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고도 감작된 환자에서 시행한 혈액형 불일치 신장이식의 임상 경과

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Clinical Outcome of ABO Incompatible Kidney Transplantation in Highly Sensitized Renal Transplant Recipients

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In this study, we aimed to investigate to the impact of combined ABO incompatibility (ABOi) and highly sensitization (HS) to HLA on the clinical outcome of kidney transplantation (KT). We included 58 cases of kidney transplantation, which were ABO incompatible KT or showed highly sensitization (HS) to HLA or combination of both. The definition of highly sensitization was positivity of either type of crossmatch (XM) or presence of donor-specific anti-HLA antibody irrespective of the result of XM. We divided patient into 3 groups; ABOi group (n=26), ABOi-HS group (n=12) and HS group (n=20). Clinical outcomes in the 3 groups were compared. All patients took rituximab and plasmapheresis as desensitization therapy before KT. The number of pre-transplant plasmapheresis did not differ among three groups. After KT, development of acute rejection was higher in ABOi-HS or HS group compared to ABOi group ($p < 0.05$, respectively). But it did not differ between ABOi-HS and HS group. The development of infection and infection free survival rate shows increasing or inferior tendency in ABOi-HS or HS group compared to ABO group as well ($p = 0.08$ and 0.09 respectively). Development of post-operative bleeding did not differ among 3 groups. Allograft survival rate did not differ among 3 groups as well. This study shows that kidney transplantation across combined ABOi and HS shows acceptable clinical outcome and it was similar to that of solely highly sensitization group.

Key Words: 신장이식, 혈액형 불일치, 고도감작

Kidney transplantation, ABO mismatch, Highly sensitization