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Early allograft dysfunction after kidney transplantation

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Kidney transplantation is considered the treatment of choice for patients with end-stage kidney disease, owing to prolonged survival and improved quality of life. After kidney transplantation, allograft dysfunction is not an uncommon complication, which in some cases leads to allograft loss. Prompt recognition and evaluation of allograft dysfunction are important because it is usually reversible. Persistent dysfunction without any timely intervention may lead to irreversible allograft dysfunction and, eventually, allograft loss.

Delayed graft function (DGF) is defined as the need for dialysis within the first week after kidney transplantation. There are various causes for DGF, including acute tubular necrosis, intravascular volume contraction, arterial occlusion, ureteric obstruction, catheter obstruction, urine leak, early acute rejection, calcineurin inhibitor nephrotoxicity, hemolytic uremic syndrome, etc.

In this session, I will present a case that showed early allograft dysfunction immediately (<1 week) posttransplant.