

Books Conferences News About Us Home Journals Jobs Home > Journal > Medicine & Healthcare > OJOTS **OJOTS Subscription** Indexing View Papers Aims & Scope Editorial Board Guideline Article Processing Charges Most popular papers in OJOTS OJOTS> Vol.2 No.4, November 2012 About OJOTS News OPEN ACCESS Frequently Asked Questions Gastric Volvulus Complicates the Hepatectomy for Living Donor Liver Transplantation Recommend to Peers PDF (Size: 27KB) PP. 19-20 DOI: 10.4236/ojots.2012.24005 Recommend to Library Reinaldo Fernandes, Marcelo Enne, Klaus Steinbruck, José Manoel Martinho, Rafael Vasconcelos, Gustavo Contact Us Stoduto, Lúcio Filgueiras Pacheco-Moreira **ABSTRACT** Downloads: 3,732 Donor safety is the major concern in living donor liver transplantation (LDLT), and a constant aware of postoperative morbidity should be emphasized. Between March 2002 and May 2011 we performed 435 liver Visits: 24,992 transplantations at an our center, one hundred forty eight with living donors. Among them left lobectomy or left lateral resections were conducted in 68 cases. Symptoms of gastric obstruction were recognized in 3 out of 68 patients that underwent left lateral resection (4.4%). The patients were readmitted because of Sponsors >>

KEYWORDS

symptoms.

Living Donors; Hepatectomy; Postoperative Complications; Liver Transplantation; Gastric Volvulus

Cite this paper

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severe symptoms of vomiting and abdominal pain. An upper endoscopy was performed and revealed pyloroantral obstruction due to gastric volvulus (GV). Endoscopic therapy correction was successfully performed in all patients. Reviewing the literature, one article has reported GV in 13 out of 115 donors (11.3%), all patients were submitted to a left resection. The mechanisms underlying this complication, in LDLT scenario, have not been fully elucidated. Nevertheless, clinicians should be aware of this possible association, which could make the diagnosis of GV more likely if a living donor comes back with typical

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