

CURRICULUM VITAE**Luca Aldrighetti, MD, PhD****I. PERSONAL INFORMATION**

Date of Birth: 25/05/1963

Place of Birth: Milan, Italy

Citizenship: Italian

Home address and telephone:

Professional address and telephone:

Department of Surgery – Hepatobiliary Surgery Division,
Scientific Institute San Raffaele,
Via Olgettina 60, 20132, Milan, Italy.

II. CURRENT POSITION

Chief of Hepatobiliary Surgery Division, Department of Surgery, Scientific Institute
San Raffaele, University Vita-Salute San Raffaele, Milan, Italy.

III. EDUCATION

1982-1989 University of Milan, Medical School, Milan, Italy.

April 1989 Medical Doctor (M.D) with honours, University of Milan, Medical School, Milan

November 1995 Philosophiae Doctor (Ph.D.) in Surgical Technologies, University of Milan,
Medical School, Milan

IV. MEDICAL LICENCE, CERTIFICATION, SPECIALITIES

1989 Italian Medical Licence, Italian Ministry of Health, Italy

1997 Speciality in General Surgery, University of Milan, Italy

2002 Speciality in Thoracic Surgery, Vita-Salute San Raffaele University, Milan, Italy

V. PREVIOUS PROFESSIONAL POSITIONS AND APPOINTMENTS

- 1989-1992/1995-1997 Residency in General Surgery, University of Milan, Medical School, Scientific Institute San Raffaele, Milan, Italy.
- 1993-1994 Surgical Fellowship, Pittsburgh Transplantation Institute, Pittsburgh, Pa, USA
- 1997-2002 Residency in Thoracic Surgery, Scientific Institute San Raffaele, University Vita-Salute San Raffaele, Milan, Italy.
- 1997-2004 Staff Surgeon, First Division of General Surgery, Scientific Institute San Raffaele, University Vita-Salute San Raffaele, Milan, Italy.
- 2004-present Chief of Hepatobiliary Surgery Division, Department of Surgery, Scientific Institute San Raffaele, University Vita-Salute San Raffaele, Milan, Italy.

VI. SURGICAL and CLINICAL PRACTICE

- Hepatobiliary and Pancreatic Surgery
- Laparoscopic Liver Surgery
- Gastrointestinal Surgery
- Colorectal Surgery
- General Surgery Procedures
- Perioperative care of patients undergoing HPB Surgery
- Surgical care of patient with chronic liver failure
- Abdominal organs transplantation (Liver, Pancreas, Kidney)
- Vascular Accesses

VII. RESEARCH INTERESTS AND MAIN CLINICAL TRIALS

Biology of Liver Surgery

- Pathophysiology and modulation of hepatic ischemia/reperfusion injury
- Stress/Systemic reactions to surgery and Coagulation Homeostasis
- Mediators of portal hypertension and postoperative liver failure (i.e. Endothelin)
- Use of corticosteroids and their protective role in liver surgery
- Small-for-size syndrome in liver resections
- Cytokine profile in laparoscopic liver resections

Techniques in Liver Surgery

- Techniques for parenchimal transection in liver surgery
- Advances in laparoscopic liver surgery (i.e. new devices, LESS)
- Robotic Surgery

- Development of prognostic score systems in liver surgery (i.e. blood transfusions, postoperative liver failure)
- ERAS (Enhanced Recovery After Surgery) program in liver surgery

Hepatobiliary Surgical Oncology

- Liver metastases from colorectal cancer:
 - Neoadjuvant chemotherapy and liver resection
 - Hepatic arterial infusion chemotherapy
 - Prognostic factors and outcomes
 - Synchronous liver metastases
- Primitive liver tumors (Cholangiocarcinoma / Hepatocellular Carcinoma)
 - Prognostic factors and outcomes

Liver Transplantation

- Donor selection criteria and risk factors for failure and retransplantation
- TIPS and liver transplantation
- Artificial Neural Network for HCC screening in liver transplantation

Human Pancreatic Islets Transplantation

Inv-NKT in Cirrhosis and Liver Tumors

Flagship clinical programs

Laparoscopic liver resections

The laparoscopic approach to liver surgery has been recently introduced into clinical practice and has not yet reached the diffusion and standardization of other areas of general surgery due to its specific characteristics (technical difficulties in mobilization and transection of the liver, intraoperative bleeding complications). Nevertheless, a recent Consensus Conference held in Southampton in 2017 (Abu Hilal, Aldrighetti et al, Ann Surg, 2017) affirmed the advantages of laparoscopic surgery compared to open surgery in terms of intraoperative blood loss, postoperative hospitalization, overall morbidity. Initial studies also suggest its cost effectiveness (Abu Hilal, Surg Endoscopy, 2013).

In this context, the OSR Hepatobiliary Surgery unit plays an important role in national and international settings.

The elements that characterize this leadership include:

1. Surgical series, currently including 936 laparoscopic liver resections: it constitutes the widest Italian series and it is among the largest series worldwide
2. Development of an original liver transection technique (Aldrighetti et al, The American Journal of Surgery 2008; 195: 270–272), and first application to liver resection of a technique to further develop minimally invasiveness (single port technique) (Aldrighetti et al, Surg Endoscopy 2012; 26: 2016-2022).

3. Development of the first prospective comparative clinical trials showing the advantage of the laparoscopic approach in terms of postoperative pain and length of stay (Aldrighetti et al, J Gastrointest Surg 2008; 12: 457-462);
4. First systematic review showing the advantages of the laparoscopic approach (Aldrighetti, Nature Clin Pract Gastroenterol Hepatol. 2008; 5:648-654)
5. Inclusion of the institutional series in the first world systematic review (Nguyen, Ann Surg, 2008);
6. Production of scientific papers (period 2008-2010) which were subsequently selected and used for international meta-analyses which demonstrated general advantages of the laparoscopic approach (Mirnezami, HPB, 2013) and specific advantages for HCC surgery (Zhou, Dig Dis Sci, 2013).
7. Scientific productio (2015-2017) demonstrating the feasibility and safety of laparoscopic approac even in settings of high technical complexity, including major liver resections (Ratti, Updates Surg 2015), surgery of intrahepatic cholangiocarcinoma (Ratti, Surg Endosc 2015), postero-superior segments (Scuderi, Br J Surg 2017) and resections in patients with impaired liver function (Cipriani, Surg Endosc 2017).
8. Dr. Aldrighetti was the coordinator and analysed data of the first National Survey regarding minimally invasive liver surgery (2012) which collected data from 1497 procedures performed in 39 italian centers.
9. Dr. Aldrighetti was a member of the expert panel during the 2nd International Consensus Conference on Laparoscopic Liver Surgery, held Morioka, Japan in 2014 (Wakabayashi G et al. Recommendations for laparoscopic liver resection: a report from the second international consensus conference held in Morioka. Ann Surg 2015) and during the 1st European Guidelines Meeting on Laparoscopic Liver Surgery, held in Southampton, UK in 2017 (Guidelines published in Ann Surg, 2017) – in particular he was the team leader of the group analysing the topic of technical aspect in laparoscopic major hepatectomies.
10. Dr Aldrighetti is the coordinator of the Italian Registry of the Italian Group of Minimally Invasive Liver surgery (I Go MILS) and of the Italian School of Minimally invasive liver surgery.

Perihilar tumors

Diagnosis and treatment of perihilar cholangiocarcinoma require a multidisciplinary approach with the synergistic intervention of surgeons, gastroenterologists, radiologists, oncologists and radiotherapists, but preoperative management and patient preparation have not yet reached the diffusion and standardization of other areas of general surgery due to specific disease characteristics (need for major liver resections and inadequate volume of remnant, need for management of preoperative jaundice,). At the OSR Hepatobiliary Surgery Unit specialized skills cooperate in order to standardize and optimize the treatment of this disease while maintaining the philosophy of "patient-tailored therapy".

The OSR Hepatobiliary Surgery unit plays an important role in the national and international setting, being the following the leadership elements:

1. First prospective clinical trials in Western countries (Aldrighetti et al, World J Surg. 2013 Jun;37(6):1388-96; Aldrighetti et al, J Gastrointest Surg. 2015 Jul;19(7):1324-33);
2. Production of clinical trials subsequently selected for international reviews showing general advantages of surgery (Ruys, HPB. 2014) and specific advantages of multidisciplinary management in tertiary referral centers (Gomez, EJSO. 2014).
3. The series presently consists of 231 procedures of liver and biliary resections, constitutes the largest Italian series and is among the largest western experiences.

ALPPS approach

The ALPPS (Associating Liver Partitioning and portal vein Ligation for Staged hepatectomy) is a procedure recently introduced in hepatobiliary surgery (De Santibanes, World J Surg 2011; Schnitzbauer, Ann Surg 2012) which consists in the association, during a first surgical time, of the ligation of the right portal vein with the transection of the liver parenchyma in order to induce an increased rate of liver hypertrophy (FLR, Future Liver Remnant) in a shorter time interval (7-10 days) compared to standard techniques (Portal Vein Embolization, Two Stage Hepatectomy). ALPPS has been described for the treatment of advanced hepatic cancer in patients with inadequate residual liver. In this context, the OSR Hepatobiliary Surgery Unit plays an important role at national and international level.

The elements that characterize this leadership include

1. The series presently consists of 40 procedures of ALPPS, constitutes the largest Italian series and is among the largest international experiences.
2. Contribution to scientific literature by the realization of one of the first trials regarding indications to ALPPS approach (Ratti et al, Updates Surg 2014), inclusion of the institutional series in the first systematic review regarding ALPPS (Schadde et al; Ann Surg Oncol 2014) and realization of the first comparative study between ALPPS and Two Stage Hepatectomy (Ratti et al, Ann Surg Oncol 2015).
3. Inclusion of data from the institutional series in 1) International ALPPS Registry (Schadde E, Ardiles V, Robles-Campos R, Malago M, Machado M, Hernandez-Alejandro R, Soubrane O, Schnitzbauer A, Raptis D, Tschoe C, Petrowsky H, De Santibanes E, Clavien PA, on behalf of the ALPPS Registry Group. Early survival and safety of ALPPS: First Report of the International ALPPS Registry. Ann Surg. 2014) and 2) Italian ALPPS Registry (« Importance of primary indication and liver function between stages : results of a multicenter Italian audit of ALPPS 2012-2014 » HPB, 2016)
4. Dr. Aldrighetti was a member of the expert panel during the “1st International Consensus Conference on ALPPS” held in Hamburg, Germany, to define international guidelines regarding ALPPS. He was the team leader of the group “Colorectal Liver Metastases and aspects of Chemotherapy”.

VIII. SCIENTIFIC PRODUCTION

Scientific Papers	607
Full Papers	292
Abstracts of meeting presentations	315
PubMed-cited Papers	213
Scopus-cited Papers	228
Indexed Papers	220
Cumulative IF (JCR 2014)	650.091
Mean IF	2.954
H-Index (Scopus)	40

Scientific Production

1. **ALDRIGHETTI L.**, Roveda G., Ferrara R., Sironi M., Bissi A., Olmi L. *Carcinoide della coda pancreatica a secrezione gastrinica: caso clinico.* Atti VIII Congresso Societa' Italiana EndocrinoChirurgia (S.I.E.C.), Palermo, 23-26 novembre 1988. Priulla Ed., Palermo, 1988; 2: 1209-1211
2. **ALDRIGHETTI L.**, Roveda G., Bassi R., Fieschi S., Frigerio C., Perrone G., Prezzati F., Vercesi M. *Variazioni enzimatiche nella pancreatite acuta.* Proceedings XVI Congress of International College of Surgeons, Milan july 3-9, 1988. Monduzzi Ed., Bologna, 1988; 13: 251-255
3. Roveda G., **ALDRIGHETTI L.**, Mantovani G., Capasso G., Fusai G., Innocenti L., Vercesi M., Olmi L. *Angiosarcoma epatico: caso clinico.* Proceedings XVI Congress of International College of Surgeons, Milan july 3-9, 1988. Monduzzi Ed., Bologna, 1988; 6: 507-510
4. Roveda G., **ALDRIGHETTI L.**, Astore G., Bassi R., Beltrame M., Cheli M., Jannello A., Erembourg L. *Bioritmo metrico della secrezione gastrica.* Proceedings XVI Congress of International College of Surgeons, Milan july 3-9, 1988. Monduzzi Ed., Bologna, 1988; 13: 265-269

5. Capasso G., Contorni L., Erenbourg L., **ALDRIGHETTI L.**, Bellati A., Graci C., Pomes D.E., Olmi L. *Tyroglossal duct abnormalities: unique case report (monochorial twins)*. Proceedings XXVI Congress of International College of Surgeons, Milan july 3-9, 1988. Monduzzi Ed., Bologna, 1988; 12: 433-437

6. **ALDRIGHETTI L.**, Roveda G., Castellano R., Fieschi S., Paganelli M., Capasso G., Giacomelli M., Olmi L. *Carcinoidi. Considerazioni sul protocollo diagnostico*. Chirurgia Arch Trim 1990; 14: 95-108

7. Olmi L., **ALDRIGHETTI L.**, Paganelli M., Castellano R., Jannello A., Roveda G. *La splancnicoectomia nelle patologie cronico-degenerative del pancreas*. Proceedings II World Week of Professional Updating in Surgery of University of Milan, Milan july 15-21, 1990. Monduzzi Ed., Bologna, 1990; 6: 45-49

8. **ALDRIGHETTI L.**, Bianchi A., Castellano R., Fieschi S., Frigerio D., Noto O., Mukenge S., Roveda G. *Diagnostic value of amylase creatinine clearance ratio in acute pancreatitis*. Proceedings II World Week of Professional Updating in Surgery of University of Milan, Milan july 15-21, 1990. Monduzzi Ed., Bologna, 1990; 6: 7-10

9. **ALDRIGHETTI L.**, Paganelli M., Fieschi S., Castellano R., Mangiagalli M., Olmi L. *Attualita' nella diagnostica dei tumori carcinoidi*. Proceedings II World Week of Professional Updating in Surgery of University of Milan, Milan july 15-21, 1990. Monduzzi Ed., Bologna, 1990; 6: 143-149

10. Olmi L., **ALDRIGHETTI L.**, Capasso G., Castellano R., Fieschi S., Paganelli M., Roveda G. *Malattia di Banti: la splenectomia nella nostra recente esperienza*. Atti Accad Fisiocritici Siena 1990; 9: 197-204

11. **ALDRIGHETTI L.**, Fieschi S., Roveda G., Castellano R., Olmi L. *La diagnostica dei tumori carcinoidi*. Atti Accad Fisiocritici Siena 1990; 9: 189-196

12. Olmi L., **ALDRIGHETTI L.**, Castellano R. *Dolore pancreatico e splancnicoectomia: indicazioni alla chirurgia palliativa nel Ca del pancreas*. Atti Relazioni V Corso "Advances in Surgery", Centro E. Majorana, Erice, 2-10 maggio 1990. Argomenti di Chirurgia 1991; 11: 187-194

13. Gallone L., Olmi L., **ALDRIGHETTI L.** *La chirurgia del dolore pancreatico*. Atti Relazioni "IV Giornate di Chirurgia", Orbetello, 4-6 aprile 1991. Monduzzi Ed., Bologna, 1991; 1: 85-94

14. Olmi L., **ALDRIGHETTI L.** *ElettroChimioTerapia (ECT) sec. Nordenstroem nelle neoplasie pancreatiche: tecnica per l'applicazione perioperatoria*. Atti Accad Fisiocritici Siena 1991; 10: 121-129

15. Vercesi M., **ALDRIGHETTI L.**, Bucci D., Graci C. *Rottura spontanea dell'esofago: aspetti di diagnosi e terapia*. Chirurgia Arch Trim 1991; 15: 15-21

- 16.** Erenbourg L., Campagnano G., Capasso G., **ALDRIGHETTI L.**, Roveda G., Fieschi S., Innocenti L., Galli E. *La pH-metria endogastrica continua sulle 24 ore. Nuovo modello di interpretazione [Continuous 24-hours endogastric pH-metry. A new model of interpretation]*. Minerva Chir 1991; 46: 1245-1250 I.F. 0.394
- 17.** **ALDRIGHETTI L.** Giacomelli M., Paganelli M., Mangiagalli M., Roveda G., Olmi L. *Ruolo della chirurgia d'urgenza nella "Body Packer Syndrome"*. Atti XX Congresso Nazionale Societa' Italiana di Chirurgia d'Urgenza, Genova, 28-31 ottobre 1991; 1: 675-679
- 18.** Paganelli M., **ALDRIGHETTI L.**, Catena M., Caterini R., Ferla G. *Strategia chirurgica in due tempi per emorragia epatica massiva: caso clinico*. Atti XX Congresso Nazionale Societa' Italiana di Chirurgia d'Urgenza, Genova, 28-31 ottobre 1991; 1: 437-443
- 19.** Olmi L., Martinenghi C., **ALDRIGHETTI L.** *Prospettive di applicazione del trattamento elettrochimico a neoplasie viscerali. Tecnica peroperatoria nel carcinoma del pancreas*. Atti Relazioni XVII Congresso Nazionale S.I.P.D.T.T., Catania, 11-18 novembre 1991. Monduzzi Ed., Bologna, 1991; 1: 893-899
- 20.** **ALDRIGHETTI L.**, Paganelli M., Ferraroli G., Graci C., Rosina M., Ferla G. *La peritonite batterica nella cirrosi epatica ascitogena: esperienza clinica*. Atti Accad Fisiocritici Siena 1991;10: 257-265
- 21.** Paganelli M., **ALDRIGHETTI L.**, Catena M., Caterini R., Graci C., Ferla G. *Trattamento delle complicanze emorragiche in corso di terapia anticoagulante orale cronica*. Atti Accad Fisiocritici Siena 1991;10: 249-256
- 22.** Chiesa R., Melissano G., Castellano R., **ALDRIGHETTI L.**, Triulzi F., Anzalone N., Scotti G., Grossi A. *Ruolo dell'angio-RM (MRA) nello studio della patologia cerebro-vascolare: confronto con le metodiche tradizionali*. Atti XVII Congresso Nazionale Societa' Italiana Ricerche in Chirurgia (S.I.R.C.), Brescia, 11-13 giugno 1992. O.C.T. Ed., Trieste, 1992; 1: 171-174
- 23.** **ALDRIGHETTI L.**, Ferraroli G., Paganelli M., Graci C., Rosina M., Ferla G. *Trattare chirurgicamente la peritonite batterica spontanea e' ancora attuale? [Does the surgical treatment of the spontaneous bacterial peritonitis still seems up-to-date?]*. Minerva Chir 1993; 48: 851-856 I.F. 0.394
- 24.** Paganelli M., **ALDRIGHETTI L.**, Graci C., Caterini R., Ferla G. *Subcutaneous Infusion Port (SIP): aspetti di tecnica chirurgica e di management*. Atti Accad Fisiocritici Siena 1993; 12: 151-158
- 25.** De Conno F., Caraceni A., **ALDRIGHETTI L.**, Magnani G., Ferla G., Comi G., Ventafridda V. *Paraplegia following coeliac plexus block*. Pain 1993; 55: 383-385 I.F. 5.644

- 26.** **ALDRIGHETTI L.**, Paganelli M., Graci C., Vercesi M., Catena M., Ferla G. *L'occlusione intestinale nella cocaine-packet ingestion [Bowel obstruction in cocaine packet ingestion]*.
Minerva Chir 1993; 48: 1233-1237 I.F. 0.394
- 27.** Parmanto B., Munro PW., Doyle HR., Doria C., **ALDRIGHETTI L.**, Marino IR., Mitchel S., Fung JJ. *Neural Network Classifier for hepatoma detection*.
Proceedings of the World Congress on Neural Networks, San Diego, Ca, USA, june 4-9, 1994. Lawrence Erlbaum Associates Publishing, Hilldale, NJ, 1994; 1: 285-290
- 28.** Vercesi M., Graci C., Fieschi S., **ALDRIGHETTI L.** *Presentazione di un metodo di chiusura della pelvi dopo interventi per neoplasia [A method for closure of the pelvic floor after exenterative surgery]*.
Chirurgia 1994; 7: 949-951
- 29.** **ALDRIGHETTI L.**, Catena M., Graci C., Castrucci M., Del Maschio A., Ferla G. *Approccio multidisciplinare alla fistola pancreaticica post-operatoria*.
Atti del Congresso della Societa' Italiana di Chirurgia, Roma, 16-19 ottobre 1994. Minerva Medica Ed., Torino, 1994, 1: 851-854
- 30.** Bartoli F., Zajko A., **ALDRIGHETTI L.**, Orons P., Jabbour N., Dodd G. III, Marino IR., Tzakis A., Fung JJ. *Trapianto di fegato in pazienti sottoposti a decompressione porto-sistemica intraepatica transgiugulare*.
Atti del Congresso della Societa' Italiana di Chirurgia, Roma, 16-19 ottobre 1994. Minerva Medica Ed., Torino, 1994, 2: 1629-1632
- 31.** **ALDRIGHETTI L.**, Marino IR., Doyle HR., Doria C., Scotti-Foglieni C., Kovalak J., Fung JJ., Tzakis AG., Starzl TE. *Breaking the donor age barrier to face the organ shortage in liver transplantation*.
In: Touraine JL, Traeger J, Betuel H, Dubernard JM, Revillard JP, Dupuy C. (Eds.): Organ Shortage. The solutions. Kluwer Academic Publishers, Dordrecht, The Netherlands, 1994, pagg 369-370
- 32.** Graci C., **ALDRIGHETTI L.**, Giacomelli M., Paganelli M., Ferla G. *Ruolo della chirurgia mini-invasiva nell'incidentaloma del surrene*.
Atti Accad Fisiocritici Siena 1994; 13: 125-132
- 33.** Caterini R., **ALDRIGHETTI L.**, Bua L., Paganelli M., Mukenge S., Bissi A. *Rottura pancreatica conseguente a trauma addominale chiuso di lieve entita': caso clinico*.
Atti Accad Fisiocritici Siena 1994; 13: 133-138
- 34.** Doyle HR., Parmanto B., Munro PW., Marino IR., **ALDRIGHETTI L.**, Doria C., McMichael J., Fung JJ. *Building clinical classifiers using incomplete observations. A neural network ensemble for hepatoma detection in patients with cirrhosis*.
Method Inform Med 1995; 34: 253-258 I.F. 1.600
- 35.** Marino IR., Doyle HR., Doria C., **ALDRIGHETTI L.**, Gayowsky T, Scotti-Foglieni C, Furukawa H, Fung JJ., Tzakis AG., Starzl TE. *Outcome of Liver transplantation using donors 60 to 79 years of age*.
Transplant Proc 1995; 27: 1184-1185 I.F. 0.952
- 36.** De Conno F., Caraceni A., Ventafridda V., **ALDRIGHETTI L.**, Ferla G., Magnani G., Comi G. *Paraplegia following coeliac plexus block [Discussion, letter # 2725]*.
Pain 1995; 60: 233-236 I.F. 5.644

- 37.** **ALDRIGHETTI L.**, Ferla G. *Il futuro dei trapianti da organi animali.* KOS 1995; 119/120: 26-31
- 38.** **ALDRIGHETTI L.**, Caterini R., Ronzoni M., Jannello A., Ferla G. *Ruolo dei sistemi totalmente impiantabili per accesso vascolare a lungo termine nel trattamento del paziente neoplastico [Totally implantable devices for prolonged venous access in neoplastic patients].* Minerva Chir 1995; 50: 447-454 I.F. 0.394
- 39.** Marino IR., Doyle HR., **ALDRIGHETTI L.**, Starzl TE. *Trapianto ortotopico di fegato: indicazioni e risultati [Orthotopic Liver transplantation: Indications and results].* Leadership Medica, 1995; 11 (8): 8-22
- 40.** Marino IR., Doyle HR., **ALDRIGHETTI L.**, Doria C., Scotti-Foglieni C., Starzl TE. *Il donatore multiorgano: aspetti tecnici ed organizzativi [Logistics and management of the multiple organ donor].* Leadership Medica, 1995; 11 (8): 23-38
- 41.** Madariaga JR., Jabbour N., Sahin M., **ALDRIGHETTI L.**, Marino IR. *Il ruolo del trapianto nelle neoplasie primitive e metastatiche del fegato [Liver transplantation for primary and metastatic liver tumors in adults].* Leadership Medica 1995; 11 (8): 40-45
- 42.** Marino IR., Doria C., **ALDRIGHETTI L.**, Scotti-Foglieni C., Doyle HR. *Effetto dell'eta' e del sesso del donatore sui risultati del trapianto di fegato: analisi univariata e multivariata.* XXIII Congresso Societa' Italiana Trapianti d'Organo, Bari, Italia, set. 21-23, 1995.
In Schena FP., Selvaggi FP. (Eds): Stato attuale dei trapianti di organo e di tessuto in Italia. Wichtig Ed., Milano, 1995, pagg 515-519
- 43.** Bartoli FA., Leggio A., **ALDRIGHETTI L.**, Zajko AB., Fung JJ. *La TIPS nel trattamento dell'ipertensione portale intraepatica in candidati al trapianto epatico.* XXIII Congresso Societa' Italiana Trapianti d'Organo, Bari, Italia, set. 21-23, 1995.
In Schena FP., Selvaggi FP. (Eds): Stato attuale dei trapianti di organo e di tessuto in Italia. Wichtig Ed., Milano, 1995, pagg 579-582
- 44.** Catena M., Musiani P., **ALDRIGHETTI L.**, Maggiano N., Lattanzio G., Ferla G. *Xenotriplanto cardiaco da criceto a ratto: ruolo della milza nella risposta immunitaria in animali trattati con ciclofosfamide (CyP).* XXIII Congresso Societa' Italiana Trapianti d'Organo, Bari, Italia, set. 21-23, 1995.
In Schena FP., Selvaggi FP. (Eds): Stato attuale dei trapianti di organo e di tessuto in Italia. Wichtig Ed., Milano, 1995, pagg 899-900
- 45.** Vercesi M., Graci C., **ALDRIGHETTI L.**, Ponzoni M., Ferla G. *Considerazioni sul valore clinico dell'autoinnesto di milza [Clinical value of spleen autograft].* Minerva Chir 1995; 50: 687-692 I.F. 0.394
- 46.** Marino IR., Doyle HR., **ALDRIGHETTI L.**, Doria C., Gayowsky T., Fung JJ., Tzakis AG., Starzl TE. *Effect of donor age and sex on the outcome of liver transplantation.* Hepatology 1995; 22: 1754-1762 I.F. 12.003

- 47.** **ALDRIGHETTI L.**, Mukenge S., Paganelli M., Caterini R., Giacomelli M., Ferla G. *Ruolo della decompressione porto-sistemica intraepatica transgiugulare (TIPS) nel trattamento dell'ipertensione portale in pazienti con insufficienza epatica terminale.*
Atti Accad Fisiocritici Siena 1995; 14: 15-22
- 48.** **ALDRIGHETTI L.**, Paganelli M., Mukenge S., Caterini R., Giacomelli M., Ferla G. *Ruolo della decompressione porto-sistemica intraepatica transgiugulare (TIPS) nella insufficienza epatica terminale e nei candidati a trapianto epatico.*
Atti Accad Fisiocritici Siena 1995; 14: 23-30
- 49.** **ALDRIGHETTI L.**, Paganelli M., Ronzoni M. *Sistemi totalmente impiantabili per accesso venoso a lungo termine.* Atomo Ed., Milano, 1995
- 50.** Bartoli F., **ALDRIGHETTI L.**, Zajko A., Orons P., Dodd G., Jabbour N., Tzakis A., Leggio A., Fung J. *Transjugular intrahepatic portosystemic shunt for the treatment of portal hypertensive complications in liver transplant candidates.*
Med J Surg Med 1995; 3: 49-57
- 51.** Bartoli F., Zajko A., **ALDRIGHETTI L.**, Orons P., Jabbour N., Dodd G. III, Tzakis A., Fung JJ.. *Decompressione porto-sistemica intraepatica transgiugulare per il trattamento delle complicanze secondarie a ipertensione portale in pazienti con insufficienza epatica terminale. [Transjugular intrahepatic portosystemic shunt for the treatment of portal hypertension related complications in patients with end-stage liver disease].*
Chirurgia 1995; 8: 335-341
- 52.** Scotti-Foglieni C., Colombo P., **ALDRIGHETTI L.**, Doria C., Marino IR., Starzl TE. *Indicazioni e risultati del trapianto intestinale/multiviscerale (InMvTx) nell'uomo [Human intestinal/multivisceral transplantation (InMvTx). Indications and results]. Parte I.*
Leadership Medica, 1996; 12 (4): 20-36
- 53.** Jabbour N., Zajko A., Orons P., Irish W., Bartoli F., Marsh W., Dodd G. III, **ALDRIGHETTI L.**, Colangelo J., Rakela J., Fung J. *Transjugular intrahepatic portosystemic shunt in patients with end-stage liver disease: results in 85 patients.*
Liver Transplant Surg (Liver Transpl), 1996; 2: 139-147 I.F. 3.944
- 54.** Scotti-Foglieni C., Colombo P., **ALDRIGHETTI L.**, Doria C., Marino IR., Starzl TE. *Indicazioni e risultati del trapianto intestinale/multiviscerale (InMvTx) nell'uomo [Human intestinal/multivisceral transplantation (InMvTx). Indications and results]. Parte II.*
Leadership Medica, 1996; 12 (5): 24-37
- 55.** Doyle HR., Morelli F., McMichael J., Doria C., **ALDRIGHETTI L.**, Starzl TE., Marino IR. *Hepatic retransplantation. An analysis of risk factors associated with outcome.*
Transplantation 1996; 61: 1499-1505 I.F. 3.781
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