

# Doppler-ultrasound of vascular complications after pediatric liver transplantation: incidence, time of detection and positive predictive value

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# Disclosures

No conflicts of interest to declare



Doppler ultrasound (DUS) for peri- and postoperative detection of vascular complications in pediatric liver transplantation (LT):

- Timing of DUS varies among LT centers
  - Daily postoperative DUS is advised, but more evidence is needed
  - Perioperative DUS is advised, but effectiveness is unclear
- Distinction is made between early (<2 weeks) and late complications, more exact incidences may be helpful

Primary aim:

- To assess the moment of first detection of vascular complications with DUS

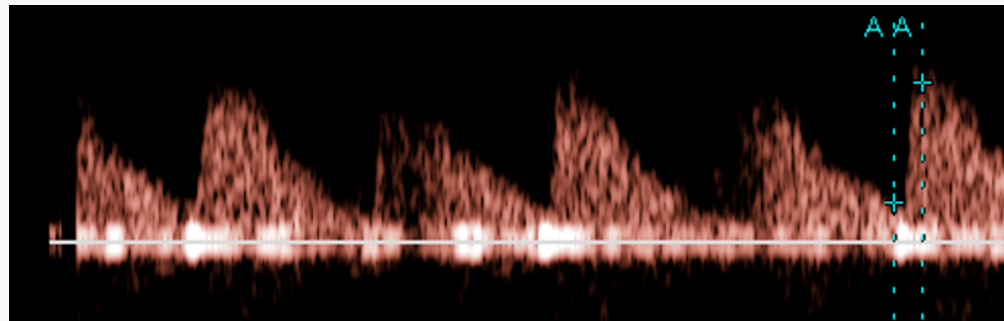
Secondary aim:

- To determine the positive predictive value (PPV) of DUS

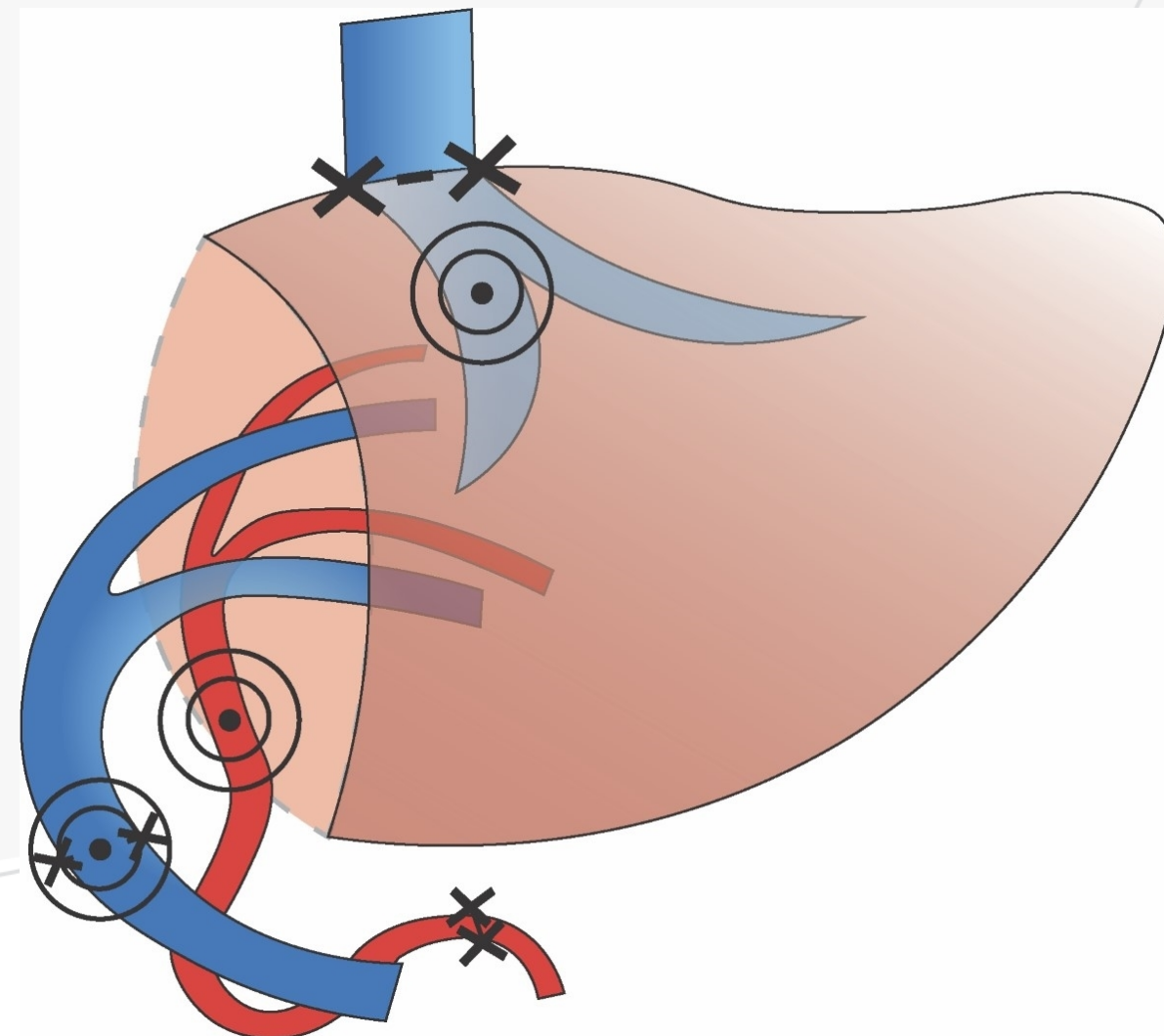
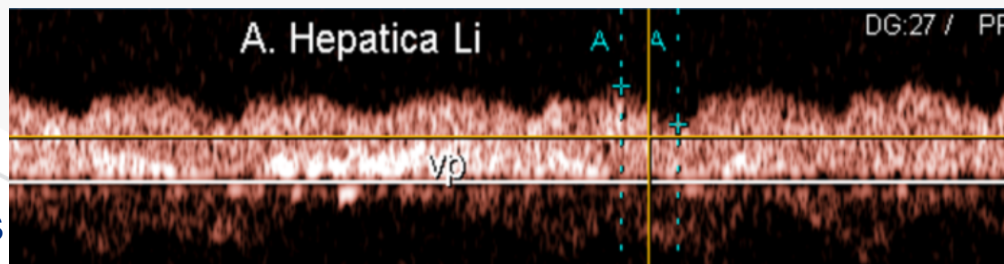
Vascular complications:

- Thrombosis
- Stenosis/kinking
- Extrinsic compression (e.g. fluid collection)

normal



stenosis



## Purpose

## Introduction

## Methods

## Results

## Conclusions

### Design:

- Retrospective cohort study

### Inclusion:

- Patients <18 years, between 2015 and 2019
- Primary and repeat LT
- 1 year clinical follow-up after LT

### Exclusion:

- No DUS

### DUS protocol:

- Day 0: intraoperative and immediately postoperative
- Day 1-7
- Month 1, 3, 12

### DUS technique:

- Hepatic artery:
  - Peak systolic velocity (PSV)
    - >200cm/s as abnormal
  - Resistive index (RI) and spectral waveform
    - Tardus parvus
- Portal vein:
  - PSV >125cm/s
  - Pre- to anastomotic ratio  $\geq 4$
- Hepatic vein(s):
  - Monophasic

Multiple vascular complications per patient allowed

### Reference standard:

- Surgery, angiography, CT

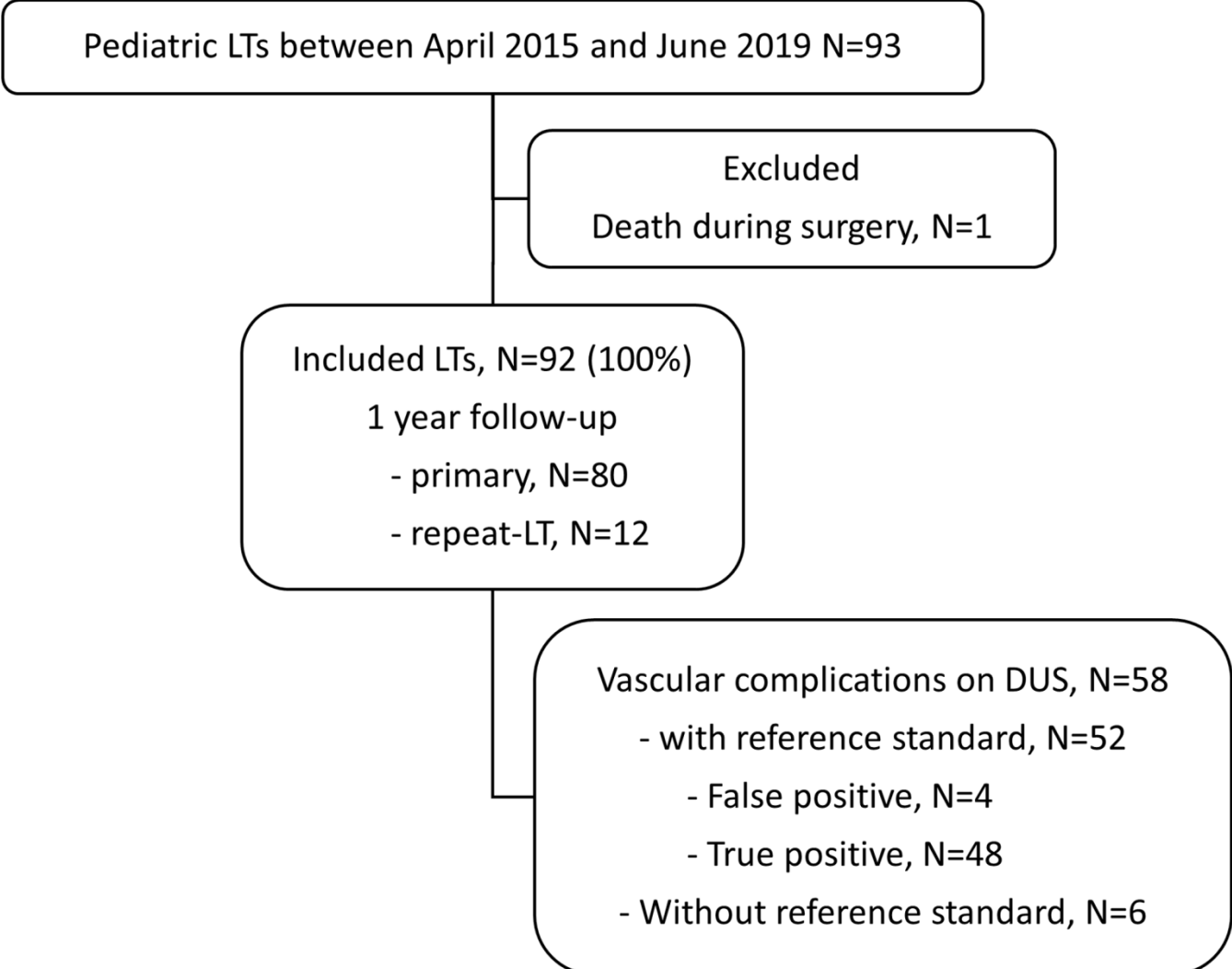
# Purpose

# Introduction

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<b>Number of LTs</b>	92 LTs in 83 patients
<b>Age at LT (years), median (inter quartiel range)</b>	3.9 (0.7-10.5)
<b>Gender, male, N (%)</b>	53 (57.6%)
<b>Cirrhotic disease, N (%)</b>	76 (82.6%)
<b>Full size</b>	24 (26.1%)
<b>Deceased donor</b>	24 (100%)
<b>Split liver</b>	68 (73.9%)
<b>Living donor</b>	33 (48.5%)
<b>Deceased donor</b>	35 (51.5%)

True positive (TP) and false positive (FP) cases						
			Perioperative	Day 1-7	Day 8-365	Total
<b>Hepatic artery</b>						
	Thrombotic	TP	2	2	1	5
		FP		1		1
	Kinked	TP	4	4		8
	Extrinsic compression	TP		2		2
	Significant stenosis	TP	1	2		3
	Total		7	11	1	19
<b>Portal vein</b>						
	Thrombotic	TP	5	5	1	11
	Kinked	TP		2		2
	Significant stenosis	TP		4	6	10
		FP	2	1		3
	Total		7	12	7	26
<b>Hepatic vein</b>						
	Thrombotic	TP	1			1
	Extrinsic compression	TP		2		2
	Significant stenosis	TP		4		4
	Total		1	6		7
<b>Total</b>			<b>15 (28.8%)</b>	<b>29 (55.8%)</b>	<b>8 (15.4%)</b>	<b>52 (100%)</b>



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Total		7	12	7	26
<b>Hepatic vein</b>					
Thrombotic	TP	1			1
	TP		2		2
	TP		4		4
Total		1	6		7
<b>Total</b>		15 (28.8%)	29 (55.8%)	8 (15.4%)	52 (100%)

PPV 97.7% (18/19)

PPV 88.5% (23/26)

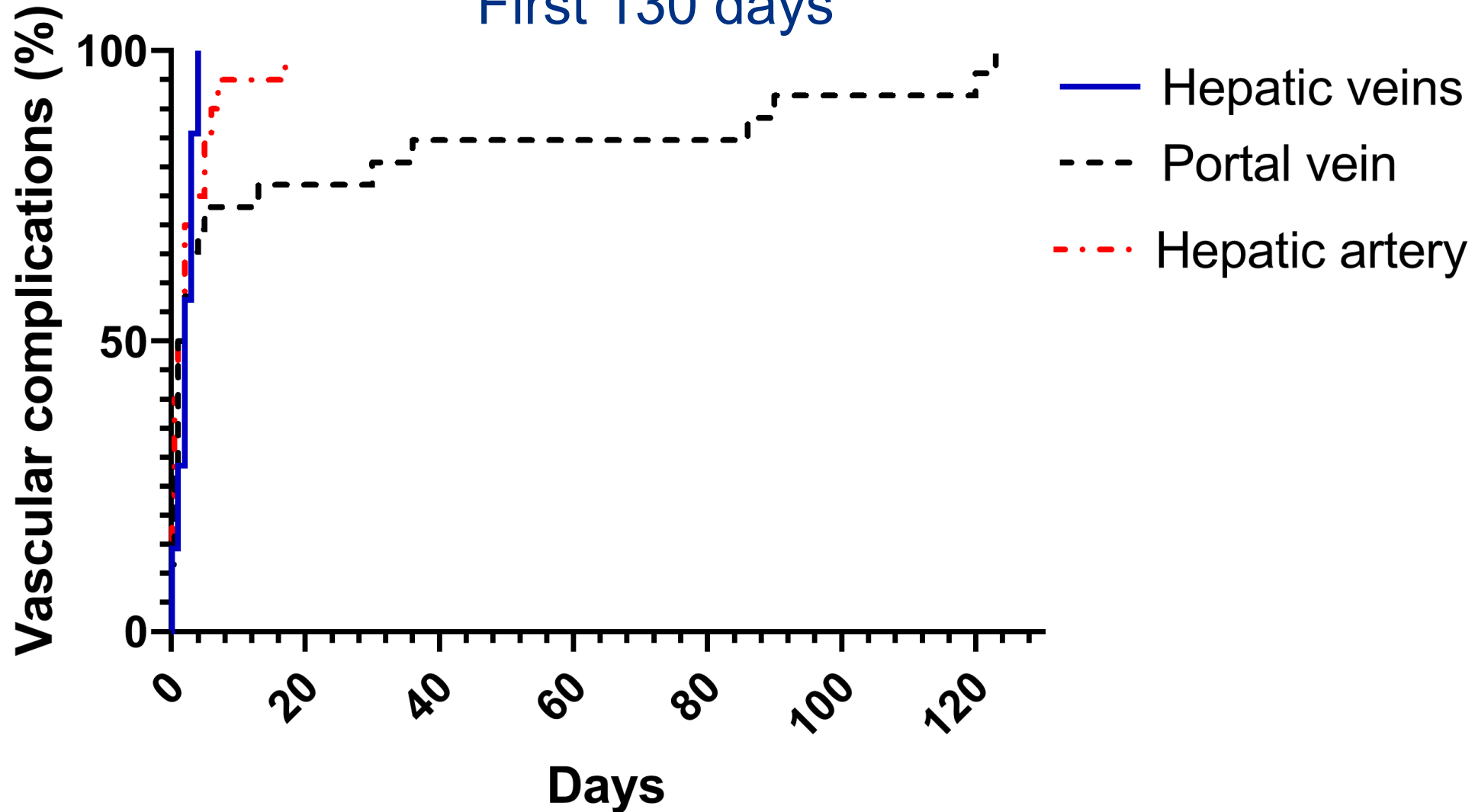
PPV 100% (7/7)

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### First 130 days



- The vast majority of vascular complications after LT are diagnosed by DUS peri-operatively or during the first postoperative week
- DUS has a high PPV for vascular complications after LT (88.5-100%)
- These findings:
  - Provide improved insight in incidence and detection of vascular complication by DUS
  - Support an intense DUS imaging protocol

Thank you for your attention

Any questions?

