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Kidney transplant patients have better health-related quality of life than chronic kidney disease patients with similar renal function

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Objectives: Renal function deterioration is associated with physical and mental burdens for both kidney transplantation (KT) and pre-dialysis chronic kidney disease (CKD) patients. However, the change in health-related quality of life (HRQOL) over time in KT patients compared to that of CKD patients has not been evaluated. We addressed this issue using adult patients registered in the KoreaN cohort study for Outcome in patients With KT and Chronic Kidney Disease between 2011 and 2013.

Methods: HRQOL scores were assessed using the Kidney Disease Quality of Life Short Form at 0, 2, 4, and 5 years after enrolment for 276 KT and 709 CKD patients. Multivariable linear regression model was used to find relating factors for higher HRQOL in KT and CKD patients.

Results: Both the CKD-targeted score and SF-36 score improved 2 years after KT, which persisted up to 4 years of follow-up. In contrast, both scores were decreased at the 5-year follow-up in CKD patients. Lower glomerular filtration rate, low baseline QOL, diabetes, and low hemoglobin level were independent risk factors for a lower SF-36 score in KT patients. Employment status and baseline QOL were significantly associated with the CKD-targeted score in both KT and CKD patients. KT patients had a higher SF-36 score than CKD patients at the same CKD stage, and KT was an independent prognostic factor for HRQOL. However, CKD-targeted scores were higher in KT patients only for patients at CKD stage 4–5.

Conclusions: These results highlight that KT can offer a better QOL compared to that of CKD patients even at similar renal function.