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Risk Factors for Postoperative Infections in Pediatric Liver Transplantation

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Bouchut and coinvestigators from Edouard Herriot Hospital, Lyon, France, retrospectively studied postoperative infectious complications following pediatric liver transplantation at a single university center. The objectives were to characterize the epidemiology of infection and to determine the associated risk factors during the early postoperative period,

either the first postoperative month or the entire duration of pediatric intensive care unit (PICU) stay.

Forty-eight liver transplants were performed on 46 patients. Sixty-three infections occurred in 32 patients who underwent 34 liver transplantations (1.36 infections/patient); 47 were bacterial, 6 fungal, and 10 viral. The most common sites of infection were bloodstream (36.5%) and abdomen (30%). Gram-positive bacteria (78%) predominated over gram-negative bacteria (22%). Initial analysis

revealed infection risk factors to be age <1 year, body weight <10 kg, extrahepatic biliary atresia, intraoperative transfusion >160 mL/kg-l, mechanical ventilation >8 days, and PICU stay >19 days.

After stratified analysis, the main risk factor for infection was low body weight of the recipient.

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