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Thrombocytopenia after kidney transplantation - Differential diagnosis and evaluation of TMA in KT recipient

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Thrombocytopenia is a common condition after kidney transplantation. The causes of thrombocytopenia includes infectious complication, hematologic disorder, immunosuppressants, prophylactic antibiotics and other agents such as gastrointestinal protective agents and anti-hypertensive agents. However, if these causes are not clear, fewer causes of thrombocytopenia should be discerned. Thrombotic microangiopathy (TMA) in kidney transplant recipients is a rare condition. TMA, together with thrombocytopenia, shows abnormalities of the results associated with hemolysis and causes a decrease in renal function. Patients who suffered from TMA sometimes progress to a fatal course, leading to death. Therefore, early recognition and proper treatment of TMA can improve the prognosis of the patient. The process of suspicion and diagnosis of TMA from thrombocytopenia after renal transplantation as discussed herein provides the differential diagnosis of TMA as a rare cause in kidney transplant recipients.