

Title	Clinical implications of serum autotoxin in regular follow up after pediatric living donor liver transplantation for biliary atresia
Author(s)	Ueno, Takehisa; Takase, Koki; Toyama, Chiyoshi et al.
Citation	Journal of Pediatric Surgery. 2022, 57, p. 1215-1220
Version Type	AM
URL	https://hdl.handle.net/11094/87646
rights	© 2022. This manuscript version is made available under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License.
Note	

Osaka University Knowledge Archive : OUKA

<https://ir.library.osaka-u.ac.jp/>

Osaka University

Table 1. Patient demographics:

Variables	n=52
Age, years	1.6 (0.5-18.7)
Gender, male/female	16/36
Interval from LDLT, years	7.7 (1.2-19.7)
AST, IU/L	28(14-74)
ALT, IU/L	20(8-92)
Serum albumin, g/dL	4.1(3.3-4.8)
Total bilirubin, mg/dL	0.6(0.2-3.2)
Prothrombin time, INR	1.1(1.0-1.4)
Platelets, 10 ⁴ /mm ³	17.8(5-45.1)
Autotaxin, mg/L	0.89(0.35-1.69)
Type IV collagen 7s, mg/L(n=48)	5.5(3.0-12.0)
Hyaluronic acid, ng/ml (n=48)	22(9-176)
FIB-4	0.43(0.07-1.19)
APRI	0.36(0.11-1.44)
PV Complications	
Normal	45(87%)
Thrombosis	2(4%)
Stenosis	5(9%)
Histological findings	
F0	4 (8%)
F1	36 (69%)
F2	12 (23%)

Table 1. Patient demographics: Interval from LDLT indicates duration between serum autotaxin measurement and living donor liver transplant. Data were expressed as median with ranges. Histological findings were based on METAVIR score. Type IV collagen 7s and hyaluronic acid in 4 patients were not measured. Therefore, analysis of these data was performed in 48 patients. APRI: the AST to Platelet Ratio Index; AST: aspartate

aminotransferase; ALT: alanine transaminase; FIB-4: Fibrosis-4