

Answer Regarding Comment on: Risk Factors and Outcomes of the Post-Liver Transplantation Diabetes Mellitus

AUTHOR'S RESPONSE
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Dear Editor,

We would like to thank Topaloğlu et al¹ for their interest in our paper. After advancements in operative techniques and immunosuppressive regimens, liver transplantation (LTx) has increased, leading to some complications like new-onset diabetes mellitus after transplantation (NODAT).² This term is frequently described as post-transplantation diabetes mellitus (PTDM). Our study showed that the patients with higher pre-transplantation fasting blood glucose possessed a higher risk for diabetes mellitus (DM) after LTx, which was insignificant. However, we wanted to underline that fasting blood glucose should be measured, which tends to be one of the risk factors for developing PTDM. The definition of PTDM has been a topic of discussion for a long time. It is recommended that diagnostic criteria for PTDM be the same as those for DM in the general population.³ Our study evaluated only two patients with acute liver failure. These two patients had hemoglobin A1c (HbA1c) and random blood glucose levels recorded in the hospital database before the development of acute liver failure.


PTDM is expressed as DM diagnosed in the post-transplant period, regardless of the time of occurrence.⁴ American Diabetes Association recommends that PTDM be diagnosed after the patient is stable on maintenance immunosuppression and in the absence of acute infection.⁵ In our study, doses of immunosuppressive agents were tapered to maintenance level and stable when we evaluated the patients. The median follow-up time of the patients was 32 (9-240) months. As Topaloğlu et al¹ stated in their letter to the editor, in some studies, post-transplant DM was categorized as early-onset (≤ 1 year after transplantation), late-onset (> 1 year), or transient (diagnosis was made in the 1st year after transplantation, but recovered to normal glucose tolerance status). If we categorized our patients with 32 month follow-up period according to this classification, 7 patients were early-onset, 13 patients were diagnosed with late-onset DM, and none had transient DM.

Declaration of Interests: The authors declare that they have no competing interest.

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