

PREVALENCE AND RISK FACTORS FOR RECURRENT PRIMARY BILIARY CHOLANGITIS AFTER LIVER TRANSPLANTATION: A SYSTEMATIC REVIEW AND META-ANALYSIS

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A meta-analysis of 5,715 liver transplant recipients with primary biliary cholangitis found a 15% recurrence rate, with younger age and tacrolimus use associated with higher risk while cyclosporine and ursodeoxycholic acid were protective.

KEY POINTS

- The pooled prevalence of recurrent primary biliary cholangitis after liver transplantation was 15% (95% CI: 12%-19%), with reported rates ranging from 0% to 50% across 55 studies
- Younger age at transplantation (HR = 0.97, 95% CI: 0.96-0.98) and tacrolimus-based maintenance immunosuppression (HR = 1.79, 95% CI: 1.09-2.95) were significant risk factors for recurrence
- Cyclosporine-based maintenance immunosuppression (HR = 0.50, 95% CI: 0.28-0.87) and post-transplant prophylactic ursodeoxycholic acid (HR = 0.42, 95% CI: 0.30-0.58) were associated with reduced recurrence risk
- Donor age, donor-recipient sex mismatch, cold ischemia time, initial immunosuppression regimens, maintenance azathioprine, and acute cellular rejection were not significantly associated with recurrence

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