

## RISK STRATIFICATION ACCORDING TO KDIGO CHRONIC KIDNEY DISEASE GUIDELINE IN KIDNEY TRANSPLANT RECIPIENTS

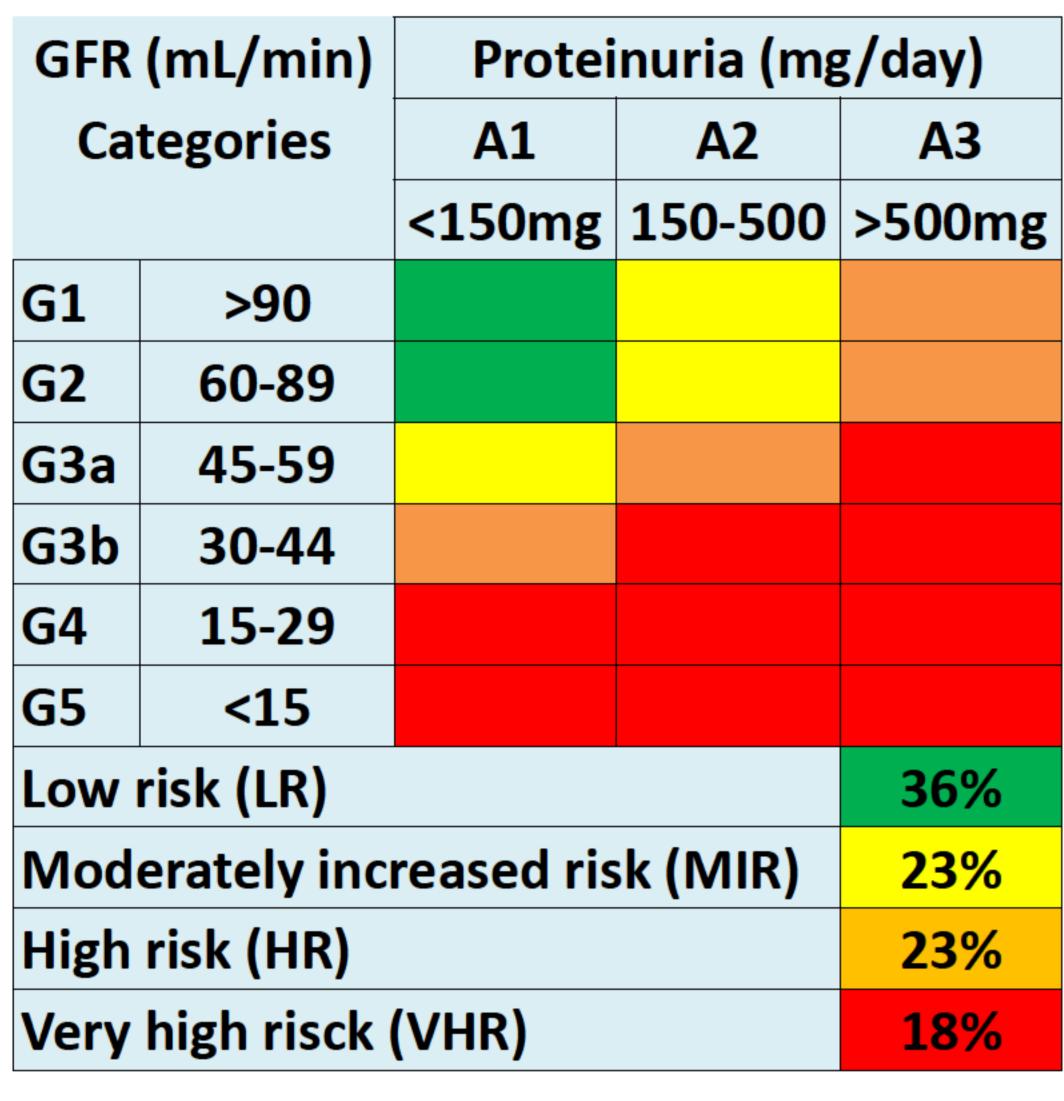


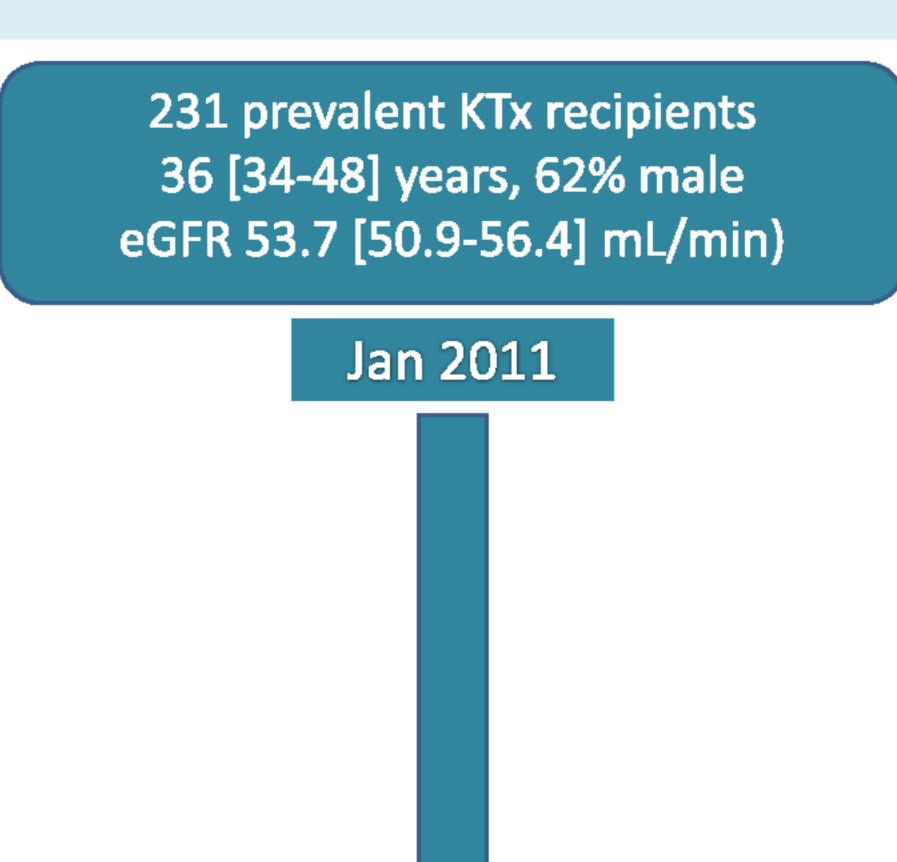
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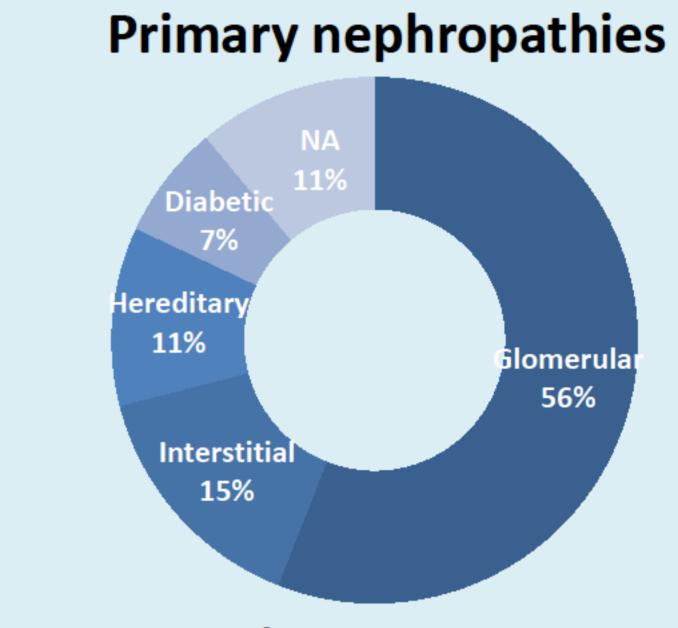
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## **BACKGROUND**

In the 2012 Kidney Disease Improving Global Outcomes (KDIGO) guidelines on Chronic Kidney Disease (CKD), kidney transplant (KTx) recipients are defined as having CKD, regardless of their estimated glomerular filtration rate (eGFR). These guidelines also defined stratification of the risk for an adverse outcome based on eGFR and albuminuria classes. However, if such a stratification is suitable in KTx patients was not yet investigated.



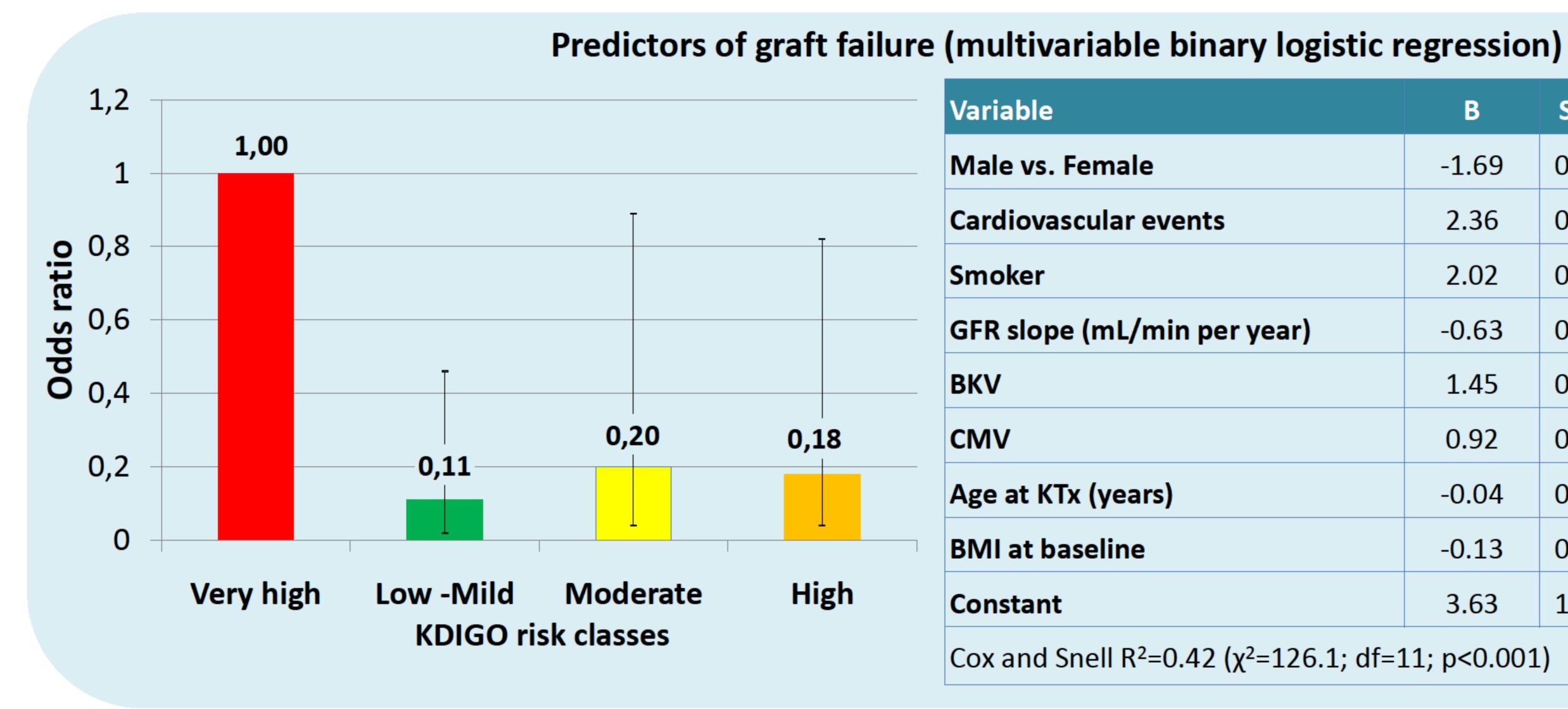




- Pre-emptive KTx 22%
- Living donors 59%
- Median mismatch 3 [2-4]
- Anti HLA positive 8%
- Anti donor specific HLA 6%
- Calcineurin inhibitors 95%

	ENDPOINT (n=51) >30% decline in eGFR/ Dialysis initiation/death	NO ENDPOINT (n=180)	þ		
Age (years)	30 [26-33]	37 [35-40]	<0.001		
Female (%)	51	35	0.03		
Anti-donor specific HLA (%)	18	2	<0.001		
Compliance to treatment (%)	80	92	0.02		
Smokers (%)	18	6	0.009		
Time averaged proteinuria (mg/24h)	874.5 [399.6-1349.3]	258.7 [171.9-345.5]	<0.0001		
eGFR slope (mL/min/year)	-3.17 [-4.132.21]	0.81 [0.45-1.3]	<0.0001		

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Variable	В	S.E.	Exp(B) (95% CI)	Р	
Male vs. Female	-1.69	0.53	0.18 (0.04-0.82)	0.001	
Cardiovascular events	2.36	0.77	10.66 (2.32-48.94)	0.002	
Smoker	2.02	0.76	7.59 (1.69-33.99)	0.008	
GFR slope (mL/min per year)	-0.63	0.09	0.52 (0.43-0.64)	<0.001	
BKV	1.45	0.72	4.29 (1.03-17.79)	0.044	
CMV	0.92	0.55	2.51 (0.85-7.40)	0.095	
Age at KTx (years)	-0.04	0.02	0.96 (0.92-1.00)	0.059	
BMI at baseline	-0.13	0.07	0.87 (0.76-1.00)	0.064	
Constant	3.63	1.74	37.86	0.037	
Cox and Snell R²=0.42 (χ²=126.1; df=11; p<0.001)					

## CONCLUSIONS

- KTx recipients are group of CKD patients with unique comorbidities which impact survival and could compound factors used in KDIGO risk stratification.
- Risk group stratification in KTx patients according to KDIGO guideline on CKD may prove useful, but further studies on large cohorts are needed for validation.

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