TRANSJUGULAR LIVER BIOPSY: THE KEY TO A RARE DIAGNOSIS

Isabel Claro

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A 29-year-old man developed both hepatic sinusoidal obstruction syndrome and graft-versus-host disease following hematopoietic stem cell transplantation for acute myeloid leukemia, demonstrating the rare coexistence of these complications confirmed by transjugular liver biopsy.

KEY POINTS

- The patient presented with hyperbilirubinemia, ascites, and hepatomegaly on day +20 post-transplant, with ultrasound suggesting sinusoidal obstruction syndrome treated with defibrotide.
- Acute cutaneous, intestinal and hepatic graft-versus-host disease developed on day +44, treated with methylprednisolone.
- Transjugular liver biopsy on day +132 showed histological features of both probable graft-versus-host disease (canalicular cholestasis, bile duct injury, focal hepatocellular necrosis) and possible sinusoidal obstruction syndrome (centrilobular vein injury and necrosis).
- The patient died on day +195 despite treatment with mycophenolate mofetil.
- The case highlights the value of transjugular liver biopsy in patients with severe thrombocytopenia when cholestatic hepatitis etiology may be multifactorial.

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