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Title: Hepatopulmonary syndrome in patients listed for liver transplantation

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Body: Introduction: The hepatopulmonary syndrome (HPS) is defined by the clinical triad consists of liver disease, pulmonary vascular dilatation and changes in arterial blood gases. Objectives: To describe the prevalence of the disease and the profile of patients with SHP liver transplant candidates; evaluate the presence of risk factors and analyze the variations of gas exchange and pulmonary function in patients with the syndrome. Methods: Patients listed for liver transplantation, the period from January 2004 to January 2010, who had echocardiography and arterial blood gas analysis. Results: The prevalence of HPS was 36.84% using a cutoff of alveolar-arterial gradient (PA-aO₂) ≥ 15mmHg (≥ 20 mm Hg if age > 64 years), as determined by Guideline Hepatopulmonares Vascular Diseases (PHD) published in 2004. Of the patients with MELD scores greater than 15, the HPS was present in 44.9%. Within the study sample, 100 patients had spirometry with measurement of diffusion of carbon monoxide (DLCO), 22.37% of patients had DLCO less than 60% predicted, these only 41.18% had a diagnosis of HPS. The PaO₂ proved statistically different. Conclusions: The prevalence in our sample was considerably higher than most publications, where the occurrence of the disease was around 13 to 18%, possibly due to the cutoff adequacy of alveolar-arterial gradient, as determined by Guideline Hepatopulmonares Vascular Diseases (PHD). The presence of older than 50 years and cirrhosis caused by hepatitis C virus were defined as statistically significant risk factors, respectively p <0.001 and p <0.05. The mean PaO₂ in patients with and without HPS was, respectively, 75.79% (± 14.92) and 93.27% (± 15.67%), with p <0.001.