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De Novo Malignancies after Kidney Transplantation – A Single-Centre Experience

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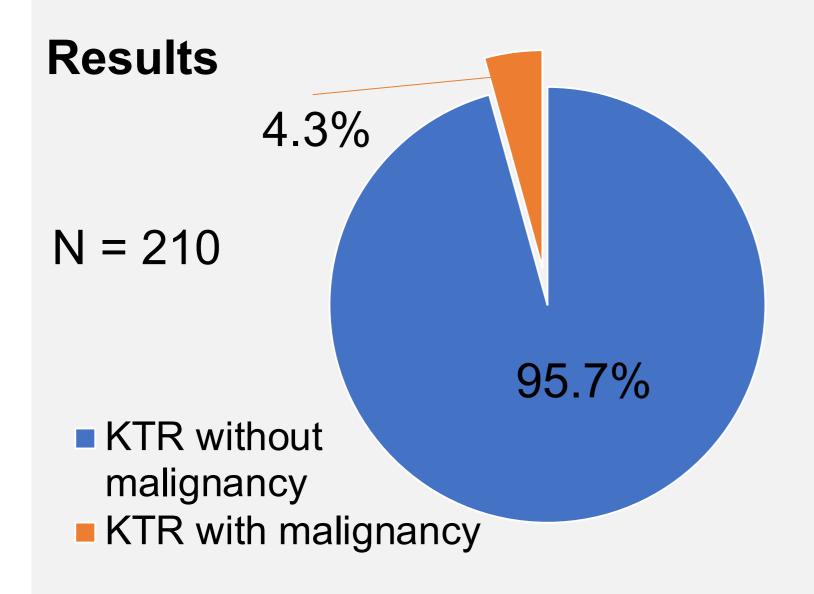
Introduction

Kidney transplant improves survival and quality of life of patients with end-stage kidney disease. However, immunosuppression increases risk of post-transplant malignancies.

Methodology

Type of Malignancy	Number of patients
Breast cancer	2
Cancer of the urinary tract	2
Skin cancer	2
Hematological malignancy	2
Squamous cell carcinoma of tongue	1

This retrospective study included all kidney transplant recipients (KTR) who were under follow-up in Hospital Selayang between year 2000 and 2022. Those diagnosed with de novo malignancies were identified, and data was retrieved from hospital information system.



• Mean age at cancer diagnosis: 54 ± 14.4 years old

- Seven patients (78%) passed away with a mean mortality time of 2.0 ± 1.7 years upon diagnosis of malignancy
- Six patients passed away with a functioning graft while one patient had failed kidney allograft
- Two patients (22.2%) were still alive but had developed chronic allograft nephropathy

Conclusion

Malignancy is an important cause of morbidity and mortality in kidney transplant recipients. It carries a poor prognosis with high mortality rate with

Mean duration from kidney

transplantation to the diagnosis of

cancer: 12.6 ± 7.2 years

limited life expectancy upon diagnosis.

