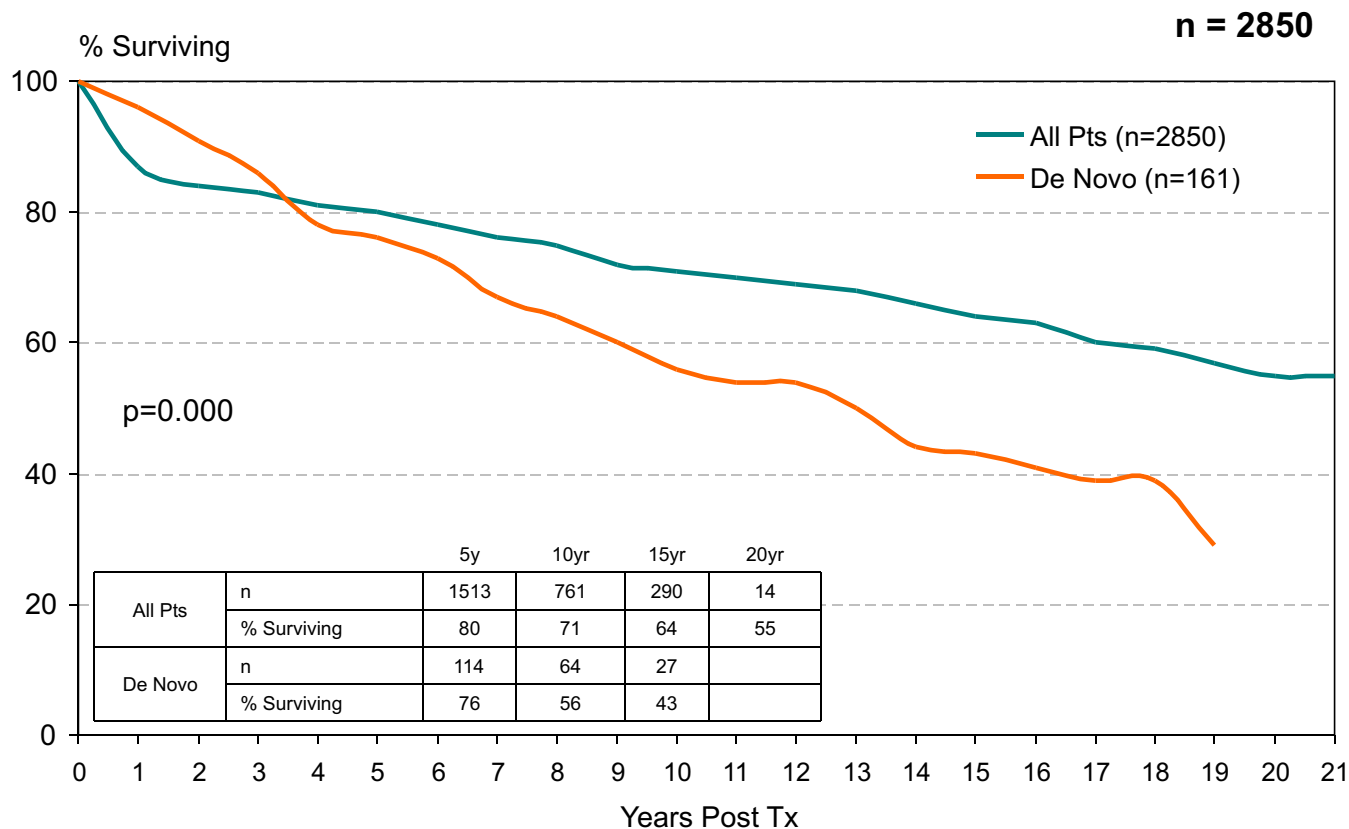
Fifteen patients also had a livercancer at Tx; * 7 patients had more than 1 de novo malignancies

Time to 1st De Novo Non Skin Cancer N = 2850

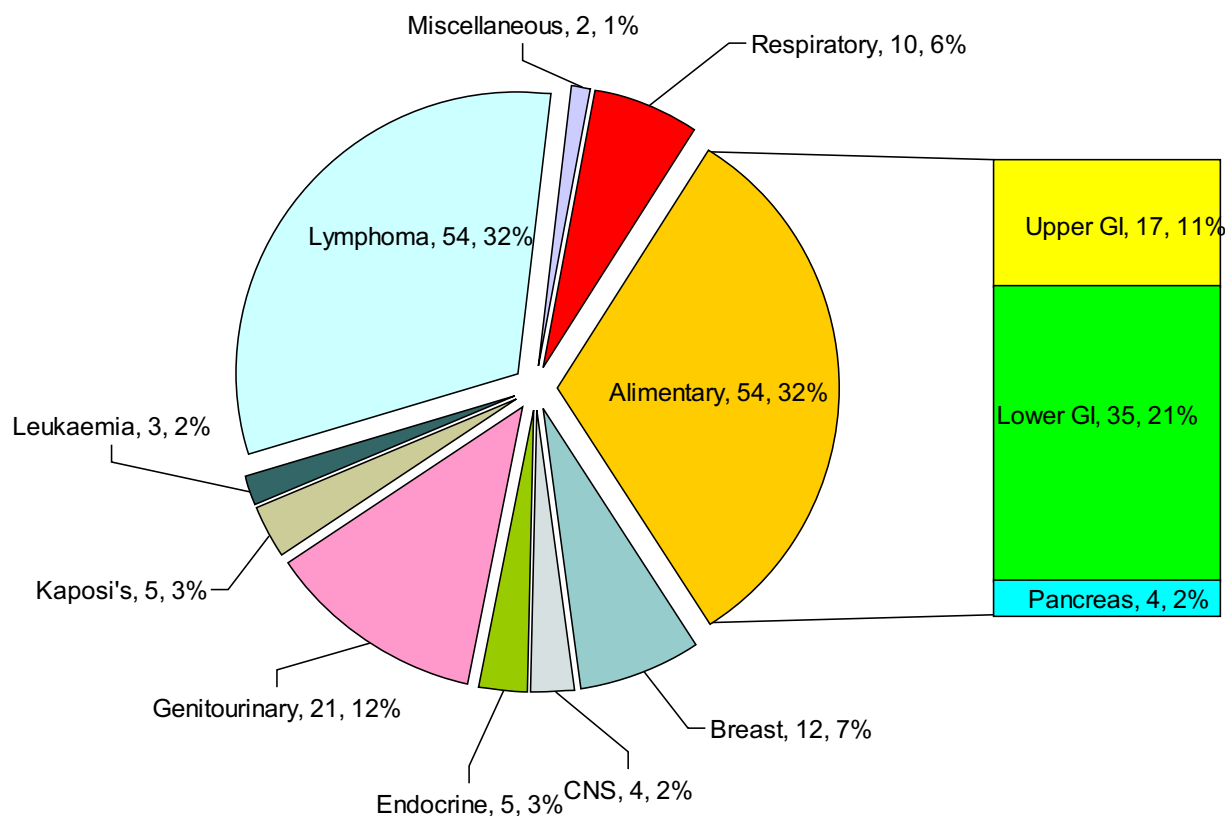
170 cancers in 161 pts (5% of all pts)



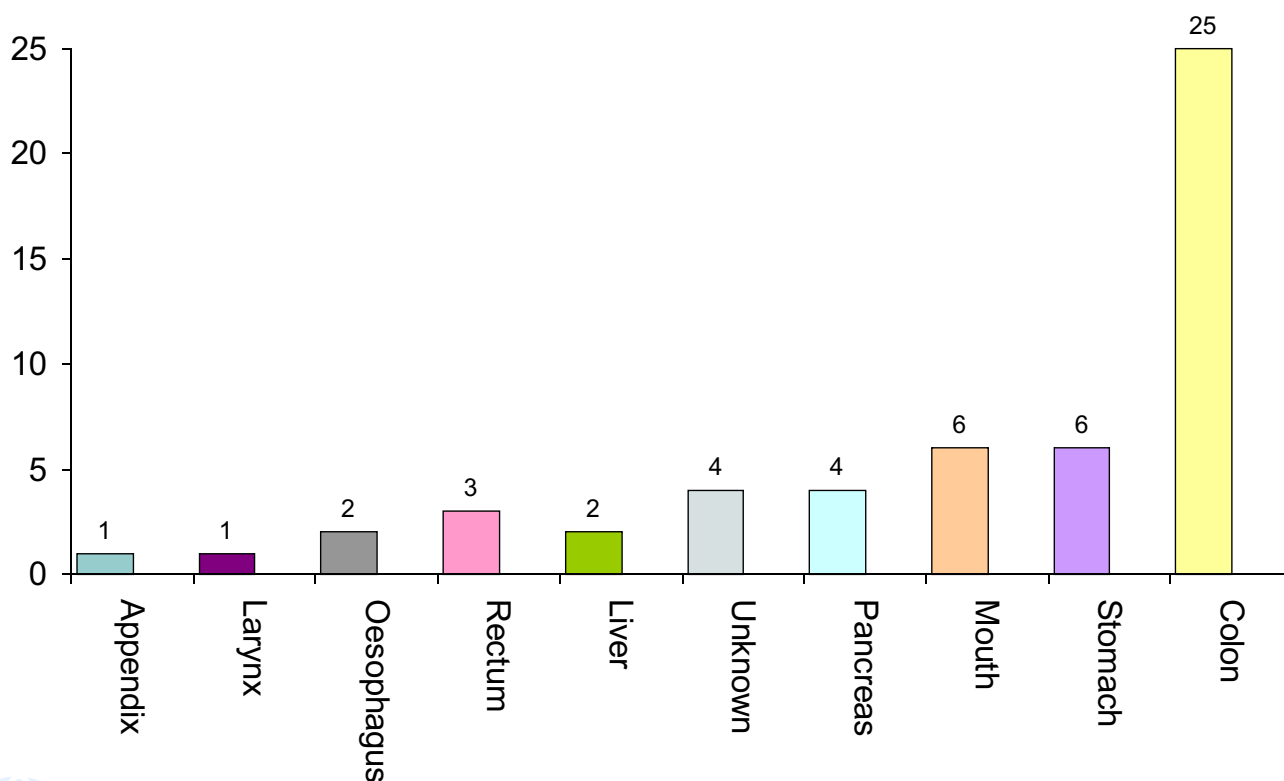
De Novo Non Skin Cancer vs All Patients N = 2850



De Novo Non Skin Cancer n = 161/2850 (6%)



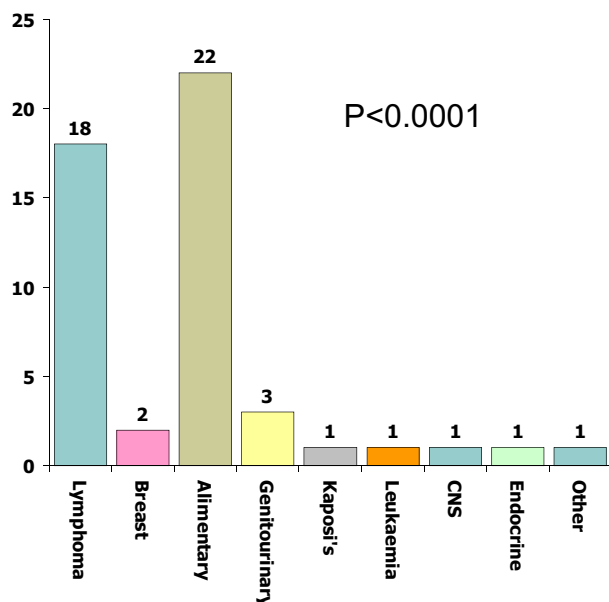
De Novo Non Skin Cancer Alimentary Tract Incidence n = 54/170 cancers (32%)



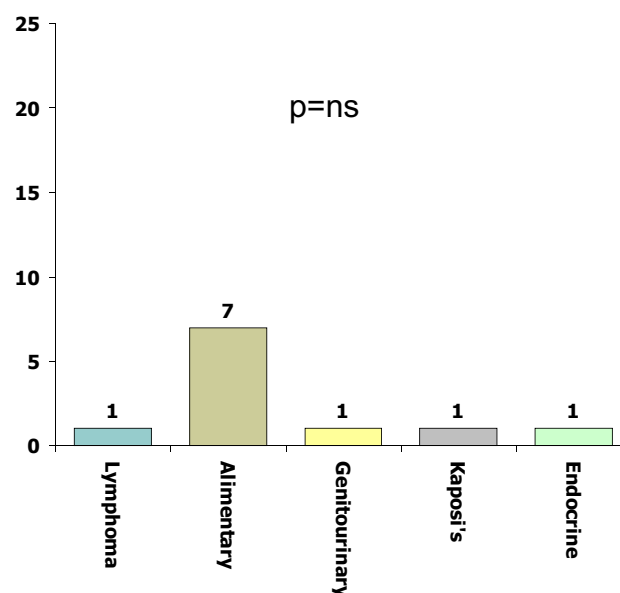
Pre Transplant Liver Disease and De Novo Non Skin Cancer

n = 161/2850 (6%)

PSC + Auto-immune - 50/417 (12%)
31% of all de novo



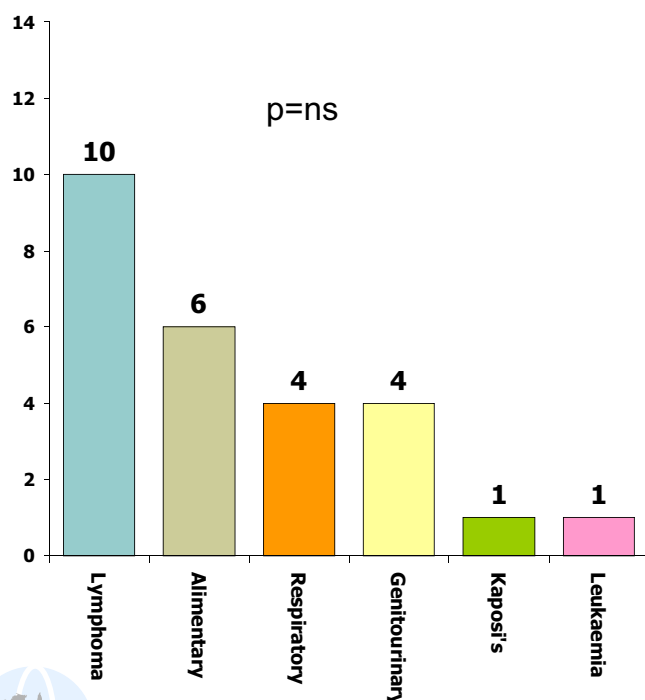
HBV - 11/315 (3%)
7% of all de novo



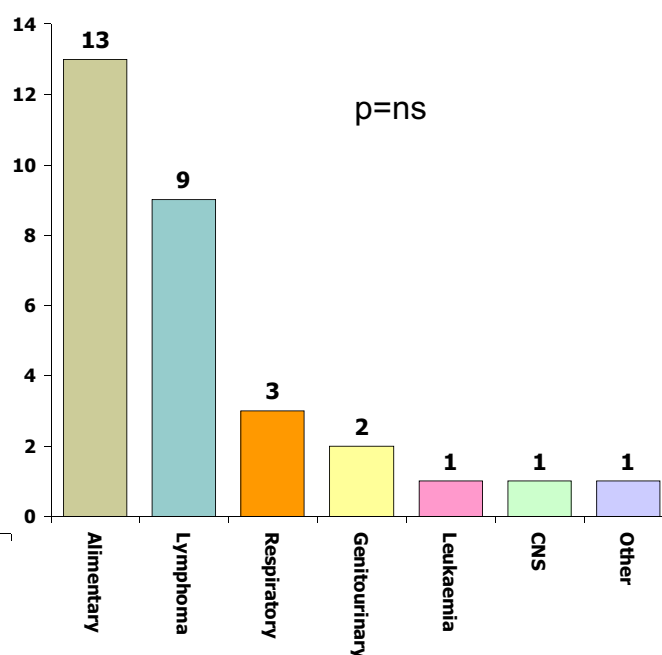
Pre Transplant Liver Disease and De Novo Non Skin Cancer

n = 161/2850 (6%)

HCV - 26/565 (5%)
16% of all de novo

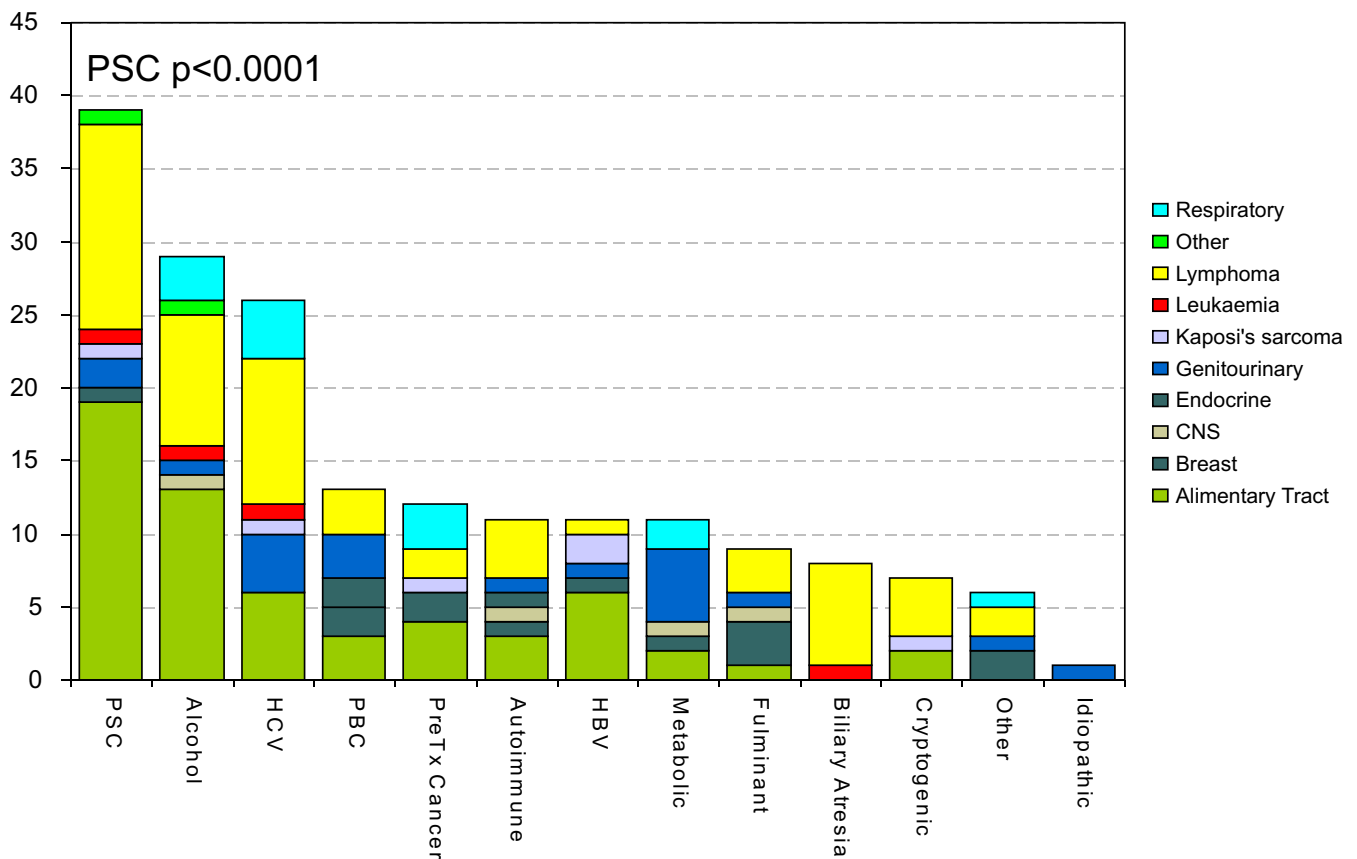


Alcohol - 30/410 (7%)
19% of all de novo



Pre Transplant Liver Disease and De Novo Non Skin Cancer

n = 161/2850 (6%)



Skin Ca Post Liver Transplant

n = 2850

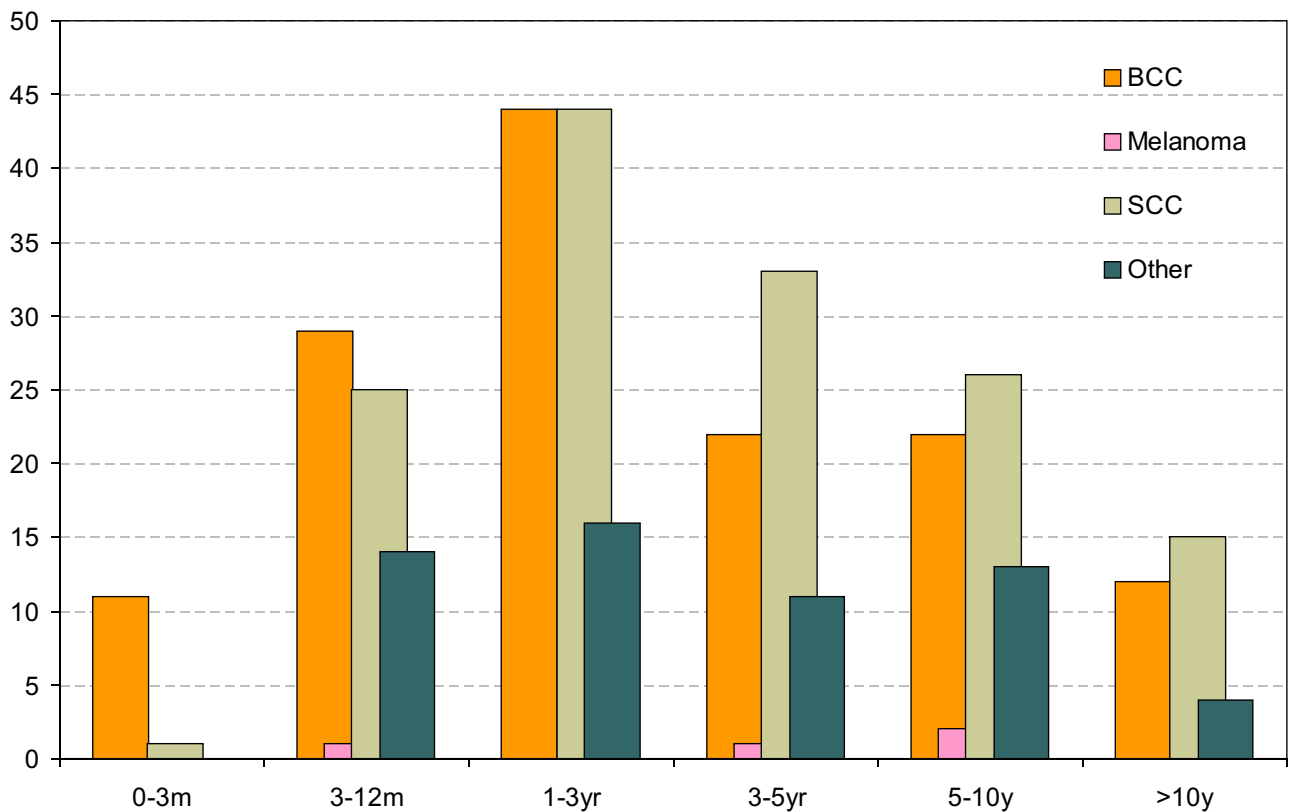
Type of Skin Cancer	Pts	Cancers
BCC	208	616
SCC	219	879
Melanoma	15	15
Total	348 (12% of all pts)**	2223

**** 147 pts had multiple skin cancer types**

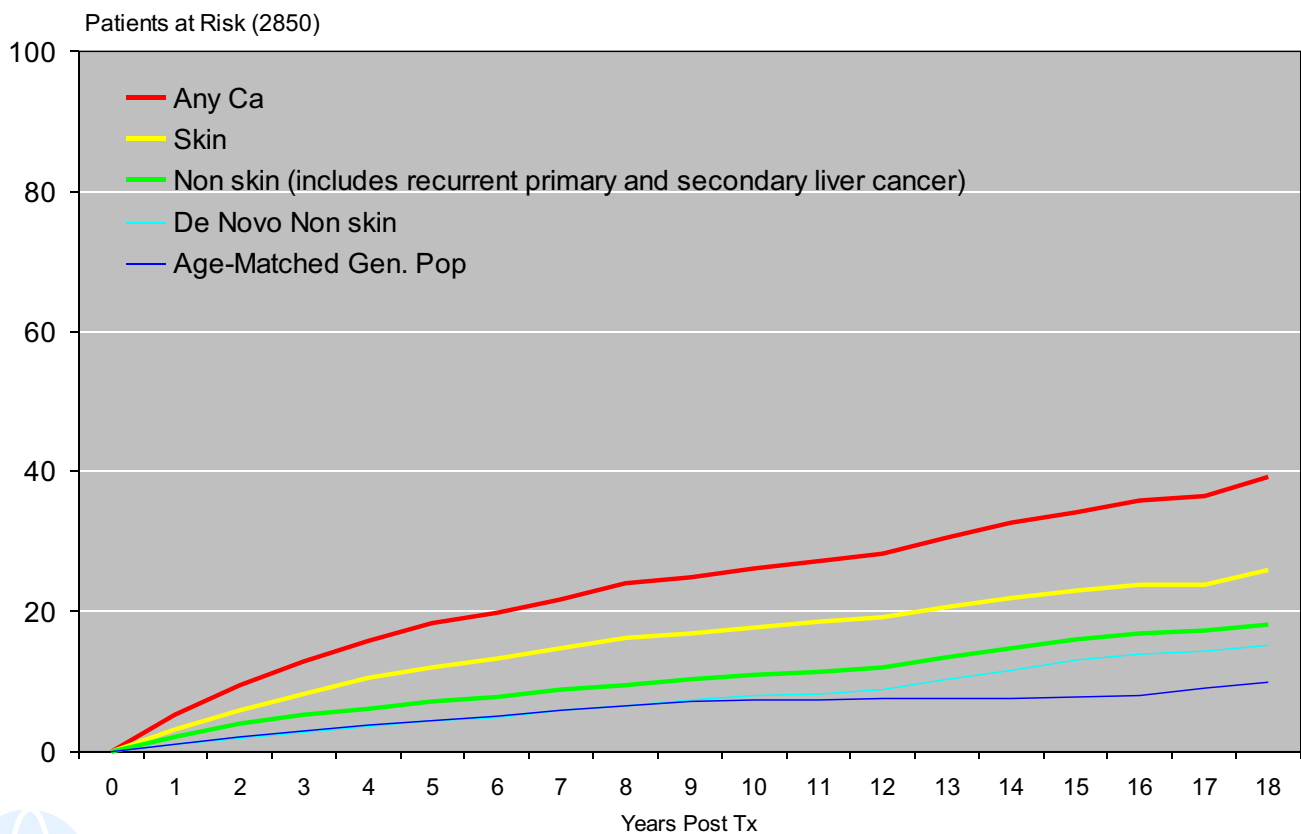
Time to 1st Skin Cancer Development

n = 2850

348 (12% of all pts)



Cumulative Risk of Diagnosis of Cancer Following Liver Transplant 1985-2007



Appendix I

Liver Transplant Units of Australia and New Zealand

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>

And

The Children's Hospital at Westmead

Hawkesbury Road

WESTMEAD NSW 2145

Victorian Liver Transplantation Unit

The Austin Hospital

Studley Road

HEIDELBERG VIC 3084

<http://www.austin.org.au/Content.aspx?topicID=397>

and

The Royal Children's Hospital

Flemington Road

PARKVILLE VIC 3052

Queensland Liver Transplant Service

Princess Alexandra Hospital

Ipswich Road

WOOLLOONGABBA QLD 4102

and

The 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/

WA Liver Transplantation Service

Sir Charles Gardiner Hospital

Verdun Street

NEDLANDS WA 6009

New Zealand Liver Transplant Unit

Auckland City Hospital

Park Road

Auckland

New Zealand

[Http://www.nzliver.org/](http://www.nzliver.org/)

Appendix II

ANZLTR PRIMARY Diagnosis Metabolic disorders by Age Group

Primary Diagnosis	Age group		Total
	Child	Adult	
-1 Antitrypsin deficiency	30	42	72
Crigler-Najjar	4	1	5
Familial amyloid polyneuropathy	0	28	28
Glycogen storage disease	0	1	1
Haemochromatosis	2	23	25
Homozygous Hypercholesterolemia	3	1	4
Indian childhood cirrhosis	1	0	1
Other *	7	0	7
Primary hyperoxaluria	5	6	11
Tyrosinemia	4	0	4
Urea cycle disorders **	8	3	11
Wilsos disease	7	26	33
Total	71	131	202

* Bile acid synthesis disorder, Protein C deficiency, methylmalonic acidemia, familial immunodeficiency, mitochondrial disease

** OTC deficiency 6; citrullinemia 3; argininosuccinic aciduria 2

Appendix III

ANZLTR PRIMARY Diagnosis - Other by Age Group

Primary Diagnosis	Age group		Total
	Child	Adult	
Alagille syndrome	22	1	23
Alagille non-syndromic	2	0	2
Benign liver tumour -Adenomatosis	0	2	2
Benign liver tumour-Hemangioma	0	2	2
Caroli's disease	1	12	13
Choledocal cyst	1	2	3
Cholestatic disease-Other	1	3	4
Chronic Budd Chiari	1	28	29
Congenital biliary fibrosis	1	1	2
Ductopenia	1	3	4
Granulomatous hepatitis / sarcoidosis	0	4	4
Histiocytosis X	4	0	4
Liver Trauma	0	1	1
Neonatal hepatitis	4	0	4
Nodular regenerative hyperplasia	0	5	5
Non alcoholic fatty liver (NAFLD or NASH)	0	33	33
Polycystic Liver disease	0	11	11
Polycystic liver and kidney disease	0	7	7
Progressive familial intrahepatic cholestasis(PFIC)	13	4	17
Secondary biliary cirrhosis	1	9	10
Secondary biliary cirrhosis - Hepatolithiasis	0	4	4
Secondary biliary cirrhosis - Cystic fibrosis	7	11	18
Other -specify #	3	15	18
Total	62	158	220

Vanishing bile duct syndrome
Haemangiotelangiectasia
Veno-occlusive disease
Chronic Active Hepatitis A
Non-cirrhotic portal hypertension
Kassabach-Merritt syndrome
Arterial-venous malformation
Hereditary haemorrhagic telangiectasia / OWRD.

Appendix IV

ANZLTR PRIMARY Diagnosis Fulminant Hepatic Failure by Age Group

Primary Diagnosis	Age group		Total
	Children	Adult	
Acute - Budd Chiari	0	2	2
Acute - Wilson's	4	11	15
Acute - -1 -AAT	2	0	2
Acute Autoimmune hepatitis	0	6	6
Acute Unknown / unspecified	34	62	96
Acute -Paracetamol	0	11	11
Acute -Other drugs	2	14	16
Acute Herbs / mushrooms	0	4	4
Acute - Hepatitis A	0	2	2
Acute - Hepatitis B	0	39	39
Acute - NonA-NonB	4	12	16
Acute - Hepatitis E	0	1	1
Acute - Post liver resection	1	1	2
Subacute - Budd Chiari	0	1	1
Subacute - Wilson's	2	2	4
Subacute Autoimmune hepatitis	0	6	6
Subacute - Drug	0	5	5
Subacute - Unknown / unspecified	3	27	30
Subacute - Hepatitis A	0	2	2
Subacute - Hepatitis B	0	9	9
Total	52	217	269

Appendix V

ANZLTR Causes of Patient death

<u>Graft failure - other</u>		
Vascular thrombosis		19
Hepatic artery	11	
Portal vein	7	
Hepatic vein	1	
Non thrombotic infarction		3
Primary non function		19
Massive haemorrhagic necrosis		4
Recurrent disease (ALD, PSC, CAH:AI)		6
De novo Hep C		2
Biliary Complications		11
Other (PNC, immune hepatitis, outflow obstruction)		9
<u>Miscellaneous</u>		
Multiorgan failure		20
Renal Failure		15
Graft vs Host disease		5
Social (accident, suicide, non-compliance, Rx withdrawn)		11
Sudden death (cause unknown)		15
Other (Hyperkalaemia, motor neurone disease diabetes complications, drug reaction, progression FAP)		7