Factors Influencing Biliary Atresia Prognosis Following a Successful Kasai Portoenterostomy

Biliary atresia is a rare cause of obstructive jaundice affecting infants. and is surgically treated with a Kasai portoenterostomy (KPE)

Sometimes, however, KPE may fail, necessitating a liver transplant (LT)

A prospective cohort study of infants with KPE-operated BA

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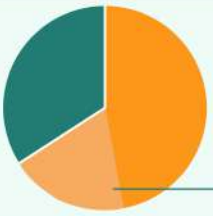
Aim: to determine the reasons for failure in the cohort where KPE was initially successful (bilirubin < 20 µmol/L after KPE)



67% of infants achieved clearance of jaundice after KPE

22% of these infants later underwent LT (Cohort A)

Post-operative observations in Cohort A

↑ Incidence of:

Early and recurrent cholangitis

Signs of portal hypertension

3-month observations in Cohort A significantly predicted the need for LT by 2 years

- Bilirubin
- Aspartate aminotransferase to platelet ratio index
- International normalized ratio

Ultrasound-defined ascites

Cholangitis is the main reason for failure in a "successful" KPE and should be treated aggressively with a prolonged course of antibiotic therapy

What Makes A "Successful" Kasai Portoenterostomy "Unsuccessful"?

Matcovici *et al.* (2022)

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