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# Influencing functional outcomes: a look at role performance and satisfaction with life following liver transplant [Abstract]

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#### Abstract:

Abstract 572 The success of orthotopic liver transplantation (OLT), originally measured as survival, now extends to quality of the life saved. Return to work (RTW) is also a desired outcome. Our AIM was to explore the relationship between 5 pre-OLT factors & 5 post-OLT quality of life (QOL) domains with life satisfaction and primary productive role to better understand how to improve both. METHODS: Patients (pts)1-3 yrs post-OLT filled QOL form during followup clinic visits between 7/04 to 6/05. The Liver transplantation Database-Quality of life (LTD-QOL) form yielded data on 5 domains: measure of disease (MOD), psychological distress/well-being (PDW), personal function (PF), social/role function (SRF) & general health perception (GHP). Results: 229 pts were first categorized as satisfied overall with life (79%), or dissatisfied, and then assigned to groups based on primary productive role (51%), no primary productive role, or retired. Pre-OLT variables were age, gender, marital status, education, & etiology of liver disease; HCV (33%), alcohol liver disease (ALD)(11%), HCV+ALD (10%), & others (46%). Marital status & age were not significantly related to the outcome variables. Etiology of liver disease, education, and time since OLT and 5 post-OLT QOL domains were significantly associated with both outcome variables; satisfaction and primary productive role (p<.0001).To

understand the differences, the 5 physical & men-tal QOL domains were regressed on primary productive role and satisfaction. Pts (mean age 54 yrs (19-74 yrs), males, 70%) fell into the category of primary productive role rates (51%). Pts transplanted for ALD were significantly (p<.05) more likely to be satisfied with life, whereas individuals with HCV±ALD, had lowest satisfaction and were most likely to be unable/uninterested in work. Stepwise logistical regression analysis of satisfaction demonstrated that GHP and SRF correlated most highly. Although satisfaction was significant in bivariate analysis, regression analysis of the influence of domains of QOL, as well as employment, demonstrated that SRF & GHP correlated most highly with life satisfaction. CONCLUSIONS: SRF and GHP correlate with good QOL post OLT. HCV patients have low levels of satisfaction whereas the highest level of satisfaction is in the ALD group. Further studies should address methods to improve satisfaction in those with HCV.

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