



## ARE PATIENTS WITH FAMILIAL MEDITERRANEAN FEVER (FMF) GOOD CANDIDATES FOR RENAL TRANSPLANTATION (RT)?

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### Background, aims

The most severe complication of FMF is potentially preventable amyloid nephropathy (AN), leading to end stage renal disease.

The aim of this study is to evaluate results of renal transplantation in pts with FMF and AN.

### Methods

Fifteen pts (12.6% of all Tx pts) with FMF and presumably AN were transplanted from living-related donors. The mean age was  $36.5 \pm 11.3$  years, 10 men. The donors' mean age was  $42.7 \pm 8.2$  years, 9 women. Immunosuppression (IS): induction therapy (mainly in case of sensitization; n=3), prednisolone, cyclosporine A (Cs A) or tacrolimus and antimetabolites (azathioprine or mycophenolate mofetil (MMF)). Colchicine was added after 1 week in all, starting dose - 0.5 mg/day.

### Results

Twelve pts are followed up at our center; one emigrated, one returned to HD and one died 1 month after RT from systemic amyloidosis. The main complications presented on **Table 1**.

One- and 5-year **graft** survival is 92.3%.

One- and 5-year **pts'** survival is 92.9%.

All pts have stable graft function. Mean serum creatinine in patients with a functioning graft (n =12) was  $113 \pm 26.3$   $\mu\text{mol/l}$  (75-161), eGFR by CKD-EPI formula is  $67.8 \pm 21.8$  ml/min (33.6-97.1). No patient had proteinuria exceeding 0.5 g/l.

### Conclusions

- RT in carefully selected patients with FMF is as effective as in recipients with other diseases.
- Comparison of RT results in pts with FMF versus general population revealed no significant differences in the incidence of acute rejection, as well as graft and patients' survival (**Fig.1**).
- Colchicine in general is well tolerated. The combination of the basic IS medications with colchicine requires careful titration of individual doses.

**Table 1. Main complications after renal transplantation, n=15**

#### a) Complications related to RT

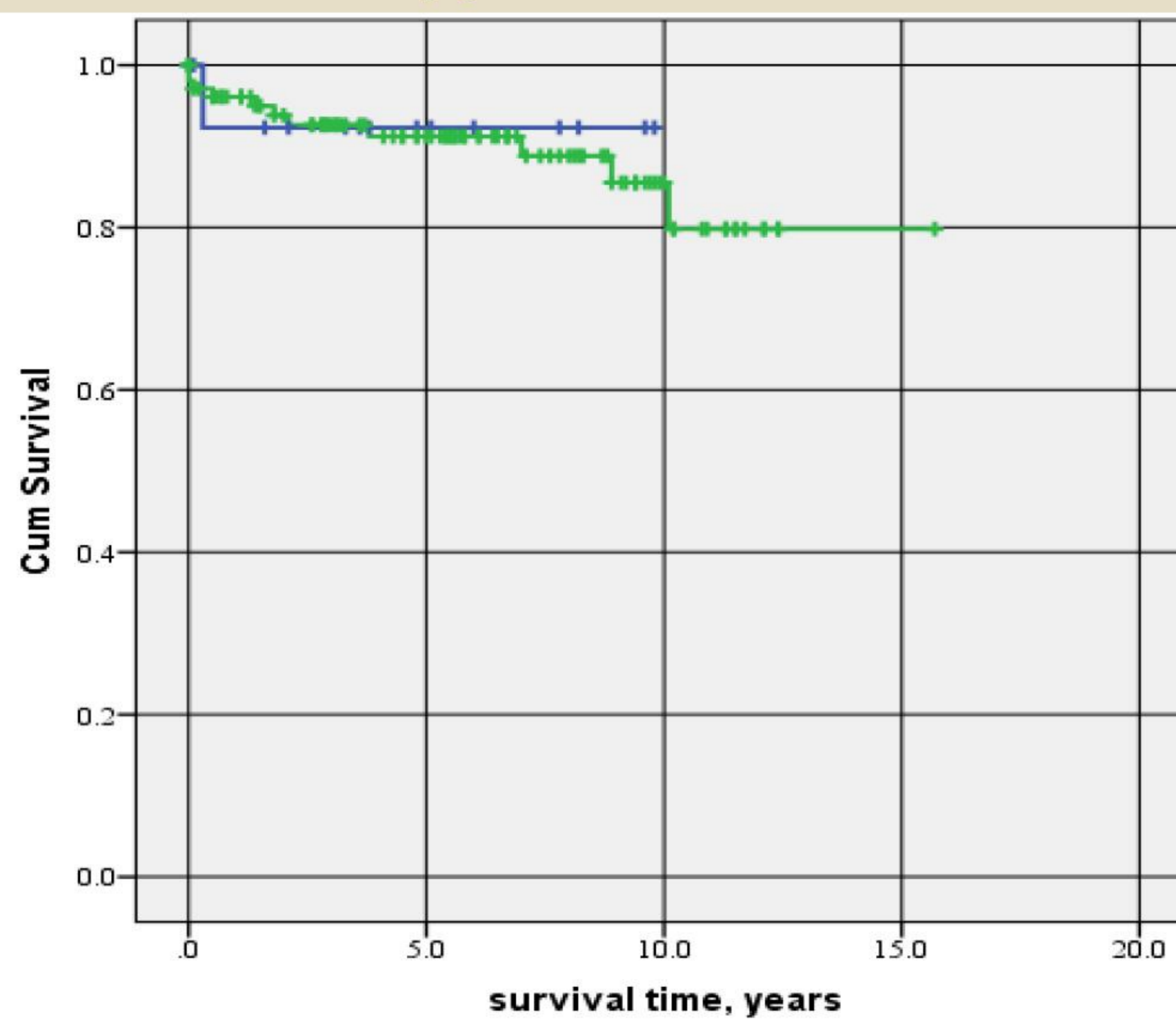
Complications	n
acute rejection	8
acute tubulonecrosis	2
lymphocele	2
urethral stricture	1
transient hyperglycemia	1
CMV disease	1
pulmonary tuberculosis	1
basal cell carcinoma	1
distal ureteral necrosis	1

#### b) Complications related to FMF

Complications	n
FMF attacks	11
frequent FMF attacks after conversion from Cs A to tacrolimus	2
Side effects of colchicine & IS	
diarrhea	8
severe myalgia	3
Recurrent renal amyloidosis (after 2.4 years)	1

**Fig. 1. Graft and pts' survival: comparison between pts with FMF and other native kidney diseases (log rank >0.05).**

#### a) graft survival



#### b) patients' survival

