

9th International Conference on**Nephrology: Kidney & Therapeutics**

September 29-30, 2016 Orlando, USA

A model of improved acute antibody mediated rejection in murine renal transplantation

Zhao Da-qiang, Li Si-wen, Liao Tao, Huang Zheng-yu, Han Fei, Hua Xue-feng, Li Heng and Sun Qi-quan

Third Affiliated Hospital of Sun Yat-sen University, China

6-8 weeks old male C3H and Balb/c mice were used as skin or kidney graft donors and recipients. Donor specific antibody (DSA) levels of recipient serum were monitored within 100 days post skin presensitization. Recipient animals were divided into three groups: The ever reported method group (ST-7dTx) and improved method groups (ST-4dTx, ST-3dTx). Recipient animals were presensitized by transplanting skin grafts before seven, four and three days of kidney transplantation in ST-7dTx, ST-4dTx and ST-3dTx groups. Animal survival time was recorded. The diagnosis of renal antibody mediated rejection (AMR) was evaluated based on Banff 2013 criteria. DSA-IgG level continuously elevated within 50 days after presensitized by skin transplantation and kept a plateau within 50-100 days. DSA-IgM level did not increase remarkably within 100 days post skin presensitization. The median survival time of ST-7dTx, ST-4dTx, and ST-3dTx groups were four, seven and nine days. All recipient animals in ST-7dTx and ST-4dTx groups died within 14 days post kidney transplantation. 17% recipients in ST-3dTx acquired long-term survival (>60d). The dominant death reason for all animals was acute AMR of renal grafts, which met Banff 2013 criteria. Recipient animals in improved models survived and allowed longer time for intervening AMR. So, the improved model is superior to the ever reported one. Some recipient animals in ST-3dTx group can survive, which may interfere the observation results when applying the model to evaluating the effects of therapeutic strategies for renal graft AMR, so ST-4dTx is a more idea murine acute AMR kidney transplantation model.

zhaodaq@mail.sysu.edu.cn

Theophylline toxicity leading to suicidal ideation in a patient with no prior psychiatric illness

Jyotsana Thakkar

Long Island Jewish Hospital, USA

Introduction: Suicidal behavior is a common psychiatric emergency and is frequently associated with history of prior suicide attempts and underlying psychiatric disorders. We report a case of a patient with no prior psychiatric history who attempted to commit suicide in the setting of theophylline overdose.

Case Summary: A 71 year old morbidly obese female with past medical history of diabetes mellitus, hypertension and obstructive sleep apnea was brought to our hospital for attempted suicide by cutting her wrist with pair of scissors. She did not have any reported history of psychiatric disorder. Patient developed generalized tonic clonic seizures and atrial fibrillation with rapid ventricular response. She was recently started on oral sustained release theophylline by her pulmonologist to improve respiratory drive for obstructive sleep apnea. Her serum theophylline level on presentation was 37.1 mcg/ml (therapeutic range, 10-20 mcg/ml). Patient was diagnosed to have acute psychosis and suicidal ideation due to theophylline toxicity.

Conclusion: Neuropsychiatric manifestations related to theophylline toxicity are well described in literature. We report a case of theophylline toxicity manifesting as suicidal ideation in a patient with no prior psychiatric illness.

jyotsanathakkar@gmail.com