

## HCV antibody 양성, HCV RNA 음성 신이식환자에서 간 조직검사의 유용성

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### Usefulness of Liver Biopsy in HCV Antibody Positive and HCV RNA Negative Kidney Transplantation Recipient

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**Background:** Some guidelines recommend liver biopsy to all HCV antibody positive renal transplant recipients. However, the benefit of liver biopsy is unclear in HCV RNA negative KT recipients. We investigated usefulness of liver biopsy in Anti-HCV antibody positive and HCV RNA negative patients by analyzing the hepatic histological findings and clinical outcomes.

**Patients and methods:** A total of 30 HCV antibody positive patients underwent liver biopsy before kidney transplantation in the Asan Medical Center during January 1995 to December 2011 were reviewed. The patients were divided into two groups based on HCV RNA positivity; 17 patients were positive and 13 patients were negative. Hepatic histological findings, inflammation, and fibrosis were analyzed by using the METAVIR scoring system, and clinical outcomes including mortality, graft loss, progression of advanced liver disease of two groups were compared.

**Result:** Baseline characteristic, mean age, sex, mean duration of HCV infection, AST were not different between the two groups, but ALT was higher in HCV RNA (+) group than HCV RNA (-) group (24.6 vs 13.1,  $p=0.03$ ). Ultrasound of liver showed abnormal findings in three HCV RNA(+) patients (one: cirrhotic change, two: chronic parenchymal change). The mean activity and fibrosis score showed significant difference between HCV RNA (+) and (-) groups (Activity score: 1.11 vs 0.46,  $p=0.02$ , Fibrosis score: 1.05 vs 0.15,  $p=0.01$ , respectively). Four patients with fibrosis 2 received antiviral therapy and one patient with fibrosis 4 received liver and kidney co-transplantation of HCV RNA (+) group based on biopsy finding. Each two patients died of sepsis in HCV RNA (+) group and HCV RNA (-) group. The loss of graft was one patient in RNA (+) and RNA (-), respectively. Advanced liver disease presented three patients in the RNA (+) group.

**Conclusion:** There was no case of changing management by histological finding before KT or showing advanced liver disease after transplantation in HCV RNA (-) group. Therefore, we concluded that liver biopsy is not necessary in HCV RNA negative KT recipients.

**Key Words:** 간조직검사, C형 간염, 신장이식

Liver biopsy, HCV, Kidney transplantation