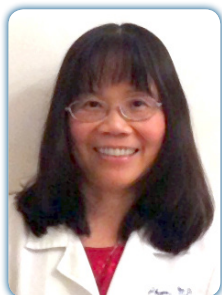


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Management of patients with a failed kidney transplant: Immunosuppression weaning, dialysis re-initiation, and transplantectomy

Over the past decade, patients returning to dialysis after a failed transplant comprised of 5-10% of the annual number of dialysis initiation in the United States. Notably, the United States Renal Data System (USRDS) database revealed a greater than 3-fold increase in the annual adjusted death rates for patients returning to dialysis after graft loss compared with those with a functioning graft (9.4% vs. 2.8%, respectively). Analysis of the Canadian Organ Replacement Registry database similarly demonstrated a greater than 3-fold increase in the risk of death among patients with a failed allograft compared with those with a functioning graft (aHR 3.39; $p < 0.0001$). Continuation of low-dose immunosuppression to maintain residual allograft function has been suggested as a contributing factor, presumably via treatment-related infectious and cardiovascular complications, among others. In contrast, a survival advantage in maintaining patients on long-term immunosuppression after returning to peritoneal dialysis has been suggested. Whether early versus late re-initiation of dialysis or whether allograft nephrectomy has an impact on patient survival remains poorly defined. Consensus guidelines for the management of a failed allograft are lacking. An overview of the literature on the management of immunosuppression after graft failure, ideal timing of dialysis re-initiation and indications for allograft nephrectomy will be presented. The author's perspectives on the management of immunosuppression after graft failure and indications for allograft nephrectomy will also be discussed.

Biography

Phuong-Thu Pham is Associate Clinical Professor of Medicine, Nephrology Division, David Geffen School of Medicine at UCLA and Director of Outpatient Services, Kidney Transplant Program. Her areas of interest include new onset diabetes mellitus after transplantation, pretransplant cardiovascular screening, post-transplant cardiovascular disease, glomerular disease recurrence following transplantation, BK virus screening and management following kidney transplantation, and acute and chronic kidney injury following liver transplantation. Her interests in these topics have resulted in publications in well-known Nephrology textbooks and journals as well as invitations to speak at both national and international meetings. She has also served as a reviewer for over twenty major journals and an editorial board member for the Case Reports in Nephrology and Transplantation Technologies and Research journals.

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