

CHARACTERISTICS AND LONG-TERM GRAFT FUNCTION CHANGES AMONG PREVALENT KIDNEY TRANSPLANT RECIPIENTS IN A TERTIARY HOSPITAL IN MALAYSIA



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Introduction

Understanding the clinical characteristics of prevalent kidney transplant recipients (KTRs) is important in health service provision development and planning. In addition, these data allow identification of risk factors associated with worse outcomes and may result in better clinical practice.

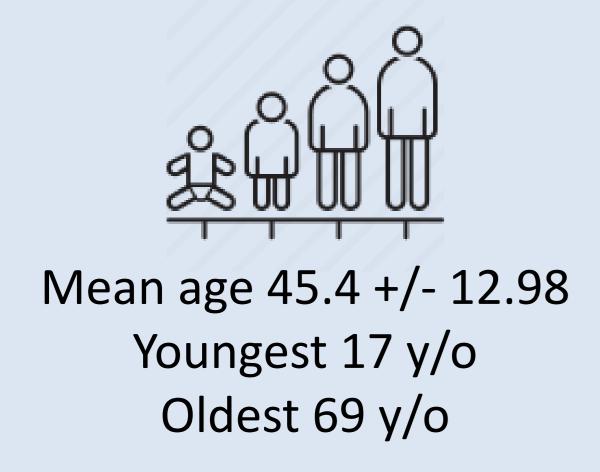
Methodology

Retrospective cohort study involving all prevalent KTRs under follow-up at nephrology unit, Hospital Raja Permaisuri Bainun, Ipoh at 1st January 2022. Sociodemographic and clinical characteristics as well as long term graft function changes were described. Glomerular filtration rate (GFR) was estimated using the Chronic Kidney Disease Epidemiology Collaboration (CKD-EPI) equation.

Results

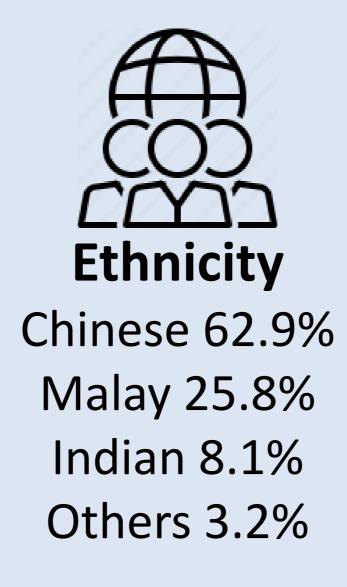
62 Prevalent KTRs under follow-up

as of 1st January 2022





Males 62.9%



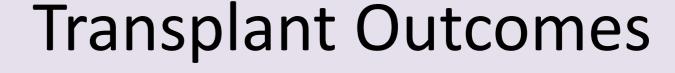


Primary cause of ESKD Unknown 51.6% Chronic GN 30.6% Diabetes mellitus 8.1% Others 9.6%

Transplant Characteristics











Preemptive + Transplant within 6 mths of dialysis: 21.6%

ABO incompatible transplantation 3.2%

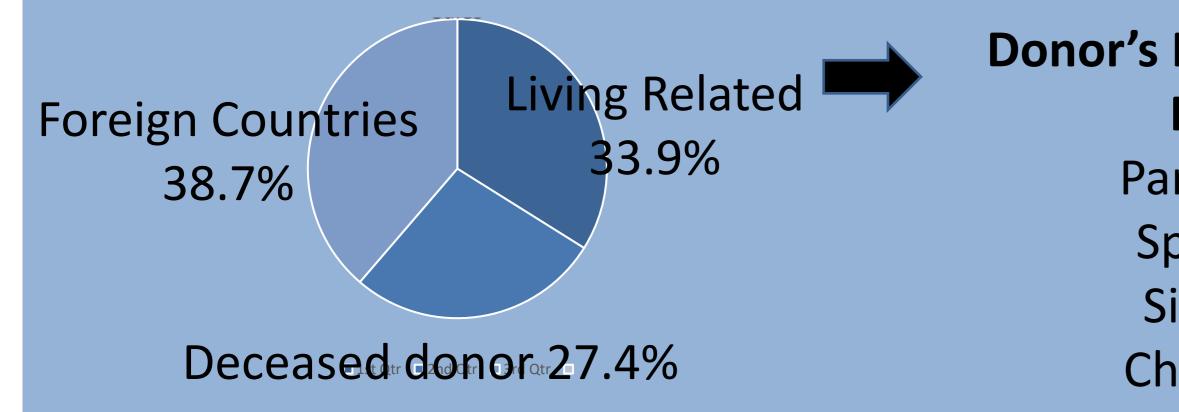


30.6%

Documented Infection Episode at 1st Year of Transplant



Type of Kidney Transplant

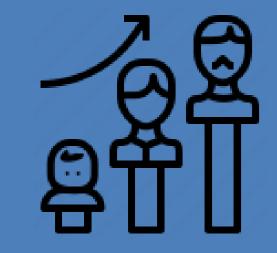


Donor's Relationship with Recipient Parents 57.1% Spouse 9.7% Sibling 9.5% Children 4.8%

9.6% Post Transplant Diabetes mellitus



60.5 +/- 28.0 ml/min/1.73m2 Average eGFR



Mean age at transplant 33.7 +/- 11.48 y/o Mean years of transplantation 12.2 +/- 7.94 yrs

Immunosuppression regimes MPA/Tacrolimus/Pred 51.6% Everolimus/Tac/Pred 19.4% MPA/Cyclosporin/Pred 12.9%



Mean Annualized Change of eGFR -1.8 + / - 3.8 m l / m in / 1.73 m 2

*No significant association noted between eGFR slope and sociodemographic/transplant-related characteristics

Conclusion

There was a slow decline in eGFR in all KTRs. Failure to identify factors associated with worse declining GFR rate could be due to small sample size and retrospective nature of study.