Post-transplant lymphoproliferative disorder after kidney transplantation

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Introduction

Post-transplant lymphoproliferative disorder (PTLD) is a heterogeneous group of lymphoid lesions. Although rare, it is an important long-term complication in kidney transplant recipients.

Methods

- The Norwegian Nephrology Registry has a complete data set for renal recipients since 1969.
- The register was linked to the Norwegian Cancer Registry to identify cases of PTLD.
- Clinical data were retrieved from local hospitals.
- Demographic data, transplant history, outcomes and pathology were characterized using SPSS statistics

Results

- Fifty-five kidney transplant recipients with PTLD were identified
- Median time from transplantation was 7.1 years
- Mean age at time of lymphoma was 54.4 years, 80 % were men
- Median follow-up time was six years for patients alive at last follow up and ten months for all patients
- Sixty percent had a previous rejection, of whom 37% had been treated with ATG.
- Sixty-seven per cent were Diffuse Large B-Cell Lymphomas, 11% were polymorphic PTLD and 14% were others
- Thirty-six percent of the lymphomas were nodal, 24% involved GI- tract, 18% CNS, and 21% other organs
- Thirty-seven patients died
- Five year overall survival of 34 %.

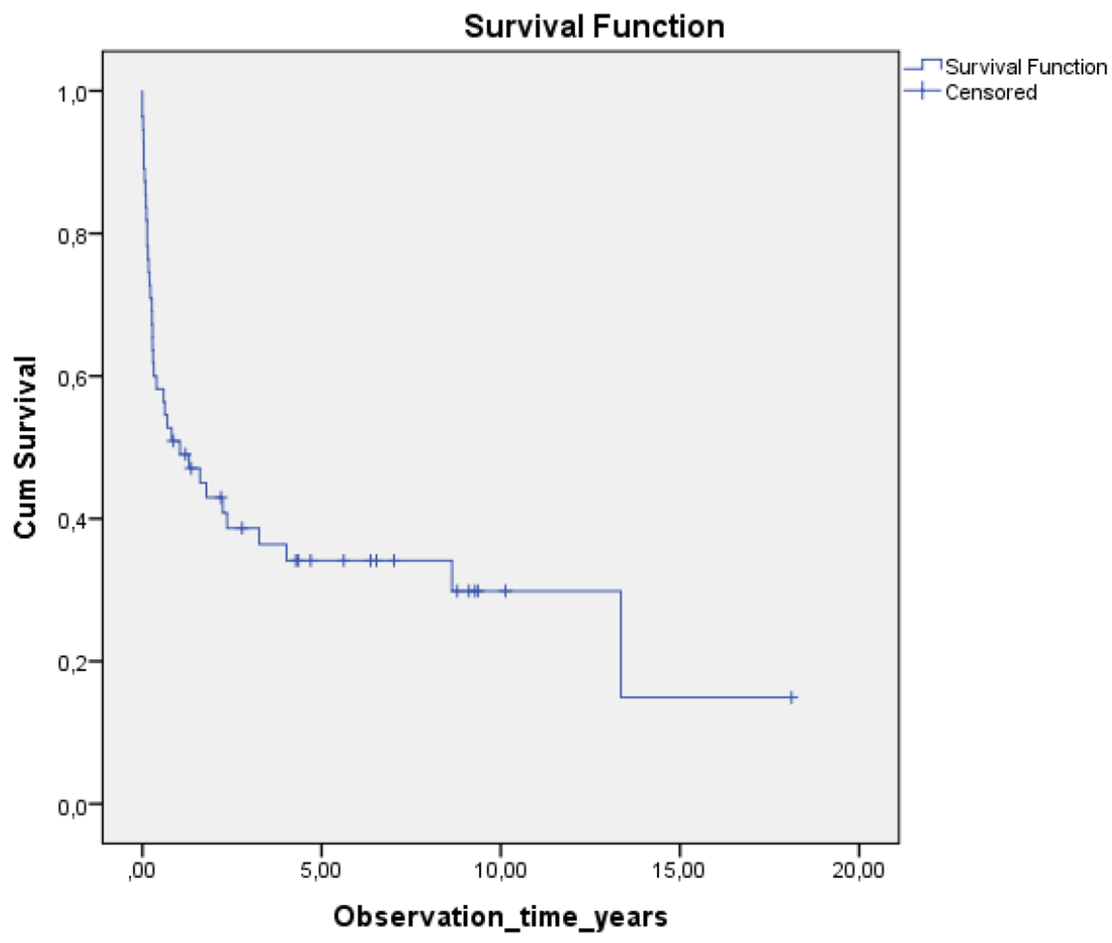

Figure: Overall survival of the 55 patients diagnosed with post-transplant lymphoproliferative disorder (PTLD)

Conclusion

- Post-transplant lymphoproliferative disorder (PTLD) affects kidney transplant recipients after several years with heterogenous clinical manifestations
- PTLD is strongly associated with previous treatment for graft rejection
- Early death was more common than what is seen in non-PTLD lymphomas, probably due to co-morbidity and increased infectious complication
- Better supportive care and an individualized treatment approach seems important

51ERA-EDTA
676--MP
N) Renal Transplantation. N1) Transplantation basic science and immune-tolerance of allogenic and xenogenic transplants.
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DOI: 10.3252/pso.eu.51era.2014
Poster presented at: 51 ERA-EDTA CONGRESS AMSTERDAM THE NETHERLANDS MAY 31 JUNE 2 2014
PosterSessionOnline.com