Complication

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Recipient

Korea

One recipient experienced minor pancreas juice leakage from graft pancreas but recovered with conservative treatment. Pancreas graft was well maintained for 42 months but a low dose of insulin (10 u/day) was required for keeping the normoglycemia.

There were no postoperative ABO-related or allograft rejection in both patients.

Japan

Postoperative complications in ABOi LDPT were similar to those in ABO compatible LDPT. AMR due to ABO incompatibility was not experienced in these six recipients. Although two patients (33.3%) showed a positive study in CMV antigenemia, the patients converted to negative after conservative therapy using ganciclovir. One patient (16.7%) developed post-transplant lymphoproliferative disorder (PTLD) and needed

chemotherapy using rituximab. One patient developed a chronic rejection of kidney graft. Despite steroids, the kidney graft loss occurred 35 months after transplantation. However, the pancreas graft remained stable and maintained insulin-free status.

Donor

Korea

There was no donor-related clinically significant complication except one minor pancreatic juice leakage developed and treated conservatively.

Japan

Although one donor developed minor leakage of pancreatic juice from the cut surface of residual pancreas, all donors were discharge from the hospital 7–21 days after the operation. In the 10 years follow-up, the development of diabetes and renal dysfunction has not been observed.

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