肝动脉变异与肝移植

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【摘要】目的 总结肝移植中供体及受体肝动脉变异情况与重建方式。方法 回顾我院 2002年3月～2005年12月107例肝移植供体与107例受体肝动脉变异情况及重建方式。术后应用 Doppler超声、胆道镜及介入方法监测肝动脉及胆道并发症的发生情况。结果 107例肝移植之供、受体肝动脉（214例肝动脉），3例中，术后死亡于多器官功能衰竭，有20例次肝动脉变异，经过术中良好的重建，其结果显示肝动脉及胆道并发症3例（3/19），较正常肝动脉吻合者（15/85）无显著性差异（P>0.05）。结论 肝动脉变异发生率约9.35%左右，肝移植时供肝切取、修整及受体肝切除应引起高度重视，术中良好的重建能取得好的效果。

【关键词】 肝动脉； 解剖变异； 肝移植
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Anatomical Variation of Hepatic Artery and Liver Transplantation

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Abstract: Objective To study the effects of anatomical variation of hepatic artery and their reconstruction methods on orthotopic liver transplantation. Method The variation of hepatic artery and approach of reconstruction were studied retrospectively on 107 donors and 107 recipients of orthotopic liver transplantation from March 2002 to December 2005. The complications of hepatic artery and biliary were assessed by Doppler ultrasound, endoscopy and interventional therapy after operations. Results 20 anatomical variations of hepatic artery were found during organ procurement and back-table in the 107 cases, which were reconstructed. No significant differences were found between the normal hepatic artery cases and the cases with hepatic arterial variations in terms of hepatic artery and biliary complications (P > 0.05). Conclusions The incidence of anatomical variation of hepatic artery was about 9.35 percent. Attention should be paid to the anatomical variation of hepatic artery during liver procurement and implantation. Satisfactory prognosis could be achieved provided that a well reconstruction of the hepatic artery should be done in these variation cases.

Key words: hepatic artery; anatomical variation; liver transplantation

肝移植已经成为治疗终末期肝病的重要手段，应用日益增多。由于我国大部分供体来源于尸体，为缩短器官缺血时间，要求快速切取器官，而肝动脉变异又比较常见1，所以正确辨认肝动脉变异，采取合理的切肝及修肝技术，并选用适宜的重建方式是手术成功的关键。我研究院（中南大学湘雅三医院、湘雅二医院）从2004年3月至2005年12月成功实施了107例肝移植（214例肝动脉），其中有20例次肝动脉变异经重建吻合，术后长期随访监测其肝动脉与胆道并发症，总结如下：

1 临床资料
1.1 一般资料
受者107例，男性73例，女性34例；平均年龄44 (18～53)岁。其中肝炎肝硬化41例，肝癌23例，原发