The Istituto Mediterraneo per i Trapianti e Terapie ad Alta Specializzazione (ISMETT) is a hospital completely dedicated to organ transplantation and highly specialized therapies for end-stage organ failure. ISMETT is the result of an international partnership between the Region of Sicily and the University of Pittsburgh Medical Center (UPMC), and is an example of innovative and efficient health care management. The American medical center, a leader in the field of transplantation, has transferred its experience and professionalism gained within hospitals, research centers, and international universities. The clinical and administrative activity of ISMETT is totally managed by the U.S. partner. Physicians are an integral part of UPMC staff and work at ISMETT to provide the most appropriate therapies, with the support of advanced diagnostic services. ISMETT is a center of excellence in the field of transplantation, and the site of important research projects aimed at providing patients with the most advanced therapies and appropriate response to end-stage vital organ failure. ISMETT is the first hospital in southern Italy to receive Joint Commission International (JCI) accreditation, one of the most advanced quality accreditation systems for health care facilities. The accreditation confirms the excellence of ISMETT in the care and safety of patients, and its dedication to improving clinical performance, management, and training programs, which involve hundreds of nurses, physicians, technicians, and administrative staff every year.

Clinical activity

ISMETT’s activity is focused on the treatment of patients with complex diseases that have damaged their vital organs. The treatment of end-stage organ failure has undergone radical changes with the new transplant programs, which are a valid therapeutic option for otherwise irreversible cases. Currently, ISMETT offers all solid organ transplant programs: liver, kidney, heart, lung, and pancreas. However, transplantation is not the only answer to end-stage organ failure. A certain number of these cases can be successfully treated with medical therapies, surgeries, radiology or endoscopy procedures. ISMETT’s competences are available also for patients who do not need transplantation, but suffer from complex diseases.

For further information on the living-related liver transplant contact:

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REGNO ITALIANO ISMETT - 2019
The advantages

Living donor liver transplants

LIVER TRANSPLANTATION:
The liver transplant program was started on July 31, 1999. As of December 31, 2013, ISMETT had performed 864 liver transplants, an average of 60 per year.

Living donor liver transplantation is available for adult and pediatric patients.

What is living-related transplantation?

The living-related liver transplant is a surgical procedure by which a healthy person, usually a consanguineous, or non-consanguineous family member, donates part of his or her liver to a patient with chronic liver disease.

Why is it proposed?

Living donor liver transplants

At ISMETT, a living donor liver transplant program is available for adult and pediatric patients.

In order to protect the health of those donating a part of their liver, and optimize the results in the recipient, ISMETT has developed strict selection criteria for the donor, who must be an individual of legal age that undergoes the surgical procedure for purely selfless purposes. In addition to simple clinical and instrumental evaluation, the motivation to donate must be evaluated. No financial interests or psychological pressures can exist at the basis of the decision to donate. For this reason many patients cannot receive a transplant in time. In order to solve this problem, living-related liver transplantation was implemented to allow the procurement of part of the liver from a living donor, and transplant it in the ill patient. This is possible because the liver is capable of regenerating even when a portion is removed (in the donor), and grow again until reaching normal size after being transplanted (in the recipient).

The advantages

Live liver donation provides patients waiting for a liver transplant with many advantages over deceased organ donations. These include:

- Reduced waiting time: the length of time it takes for an organ to become available is significantly reduced when the organ is transplanted all patients in need. For this reason many patients cannot receive a transplant in time. In order to solve this problem, living-related liver transplantation was implemented to allow the procurement of part of the liver from a living donor, and transplant it in the ill patient. This is possible because the liver is capable of regenerating even when a portion is removed (in the donor), and grow again until reaching normal size after being transplanted (in the recipient).

The procedure

Donor surgery

The donor undergoes a surgical procedure called right hepatectomy. Surgeons make an incision in the abdomen long enough to allow the localization and safe resection of a portion of the liver, 60% of the whole organ. During the surgery, appropriate compression systems are employed to maintain blood flow in the legs and prevent clots. Drainage tubes will be inserted in the operating room to remove fluids and facilitate healing. This procedure lasts from 6 to 12 hours.

Donor’s post-operative course

After the surgery, the donor is admitted to the ICU, to be carefully monitored. Hospital length of stay depends on the recovery and on when physicians decide to discharge the patient, which is generally 7-10 days after the procedure. The healing process continues after discharge, and the donor can resume regular daily activities, including driving, after approximately 4-6 weeks. In cases of post-operative complications, a longer convalescence may be necessary. During convalescence, a medical team will continually assess the donor’s health conditions with medical check-ups, laboratory and radiology tests to monitor the condition of the donor’s liver.

Risks of donation

Any surgical procedure implies risks, especially when performed under general anesthesia. For this type of donation, the risk of mild or severe complications is approximately 30%. Most are minor complications and resolve spontaneously. Rarely, complications are very severe and require further surgeries or medical procedures.

Even if deaths of liver donors have been reported in international literature, the risk of death associated with living-related liver donation is very low (worldwide is estimated at approximately 0.5%) As of December 31, 2013, ISMETT had performed 108 living-related liver transplants. No donor has died following the procedure, and complications have been managed with appropriate treatments.

Clinical Results for the Recipient

In terms of recipient survival, ISMETT’s results are among the best among the international transplant centers, with 85.6% survival rate one year after the transplant procedure, and 76.8% after five years.

Donor evaluation process

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