

해외에서 신장이식을 받은 한국 환자들의 장기간 예후: 단일기관 연구

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Long-term Outcome for Korean Recipients Undergoing Overseas Kidney Transplantation: Single Center Study

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Background: We have reported that Korean recipients of Chinese cadaveric kidneys showed lower estimated GFR (eGFR) and higher rates of infection and rejection in the short-term. We followed up those patients and recruited subsequent patients who received overseas kidney transplantations.

Methods: We included 87 patients received overseas cadaveric kidney transplantations (overseas group) including China (n=85), and have been managed at our institute from Jan 2002 to Dec 2008 and 66 patients (domestic group), received cadaveric kidney transplantations at our institute from Feb 2000 to Dec 2008.

Results: Duration of pre-transplantation renal replacement therapy was longer in domestic group (overseas group vs. domestic group; 76.8 vs. 21.9 months) ($p < 0.05$). Donor age was older in domestic group (overseas group vs. domestic group; 40.6 vs. 28.8 years) ($p < 0.05$). Estimated GFR at 1 year after transplantation of overseas group was higher in domestic group (overseas group vs. domestic group; 57.2 mL/min/1.73m² vs. 64.9 mL/min/1.73m²) ($p < 0.05$), although following eGFRs were not different. Cumulative numbers of patients with infection and hospitalization were higher in overseas group [Kaplan Meier analysis: infection (log rank $p = 0.177$), hospitalization (log rank $p = 0.043$), respectively]. Patients with biopsy proven acute rejections in early postoperative period were more in domestic group (Breslow $p = 0.005$). There were no differences of patient and graft survival between two groups. When we matched donor age between two groups (domestic group, $n = 21$), eGFRs at initial visit (mean: 23 days), 6 months, 1 year, and 2 years after transplantation were higher in domestic group. Rates of infection and hospitalization in overseas group were higher than domestic group [Kaplan Meier analysis (Breslow p / Log rank p): overseas group vs. domestic group: infection: 0.041/ 0.007, hospitalization: 0.007/ <0.001, respectively]. Patients with biopsy proven acute rejection in early postoperative period were similar between two groups (Breslow $p = 0.488$). There was no difference of patient and graft survival between two groups, either.

Conclusion: Korean recipients of overseas cadaveric kidneys showed lower eGFRs over 2 years after transplantation. And higher rates of infection and hospitalization were observed even after donor age matching. We should be aware of and comprehensively survey the possible complications of kidney recipients undergoing overseas kidney transplantations.

Key Words: 신장 이식, 해외, 성적

Kidney transplantation, Overseas, Outcome