SUMMARY

An experimental study on TPN-induced hepatic impairment with cholestasis was performed.

Marked degeneration of microvilli and microfilaments within the bile canaliculi were noted in the total parenteral nutrition groups (groups II and III).

In group III, degeneration of microvilli and microfilaments was more severe than that in group II.

Within the bile canaliculi, microvilli and microfilaments serve very important functions in the bile secretory mechanism. Their degeneration induced by total parenteral nutrition is suggested to be one of the important factors causing hepatic impairment with cholestasis.

Development of microvilli and microfilaments within the bile canaliculi is incomplete in immature animals. For this reason, we suggest that hepatic impairment with cholestasis may be more easily induced by high-caloric total parenteral nutrition during this period.

The amount of L-form crystaline amino acids in total parenteral nutrition should be controlled very carefully.

REFERENCE

- 1. Fujiwara T. Problems on total parenteral nutritional therapy in the neonate. *ICU. CCU (Japan)* 1987;11: 423-31.
- 2. Akira O, Ikeda Y, Kamegashira M, et al. Formula and side effects of intravenous hyperalimentation. *Surg. Ther.* 1978; 38: 177-186.
- 3. Sanada Y, Hira Y, Imai T, et al. Total parenteral nutrition in "Prematures" with surgical disorders. *Jpn. J. Pediatr. Surg.* 1979;11:9-18.
- Quigley EMM, Marsh MN, Shaffer JL, Markin RS. Hepatobiliary complications of total parenteral nutrition. Gastroenterology 1993;104:286-301.
- 5. Sax HC, Bower RH. Hepatic complications of total parenteral nutrition. *JEPN J. Parenter. Enteral. Nutr.* 1988;12:615-8.
- Kelly DA. Liver complications of pediatric parenteral nutrition- epidemiology. *Nutrition* 1998;14:153-7.

- 7. Toloukian RJ, Downing SE. Cholestasis associated with long-term parenteral hyperalimentation. *Arch. Surg.* 1973;106:58-62.
- 8. Beale EF, Nelson RM, Bucciarelli RL, et al. Intrahepatic cholestiasis accociated with parenteral nutrition in premature infants. *Pediatrics* 1979;64:342-7.
- 9. Peden VH, Witzleben CL, Skelton MA. Total parenteral nutrition, letters to the editor. *J Pediatr* 1971;78:180-1.
- Toloukian RJ, Seashore JH. Hepatic secretory obstruction with total parenteral nutrition in infants. *J. Pediatr. Surg.* 1975;10:353-60.
- 11. Ginn-Pease ME, Pantalos D, King DR. TPN-associated hyperbilirubinemia: a common problem in newborn surgical patients. *J. Pediatr. Surg.* 1985;20:436-9.
- 12. Hodes JE, Grosfeld JL, Thomas TR, et al. Hepatic failure in infants on total parenteral nutrition (TPN): clinical and histopathologic observations. *J. Pediatr. Surg.* 1982;17:463-8.
- 13. Tao RC, Yoshimura NN, Chinn IB, et al. Determination of intravenous non-protein energy and nitrogen requirements in growing rats. *J. Nutr.* 1979;109:904-15.
- 14. Steiger E, Vars HM, Dudrich SJ. A technique for long-time intravenous feeding in unrestrained rats. *Arch. Surg.* 1972;104:330-2.
- 15. Imai T. High calorie infusion- induced hepatic impairments in infants. *Jpn. J. Surg. Metab. Nutr.* 1983;17:18-32.
- Moss RL, Das JB, Raffensperger JG. Total parenteral nutrition- associated cholestasis: clinical and histopathologic correlation. *J. Pediatr. Surg.* 1993;28: 1270-5.
- 17. Beath SV, Davies P, Papadopoulou A, et al. Parenteral nutrition-related cholestasis in postsurgical neonates: multivariae analysis of risk factors. *J. Pediatr Surg.* 1996;31:604-6.
- 18. Takahashi M, Sawaguchi S, Ohkawa H, et al. Hepatobiliary dysfunction in neonates associated with total parenteral nutrition. *Acta Neonatorog. Jpn.* 1983;19: 333-41.
- 19. Kubota A, Nezu R, Kamata S, et al. Hyperbilirubinemia in neonates associated with total parenteral nutrition. *J. Jpn. Surg. Soc.* 1986;87:162-71.
- 20. Hirai Y, Sanada Y, Hasegawa S, et al. Total parenteral nutrition in low-birth weight neonates with complicated surgical disorders: effects and difficulties. *Jpn. J. Surg.*