**EFFECTS OF EVEROLIMUS CONVERSION ON REJECTION RATES IN LIVER TRANSPLANT PATIENTS**

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 Everolimus is a mammalian target of rapamycin inhibitor that has shown promise as an alternative agent to maintain immunosuppression in patients who have undergone liver transplantation. Traditional immunosuppression regimens include calcineurin inhibitors (CNIs), which are associated with nephrotoxicity and can lead to renal failure. Multiple studies have examined the conversion from a CNI-based regimen to an everolimus-based regimen, demonstrating significantly improved renal function in liver transplant recipients who are converted to an everolimus-based regimen. This regimen, however, has also been associated with an increased risk of acute rejection. Literature is lacking in regards to the ideal timing of conversion to everolimus therapy and inconsistent in how this transition occurs.

 The purpose of this study is to evaluate the incidence of biopsy-proven acute rejection in liver transplant recipients converted to an everolimus-based regimen compared to those who remain on a CNI-based regimen in the real-world setting. Secondary outcomes include change in renal function, patient/graft survival, and timing and conversion methods used.

 This retrospective chart review includes all adult patients who received a liver transplant between January 1, 2013 and May 31, 2018. Patients will be separated into two groups based upon their maintenance immunosuppression. Descriptive statistics, chi-squared tests, and student’s t-tests will be used to analyze the data as indicated.

 The results of this study will provide real-world data regarding rejection risk for everolimus-based immunosuppression in the liver transplant population and give insight into our conversion methods in order to optimize the timing and practice of transitioning immunosuppression.

**Learning Objectives:**

* Assess the risk of biopsy-proven acute rejection among liver transplant recipients maintained on an everolimus-based immunosuppression regimen
* Identify everolimus conversion practices and analyze trends in immunosuppression management of liver transplant patients at a large academic medical center