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Outcomes of End-stage Renal Disease Patients on Waiting List for Deceased Donor Kidney Transplantation- single center study

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Background: Kidney transplantation (KT) is one of the effective renal replacement therapies, which can reduce mortality and morbidity compared to other therapeutic options. However, there is a large discrepancy between the number of patients waiting for KT and donors, which results in 4.4 years of average waiting time to KT in Korea. Patients with end stage renal disease (ESRD) are prone to serious comorbidities such as cardiovascular disease, infection, and malignancy, etc. These comorbidities could be the causes of the cancelation of KT and death. Many ESRD patients in Korea are getting hemodialysis treatment in the private clinics. And there are no formal guidelines for the management of ESRD patients waiting for deceased donor KT in Korea so far. We analyzed the morbidities and mortalities of ESRD patients waiting for deceased donor KT in Chungnam National University Hospital.

Methods: Total 298 ESRD patients on waiting-list for deceased donor KT from February 19th 2000 to February 29th 2016 were included in this study retrospectively.

Results: Mean age was 52.9 years and 186 patients (62.4%) were male. Hypertension and diabetes mellitus were prevalent comorbidities, 74.5% and 46%, respectively. Total 75 patients of 298 patient on waiting list (25%) received KT from deceased donor and the median waiting time to KT was 925 days.

Total 142 patients are still waiting for KT and median waiting time since registration for waiting list of deceased donor KT is 748.5 days. Twenty three patients (7.8%) died during waiting for KT and median time from registration to death was 905 days.

Total 87 events requiring hospitalization took place in 298 ESRD patients while waiting for KT and median time from registration to event was 516 days. The most common cause of hospitalization was infection; there were 45 infection events and its median time was 710 days. the second cause was cardiovascular events; there were 15 events and its median time was 866 days. the third cause was a cancer which was newly diagnosed; there were 4 patients and its median time was 326 days.

Conclusion: Because of high incidence of serious comorbidities and long waiting time for KT candidates, proper guidelines regarding the management of ESRD patients on waiting list for deceased donor KT are required.

Keywords: Cardiovascular event, Infection, Kidney Transplantation