Guidelines for Liver Transplantation and COVID-19 infection

These guidelines have been prepared by Liver Transplant Society of India (LTSI). In view of rapidly changing scenario of COVID-19 infection in India, these guidelines may be revised/updated accordingly.

Covid-19 is caused by the novel coronavirus named Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV2) that emerged in Hubei, Wuhan province of China in December 2019. It has now been declared as Global Pandemic. Immunocompromised patients are at a greater risk and there is an immediate need of guidelines for liver transplantation in India, both in deceased donor Liver Transplant (DDLT) and living donor Liver Transplant (LDLT) Centres. Also, health care transmissions of COVID-19 have occurred and given the potential for greater infectivity, strict isolation precautions should be followed for anyone with suspected SARS-CoV2.

<u>Guidelines for issues specific to Liver Transplant</u>

A. Status of doing Liver Transplant

- 1. Moratorium on all non-urgent transplants for 2 weeks
- 2. Acute liver failure (ALF) can be done as usual after medical therapy has failed.
- 3. Acute-on-Chronic Liver Failure (ACLF with organ failure- decision for transplantation should be based on individual's centre's discretion

B. Deceased donor Liver Transplant (DDLT)

- 1. Elective DDLT should be done only if donor is COVID-19 negative (both RT-PCR and Serologic test negative).
- C. Living donor liver transplant (LDLT) should be done for urgent cases after thoroughcounseling as LDLT imposes a risk on the healthy donor with hospital admission and contact risks

D. Testing for COVID-19

1. All donors (deceased and living) and recipients should be tested for COVID-19 (both tests) at the time of urgent transplant

E. Immunosuppression strategy

1. Standard immunosuppression should be followed. No evidence exists as of now to modify immunosupression due to COVID-19

F. Follow up post transplant

- 1. Patients should follow up with their respective centres as usual. All routine follow up visits to be done online via telemedicine
- 2. However, those patients with post-transplant emergencies should attendhospital as usual

G. Care of sick recipients on waitist

1. The management of recipients for various medical complications to be continued in the hospital, including ICU admissions

H. Prophylactic medications for COVID-19

1. At present, there is no recommendation for prophylactic medications or vaccinations for transplant patients

I. Advisory for transplant recipients for COVID-19

1. All transplant recipients should be sent an advisory from the respective transplant centre regarding various do's and don'ts for prevention of COVID-19 infection

J. Testing of Transplant Professionals

1. This should done selectively if there has been a positive case of COVID-19 in the concerned hospital