

신장 이식 전 리툽시맙과 혈장반출술 전처치 치료에 의한 이식 후 감염성 합병증의 증가

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Combined use of Rituximab and Plasmapheresis Pre-transplant Increase Post-transplant Infections in Renal Transplant Recipients with Basiliximab Induction Therapy

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We investigated the effect of combined use of rituximab (RTX) and plasmapheresis (PP) pretransplant on the post-transplant infection. One-hundred ninety-six patients undergoing living-donor kidney transplantation at Seoul St. Mary's Hospital, all of whom underwent basiliximab induction therapy, were included in the study. They were divided into three groups: RTX/PP/intravenous immune globulin (IVIg) (RPI group) (n=53), RTX monotherapy (RTX group) (n=14), and control (CONT group) (n=129). We compared the posttransplant infections in the three groups. The overall prevalence of infection was significantly higher and the infection-free survival rate was lower in the RPI group compared with the RTX or CONT groups ($p < 0.05$). There was a trend to more severe bacterial infections in the RPI group compared with the other groups, and fungal infections developed only in the RPI group. After anti-rejection therapy, a significantly higher rate of infection developed in the RPI group than in the other groups ($p < 0.05$). In addition, RPI group was independent risk factor for the development of infection. Our results show that in the setting of basiliximab induction, the use of combined RTX and PP therapy pretransplant significantly increases the risk for posttransplant infection.

Key Words: 리툽시맙, 혈장반출술, 감염성 합병증

Rituximab, Plasmapheresis, Infectious complication