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## IgA nephropathy in patients receiving a renal transplant

Lemes-Canuto APPS, de Sandes-Freitas TV, Medina-Pestana JO and Mastroianni-Kirsztajn G Hospital de Base de Brasilia, Brazil

**Background:** IgA nephropathy (IgAN) is the third most frequent cause of renal graft loss among patients with primary glomerulonephritis.

**Objectives:** To assess clinical and laboratorial profile of patients with pre and/or post transplant IgAN, in addition to patient and graft survival in both groups.

**Design:** Data from 146 patients who had received a renal transplant were retrospectively collected and were divided in two groups: group 1-patients with biopsy-documented IgAN as the underlying native kidney disease (n 1/4 128); group 2-patients who developed post-transplant IgAN independent of the underlying disease (n 1/4 18). Participants: Patients submitted to renal transplantation (1998–2010) with pre and/or post transplant IgAN.

Measurements: Clinical and laboratorial evaluation of renal function of 146 post transplant IgAN patients.

**Results:** Recipients and deceased donors exhibited a higher degree of HLA compatibility (1.0 vs. 2.5 mismatches for groups 1 and 2, respectively). The main post-transplant IgAN presentation was haematuria associated with non-nephrotic proteinuria (44.4%). A histological pattern of focal segmental glomerulosclerosis was observed in 59.2% of biopsy samples. The 10-year patient survival was 93.5% in group 1 and 100% in group 2, and the graft survival rates were 58.5 and 87.2%, respectively.

**Conclusion:** The rate of post-transplant IgA diagnosis in our case series was 11%, and IgAN was diagnosed late in the course of transplantation. In most cases, IgAN manifested as haematuria and non-nephrotic proteinuria, without renal graft dysfunction, and this picture might explain late indication of graft biopsies. The 10-year patient survival rates were excellent.

## Biography

Lemes-Canuto APPS has completed her graduation in Medicine at the University of Ribeirao Preto/UNAERP (2003). She has a specialist title in Nephrology by the Brazilian Society of Nephrology, and Master's degree in Health Sciences by the Federal University of Sao Paulo/UNIFESP, in the area of Nephrology/Glomerulopathy. At present, she works as a Nephrologist in an outpatient clinic in the area of Glomerulopathies in Federal District and in the Clinic of Uraemia in the Hospital of the University of Brasilia/UNB-HUB.

appslcanuto@uol.com.br

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