

신이식 환자에서 임신의 예후

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Pregnancy Outcomes in Renal Allograft Recipients

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Objective : Renal transplantation with a well-functioning graft leads to a rapid restoration of endocrine and sexual functions. However, the pregnancy in renal allograft recipients is still regarded as a high risk, pregnancy outcome is variable from fetal death to successful delivery. Therefore, we investigated the characteristics and outcomes of pregnancy in renal allograft recipients.

Patients and Methods : From May, 1994 to May, 2007, 1,442 patients underwent renal transplantation in our hospital. Among them, 342 female patients were aged between 19 and 45 years. Medical records of 8 pregnancies in 6 recipients were retrospectively reviewed.

Results : The mean patient age was 31.1 ± 2.8 years. All patients received steroids and cyclosporine ; 1 patient received azathioprine and 3 patients received mycophenolate mofetil (MMF). The mean time from transplantation to pregnancy was 6.0 ± 2.9 years. After pregnancy, the level of serum creatinine, blood pressure were not significantly changed, compared to those before pregnancy. Successful delivery was found in 3 (37.5%) patients. The mean duration of pregnancy of 35 ± 2 weeks with mean birth weight of 2186.7 ± 843.2 g. Cesarean section was performed in 2 cases out of 3 deliveries (67%). Abortion was performed in 3 cases due to addition of MMF. Intrauterine fetal death (IUFD) was found in 2 cases. Patients with IUFD developed proteinuria during the 2nd trimester ($p=0.054$), although the significant clinical parameters influencing pregnancy outcomes were not observed in this study. One recipient experienced 3 pregnancies : At her 1st time, she had taken dilatation and curettage for abortion due to MMF usage. At 2nd time, preeclampsia and IUFD occurred to her. Finally at her 3rd time, she was delivered of a baby successfully.

Conclusion : Pregnancy outcome in renal allograft recipients is still hardly successful, so careful monitoring of maternal renal status and fetal condition should be required.

Key Words : 임신, 신장이식, 단백뇨

Pregnancy, Renal allograft recipients, Proteinuria