gutflix
GI learning, personalised

Summary

FATAL HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS IN A POST-LIVER TRANSPLANT PATIENT: A CASE REPORT

Momna Warraich

UEG Week Berlin 2025 | Poster

Hepatobiliary

October 4, 2025

A 30-year-old female who underwent liver transplant for acute liver failure developed fatal hemophagocytic lymphohistiocytosis (HLH) on post-operative day 7, dying on day 16 from mucormycosis and septic shock despite treatment with high-dose steroids and etoposide.

KEY POINTS

- The patient presented with severe thrombocytopenia (8000/µL), neutropenia (858/µL), elevated LFTs (AST=473 IU/L, ALT=992 IU/L), ferritin of 2269 ng/mL, and positive CMV PCR on post-operative day 7, with bone marrow biopsy confirming hemophagocytosis.
- Treatment following HLH-2004 protocol with high-dose steroids and etoposide was initiated, but the patient's condition worsened, developing cutaneous mucormycosis that rapidly progressed to multi-organ failure and death on post-operative day 16.
- Only 41 post-liver transplant HLH cases have been reported in the literature, with only 5 initially diagnosed with acute liver failure, making this a rare and poorly documented complication.
- The speakers emphasize that HLH should be considered in post-transplant patients with unexplained cytopenias and hepatic dysfunction, as non-specific symptoms overlap with common post-transplant conditions, making diagnosis challenging and requiring heightened clinical vigilance.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/b02f5936-a814-11f0-b81c-0242ac140006

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.