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Letters to the editor

Reply to: Platelets level variability during the first year after liver transplantation in the risk prediction model for recipients mortality

To the Editor,

We are writing in response to the comments to our article "Platelets level variability during the first year after liver transplantation in the risk prediction model for recipients mortality" [1].

All liver transplant recipients in our center are very carefully followed after discharge in the outpatient department. We plan ambulatory visits every two weeks during the first three months, every four weeks up to 1 year, then every three months in subsequent years after transplantation. The patients are admitted to the outpatient department before 7.00 and 9.00 AM, and fasting blood samples are taken before the morning immunosuppression dose. In our analysis, we used only the values of hematological and biochemical parameters taken during this scheduled patient's visits.

We agree with the comment that the prognosis of patients after liver transplantation is related to a series of factors, not just only hematologic and biochemical parameters. On the other hand, all score systems are based on relatively simple and sparse variables. In our analysis, we search for a correlation of patients' survival with relatively simple parameters, which are measured routinely during outpatients visits. Models based on lymphocyte and platelets count and basic biochemical parameters have been reported as predictors of liver graft survival by other authors [2,3]. Moreover, we analyzed not only static values but also variability and trends of several parameters measured during the first year after transplantation. Experimental and clinical data suggest an important role for platelet-derived factors in the regeneration of the liver [4,5]. In our discussion, we only speculated that our observation could reflect the important role of variability and trend of platelets measures in the first year after transplantation on long-term transplant and patients' survival.

References

[1] Jarmulski W, Wieczorkowska A, Trzaska M, Hryniewiecka E, Pączek L, Ciszek M. Platelets level variability during the first year after liver transplantation in the risk prediction model for recipients mortality. Ann Hepatol 2020;19(4):417–21.
[2] Pamecha V, Mahansaria SS, Kumar S, Bharathy KG, Sasturkar SV, Sinha PK, et al. Association of thrombocytopenia with outcome following adult living donor liver transplantation. Transpl Int 2016;29:1126–35.
[3] Lesurtel M, Raptis DA, Melloul E, Schlegel A, Oberkofler C, El-Badry AM, et al. Low platelet counts after liver transplantation predict early posttransplant survival: the 60-5 criterion. Liver Transpl 2014;20:147–55.
[4] Starlinger P, Haegele S, Offensperger F, Oehlberger L, Pereyra D, Kral JB, et al. The profile of platelet a-granule released molecules affects postoperative liver regeneration. Hepatology 2016;63:1675–88.
[5] Kurokawa T, Zheng YW, Ohkohchi N. Novel functions of platelets in the liver. J Gastroenterol Hepatol 2016;31:745–51.

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