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Long-term graft survival of donated kidneys with latent mesangial IgA deposition in Korea

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Objectives : Incidental mesangial IgA deposition has been observed in donated kidneys as well as in necropsies without clinical evidence of renal disease. Previous studies have shown that graft function in donated kidneys with mesangial IgA deposition was maintained during the short-term follow-up period. However, the long-term graft outcome in these donors remains unclear.

Methods : We retrospectively collected records from 143 kidney transplant recipients with a post-implantation biopsy between August 2013 and December 2021. The characteristics and pathologic reports of transplant recipients with mesangial IgA deposition were analyzed. The clinical outcome was compared between kidney donors with and without latent mesangial IgA deposition.

Results : Among 143 recipients with post-implantation biopsy during kidney transplantation, mesangial IgA deposition was present in 13 (9.1%) of the donated kidneys. Concomitant C3 and IgG deposits were present in 9 and 2 donated kidneys with IgA deposition, respectively. Five of the 13 recipients who were transplanted with IgA-deposited kidneys had acute or chronic antibody-mediated rejection. The death-censored graft survival of kidney donors with latent mesangial IgA deposition decreased compared to that in kidney donors without IgA deposition (Log Rank $P = 0.02$). Whereas, patient survival was comparable between kidney donors with and without IgA deposition.

Conclusions : The incidence of latent mesangial IgA deposition at the post-implantation kidney was 9.1% in a single-center study in Korea. Long-term graft survival in these donors may decrease compared to donors without IgA deposition; thus, careful follow-up is needed in kidney donors with mesangial IgA deposition at baseline.

graft survival.PNG

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Beyond Challenges, Towards Healthier Kidney

