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

Hong jae JEON, Hae ri KIM, Won jung CHOI, Chnag hun SONG, Hong jin BAE, Young rok HAM, Dae eun CHOI, Ki ryang NA, *Kang wook LEE

Nephrology, School of Medicine, Chungnam National University, Korea, South

Objectives : Most patients with end-stage renal disease (ESRD) begin dialysis with various comorbidities. Kidney transplantation (KT) is one of the effective renal replacement therapies in ESRD patients, but these comorbidities may impede access to KT. The growing disparity between the demand for KT and the supply of donor kidney may lead to further morbidities and mortality in this population because of long waiting period. We aimed to assess the impact of baseline characteristics and comorbidities of ESRD patients on the probability of deceased donor kidney transplantation (DDKT) and to evaluate morbidities and mortality during waiting period for KT.

Methods : We analyzed 544 ESRD patients who have been registered in the waiting list for DDKT at Chungnam National University Hospital. Patients were divided into two groups according to whether or not they underwent DDKT. Baseline characteristics and comorbidities were collected and new onset morbidities on waiting time were also evaluated.

Results : Total of 544 patients were registered as potential DDKT candidates between February 2000 and October 2015. The mean age of participants was 48.4 ± 11.7 years at the time of registration. Diabetic nephropathy (39.0%), hypertension (25.2%), and chronic glomerulonephrities (21.3 %) were three most common causes of ESRD. Coronary artery disease (9.4%) was the most frequently accompanied comorbidity. One hundred five of total 544 (19.3 %) patients underwent DDKT. The median waiting time for DDKT was 1,680 days (4.6 years). Blood groups other than type O, peritoneal dialysis, and nondiabetic ESTD were significantly associated with the more likelihood for DDKT after adjusting for demographic factors and other comorbidities. Overall mortality among participants was 9.6% during waiting period. Infectious disease was the leading cause of death and the most common morbidity during waiting time for DDKT. Patient who underwent DDKT had significantly less cardiovascular events during waiting period compared to the patients who were still on waiting list.

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Conclusions : It is speculated that regular follow-up of ESRD patients on waiting list to reference hospital is important to reduce negative effects of comorbidities on kidney transplantation probability.

Keywords : kidney transplantation, waiting list, deceased donor