Renal transplant in children: what balance sheet since 2007?

A. Jebli, F. Tayebi, D. Amer, N. Mtioui, S. Elkhayat,
M. Zamed, G. Medkouri, M. Benghanem, B. Ramdani
Service de néphrologie, CHU Ibn Rochd, Casablanca, Maroc

Introduction:

Kidney transplant is the treatment of choice for the children suffering from terminal chronic renal insufficiency because it allows a better rehabilitation and survival, however it constitutes to a real surgical challenge since the small size of vessels and ureters involves an increased risk of urological complications.

Purpose :

The purpose of our study is to review the peculiarities of this type of operation in children.

Materials and Methods:Retrospective study from January 2007 till December 2016 was based essentially on the study of the data of medical cases.

Results:

we brought together 19 pediatric transplants, the averge age was of 11,45 years, with a female predominance of 57,14 %, the averge weight was of 31,23Kg, the cause of dialysis was dominated by urogical malformations in 42,85 % of the cases, the transplant was preemptive in two cases. In 100 % of the patients, the donor was alive in which the mother was the donor in 50 % of the cases. A preliminary surgical preparation was made in 64,28 % of the children with 25 % of ureterovesical reimplantation. The evolution was good with an average of creatinin level 6,03 mg/l and the main complications were the dilatation of calices (12,5 %) and urinome in a case.

Conclusion:

It is about a growing development in our country that needs cooperation between pediatrician, pediatric surgeon, nephrologist and urologist.