



SKIN CANCER (OTHER THAN MELANOMA)

COMPARISON OF SKIN CANCERS IN LIVER AND RENAL TRANSPLANT RECIPIENTS: RESULTS OF A PROSPECTIVE, AUSTRALIAN TERTIARY REFERRAL CENTRE STUDY.

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Introduction: Cutaneous malignancies are the most common cancer in organ transplant recipients (OTR) and are often more aggressive. International guidelines suggest that OTR be reviewed in a specialist transplant clinic. In 2011 we established a dedicated dermatology clinic for liver transplant recipients (LTR) and renal transplant recipients (RTR).

Objective: Skin cancers in RTR have been widely studied; there are fewer studies in LTR. Of those, LTR have been reported to develop fewer skin cancers than RTR due to lower immunosuppression. We conducted a prospective study to compare the risk of skin cancers in LTR and RTR in our Australian centre.

Materials and Methods: RTR and LTR were reviewed in a single Australian tertiary referral centre over 60 months. Initial and subsequent visit data were recorded in a transplant database. Patients with a minimum of 11 months follow up were included.

Results: Altogether 142 RTR and 88 LTR were included in the analysis. Compared with RTR, the median age of LTR was higher (64 vs 57 years), there were more men (73 vs 60%), higher rates of high-risk skin types (54 vs 33%) and heavy sun exposure (43 vs 30%). RTR developed 304 keratinocyte skin cancers (KSC) with squamous cell carcinoma (SCC): basal cell carcinoma (BCC) ratio of 1.7:1. LTR developed 205 KSC with SCC:BCC ratio of 1.6:1. The odds ratio of developing KSC in LTR:RTR was 1.8:1 (95% CI: 1.02–3.11, $P = 0.044$) on univariate analysis but there was no difference on multivariate analysis. A previous history of KSC, age, time from transplant, skin phenotype and previous sun exposure were significant risk factors for developing KSC.

Conclusions: In our centre, LTR were not at lower risk of KSC than RTR. Our study supports routine and regular post-transplant skin surveillance of all LTR, as with all other OTR.

